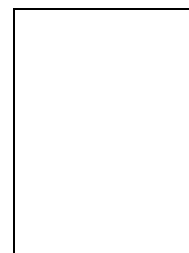




## APPLICATION FOR ENROLMENT Grade R



### PLEASE INITIAL ALL PAGES

#### 1. LEARNER INFORMATION

SURNAME: \_\_\_\_\_ FIRST NAMES: \_\_\_\_\_  
NICKNAME: \_\_\_\_\_ MALE/FEMALE: \_\_\_\_\_  
DATE OF BIRTH: \_\_\_\_\_ IDENTITY NUMBER: \_\_\_\_\_  
Place of Birth: \_\_\_\_\_  
RACE: \_\_\_\_\_ HOME LANGUAGE: \_\_\_\_\_  
CITIZENSHIP: \_\_\_\_\_ (If not SA please supply relevant Home Affairs Documents)  
HOME ADD: \_\_\_\_\_  
POSTAL :ADDRESS: \_\_\_\_\_  
Postal Code: \_\_\_\_\_  
PHONE NO: \_\_\_\_\_

#### 2. FAMILY INFORMATION

2.1 FATHER'S NAME: \_\_\_\_\_  
FATHER'S ID NO \_\_\_\_\_  
OCCUPATION: \_\_\_\_\_  
CURRENT EMPLOYER: \_\_\_\_\_ PERIOD EMPLOYED \_\_\_\_\_  
ADDRESS: \_\_\_\_\_  
WORK PHONE: \_\_\_\_\_ CELL PHONE: \_\_\_\_\_  
E-MAIL ADDRESS: (Work) \_\_\_\_\_  
E-MAIL ADDRESS: (Private) \_\_\_\_\_  
2.2 MOTHER'S NAME: \_\_\_\_\_  
MOTHER'S ID NO \_\_\_\_\_  
OCCUPATION: \_\_\_\_\_  
CURRENT EMPLOYER: \_\_\_\_\_ PERIOD EMPLOYED \_\_\_\_\_  
2.3 ADDRESS: \_\_\_\_\_  
WORK PHONE: \_\_\_\_\_ CELL PHONE: \_\_\_\_\_  
E-MAIL ADDRESS: (Work) \_\_\_\_\_  
E-MAIL ADDRESS: (Private) \_\_\_\_\_  
2.4 PERSON RESPONSIBLE FOR ACCOUNT: \_\_\_\_\_  
2.5 PERSON RESPONSIBLE FOR COLLECTION: \_\_\_\_\_  
2.6 PARENT'S MARITAL STATUS: \_\_\_\_\_  
2.7 BROTHERS & SISTERS: (List names and ages  
\_\_\_\_\_

**3. PRESENT SCHOOL RECORD**

3.1. SCHOOL'S NAME: \_\_\_\_\_ TEL NO: \_\_\_\_\_

Email Address: \_\_\_\_\_

3.2. HAS YOUR CHILD BEEN DIAGNOSED WITH (ADD OR ADHD) OR ANY OTHER LEARNING DIFFICULTY, (yes/No) if YES, EXPLAIN WHAT COURSE OF ACTION IS BEING FOLLOWED:

\_\_\_\_\_

3.3 WHAT GRADE IS YOUR CHILD CURRENTLY IN? \_\_\_\_\_

3.5 HOW DID YOU HEAR ABOUT HOPE RESTORATION COLLEGE?

\_\_\_\_\_

3.6 WHAT IS YOUR REASON FOR SELECTING HOPE RESTORATION COLLEGE?

\_\_\_\_\_

**4. DOCUMENTATION TO BE ATTACHED WITH APPLICATION**

- \* CERTIFIED COPIES OF BOTH PARENTS ID'S
- \* COPY OF BIRTH CERTIFICATE
- \* LATEST COPY OF RATES ACCOUNT/COPY OF YOUR CURRENT SIGNED RESIDENTIAL LEASE AGREEMENT
- \* LATEST COPY OF ELECTRICITY ACCOUNT
- \* WRITTEN TESTIMONIAL FROM PREVIOUS SCHOOL
- \*TWO ID SIZED PHOTOS OF THE CHILD

**5. DIAGNOSTIC TESTING**

DIAGNOSTIC TESTING MAY NEED TO BE COMPLETED BY THE CHILD AT THE SCHOOL AT A COST OF R700 (THIS IS NON REFUNDABLE AND DOES NOT GUARANTEE ACCEPTANCE)

**6. CREDIT CHECK**

As part of our application to enroll \_\_\_\_\_ (Child's Names) with Hope Restoration College, we hereby give consent for Hope Restoration College complete a full credit and reference check to confirm that all the above details listed are all correct.

FATHER'S SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

MOTHER'S SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

You will be contacted to schedule an appointment for your child to take the Diagnostic Test as soon as (items 1-3) of the criteria below have been met.

Pending the results of the diagnostic test, you will be invited to complete the Parents Interview with the Senior Administrator & Principal

\_\_\_\_\_

**FOR OFFICE USE**

1. CREDIT CHECKS \_\_\_\_\_
2. DOCUMENTS COMPLETE \_\_\_\_\_
3. REQUIRED ACCOMPANYING DOCUMENTS REQUESTED \_\_\_\_\_
4. DIAGNOSTIC TEST RESULTS \_\_\_\_\_

Hope Restoration College is run on corporate governance principles which include strict finances

**1. PAYMENT OF FEES**

1.1 All fees are payable monthly in advance, for 12 month of the year, including holiday months.

- A full calendar months' notice in writing is required if a child is leaving the school – otherwise you have to pay that month
- Invoices and statements are sent out for the following month not later than the 27<sup>th</sup>, or by the last day of a holiday.
- Full payment of all fees is required by the 1<sup>st</sup> of the month.
- If your account is up to date and your fees for the next month have been paid before the 1<sup>st</sup> (as registered school's bank statement or as per receipt) you will receive a credit of 3% of that month's full invoice statement.

**1.2 LATE PAYMENT OF FEES?**

- Late payment of fees is unacceptable!
- Early payment (before the 1<sup>st</sup>) is rewarded.
- There is a window period for payment until the 5<sup>th</sup> of the month.
- If your account is not up to date by the 5<sup>th</sup> of the month you will notified by telephone/letter/email immediate settlement is required
- If your account is still not up to date by the 7<sup>th</sup> of the month, your child is automatically suspended from the school with immediate effect until you have settled in full and have furnished proof of such payment in the office.
- If by the end of the month (30 days account) you have not settled your full account your child will be suspended and your account may be handed over for collection. 15% interest on arrears will be instituted.
- Should your account be handed over your for collection you will then become liable for the additional legal administrative cost added by the debt collection agency.
- Once your account has been handed over your child is de-registered and will not be permitted to return unless he/she is re-registered and the full registration fee is paid again. The school reserves the right of application for re-registration.

**1.3 ACCOUNT QUERIES**

- If you wish to query your account do not withhold or delay your required regular payments!
- Contact our Bookkeeper on 011 976 0600/1 during school hours or email: Ntibi@hrm.org.za

**1.4 ANNUAL PAYMENT DISCOUNTS**

- The school will be prepared to offer an 10% discount if full annual fees for tuition, life skills, School Development Levy and estimated use of PACES's is paid in full by 31 December 2013 The amount of this discount will be entered as a credit balance in your account and will be offset against usage through the year. A reconciliation will be done in November 2014 Please remember that any other expenses that may be invoice during the year (e.g. Honour Roll, Spelling, etc. must be paid by no later than the 7<sup>th</sup> of the month, failing which the child will be suspended until the fees due are fully paid.