



# APPLICATION FOR ADMISSION

(R300.00 Administration Fee)

Application Date

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## DETAILS OF PUPIL

SURNAME: \_\_\_\_\_ FULL FIRST NAMES: \_\_\_\_\_

DATE OF BIRTH: DAY \_\_\_\_\_ MONTH \_\_\_\_\_ YEAR \_\_\_\_\_

CHILD'S ID NUMBER: \_\_\_\_\_ GENDER: MALE  FEMALE

## DETAILS OF PARENTS/GUARDIAN

FULL NAME OF FATHER: \_\_\_\_\_ ID NUMBER: \_\_\_\_\_

CAREER: \_\_\_\_\_ EMAIL ADDRESS: \_\_\_\_\_

RESIDENTIAL ADDRESS: \_\_\_\_\_

TEL NO. (W) \_\_\_\_\_ (H) \_\_\_\_\_ (CELL) \_\_\_\_\_

FULL NAME OF MOTHER: \_\_\_\_\_ ID NUMBER: \_\_\_\_\_

CAREER: \_\_\_\_\_ EMAIL ADDRESS: \_\_\_\_\_

RESIDENTIAL ADDRESS: \_\_\_\_\_

TEL NO. (W) \_\_\_\_\_ (H) \_\_\_\_\_ (CELL) \_\_\_\_\_

## NAME AND ADDRESS OF PREVIOUS SCHOOL ATTENDED BY APPLICANT (IF APPLICABLE)

School: \_\_\_\_\_ from Grade \_\_\_\_\_ to Grade \_\_\_\_\_

Date of leaving last school: \_\_\_\_\_ Last Grade passed: \_\_\_\_\_

**HAS THE APPLICANT EVER REQUIRED REMEDIAL INTERVENTION - OCCUPATIONAL THERAPY / PHYSIOTHERAPY / PSYCHOLOGICAL ASSESSMENT / ANY OTHER THERAPY?** YES  NO

If YES, please supply details: (use a separate page, if necessary) \_\_\_\_\_

## MEDICAL HISTORY

State any important illness from which the Applicant has suffered/suffers (e.g. Asthma, Epilepsy, Allergies, etc.)

\_\_\_\_\_

Note: Has your child had all his/her compulsory immunizations? YES  NO

Any other relevant information: \_\_\_\_\_

### **THE FOLLOWING MUST ACCOMPANY THIS APPLICATION:**

- A copy of the applicant's most recent report
- A copy of all assessments
- A letter motivating why Forres Preparatory School is your school of choice.
- A non-refundable administration fee of R300.00

On receipt of this form the applicant's name will be placed on file. Acceptance of this application does not imply final acceptance of the applicant.

### **DECLARATION AGREEMENT**

I, \_\_\_\_\_ parent/legal guardian of \_\_\_\_\_

understand that this application will be registered once this form is returned to the school together with the applicant's latest school report, copies of all assessments and administration fee (where appropriate).

\_\_\_\_\_  
Signature of parent/legal guardian

\_\_\_\_\_  
Date

### **BANK DETAILS** *(Please use your child's name as a reference)*

ACCOUNT NAME: **FORRES SCHOOL**

BANK: **ABSA**

ACCOUNT NO. **450148512**

BRANCH CODE: **632005**

ACCOUNT TYPE: **CHEQUE**

SWIFT CODE: **ABAZAJ**

## **APPLICATION PROCEDURE**

### **STEP 1**

- Complete the application for Admission Form. Make sure the form is signed.
- An administration fee of R300.00 must accompany the application – this fee is not refundable. (Your application cannot be processed without payment of the administration fee).
- Applications must be accompanied with a copy of your child's most recent Report (not originals please).
- Copies of any medical, psychological or therapists' reports and assessments, if there are any, to accompany Application.
- A letter motivating why Forres is your school of choice.

### **STEP 2**

- Once processing of Application begins or a place becomes available you will be contacted and an interview will be arranged with the Head.
- After the interview a faculty meeting is arranged and the application is reviewed.
- You will be notified telephonically and in writing that your child has been accepted.
- A screening test may be required for placement purposes.

### **STEP 3**

- A short interview with the Bursar where you complete the Acceptance of Place Forms. Make sure the forms are signed.
- A non-refundable Admission Fee of R3 500.00 must be paid to secure your child's place.
- After signing the Acceptance of Place Form, a term's fees will be payable whether or not your child actually attends the school. Please provide the Bursar with a post-dated cheque.

**ANY QUERIES PLEASE CALL 021 689 2727 BETWEEN 08H00 AND 15H00**

**PLEASE FAX OR EMAIL PROOF OF PAYMENT (R300.00 ADMINISTRATION FEE) TO  
021 686 9944 or [admin@forres.co.za](mailto:admin@forres.co.za)**