



# GREY KOLLEGE PRIMÊR AANSOEK OM TOELATING

## VIR KANTOORGEBRUIK

Debiteurs nr: \_\_\_\_\_

Toelatingsnr: \_\_\_\_\_

Datum toegelaat: \_\_\_\_\_

Gr: \_\_\_\_\_

Onderwyser/Teacher: \_\_\_\_\_

## Volmag en Onderneming

LW - Dit is verpligtend dat 'n afskryf van u seun se  
GEBORTESERTIFIKAAT asook 'n afskryf van sy jongste  
SKOOLRAPPORT u aansoek vergesel.

Het hy huidiglik 'n broer in Grey Preprimêr of Grey Primêr? \_\_\_\_\_ Indien wel, in watter  
Gr? \_\_\_\_\_

Graad waarvoor aansoek gedoen word? Gr \_\_\_\_\_

## Leerderinligting:

Van: \_\_\_\_\_

Voorletters: \_\_\_\_\_

Geboortename: \_\_\_\_\_

Noemnaam: \_\_\_\_\_

Geboortedatum: \_\_\_\_\_

Ras: \_\_\_\_\_

ID nr: \_\_\_\_\_

## Kontak besonderhede:

Woonadres: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Huis tel: \_\_\_\_\_

Vader sel: \_\_\_\_\_

Moeder sel: \_\_\_\_\_

Burgerskap van leerder RSA  Ander

Indien ander, spesifiseer land \_\_\_\_\_

Huistaal: \_\_\_\_\_

Onderrigtaal: Afr  Eng

Ouers Oorlede: Moeder  Vader  Albei  Geen

Metode van vervoer na skool: \_\_\_\_\_

Kerkverband: \_\_\_\_\_

Sport en Kultuur deelname: \_\_\_\_\_

Provinsiale kleure: \_\_\_\_\_

Preprimêre opleiding ontvang by: \_\_\_\_\_

## Vorige Skool:

Geen  Skool in die provinsie

Skool in ander provinsie  Skool in ander land

## Vorige Skool Besonderhede:

Naam van skool \_\_\_\_\_

Adres van Skool: \_\_\_\_\_

Provinsie \_\_\_\_\_

Land \_\_\_\_\_

## Mediese Besonderhede:

Mediese fonds nommer: \_\_\_\_\_

Naam van fonds: \_\_\_\_\_

Naam van Hooflid: \_\_\_\_\_

Naam van Dokter: \_\_\_\_\_

Tel. \_\_\_\_\_

Enige Mediese Toestand: \_\_\_\_\_

Is u seun Regshandig  of Linkshandig?

Getal kinders in gesin  Posisie in gesin bv. Eerste = 1

**Spesiale probleme wat berading benodig:**

\_\_\_\_\_

\_\_\_\_\_

**FAMILIE INLIGTING****Inligting van Ouer/Voog**

Titel: \_\_\_\_\_  
 Voorletters: \_\_\_\_\_  
 Van: \_\_\_\_\_  
 Geboortenaam: \_\_\_\_\_  
 Noemnaam: \_\_\_\_\_  
 Geslag : \_\_\_\_\_  
 Huistaal: \_\_\_\_\_  
 Ras: \_\_\_\_\_  
 ID nr: \_\_\_\_\_

Woonadres: \_\_\_\_\_ Huis Tel: \_\_\_\_\_  
 \_\_\_\_\_ Werk Tel: \_\_\_\_\_  
 \_\_\_\_\_ Faks nr: \_\_\_\_\_  
 \_\_\_\_\_ Selnr: \_\_\_\_\_  
 \_\_\_\_\_ Epos: \_\_\_\_\_

Beroep : \_\_\_\_\_  
 Werkgewer: \_\_\_\_\_  
 Verwantskap tot leerder: \_\_\_\_\_  
 Huwelikstatus: \_\_\_\_\_

**Besonderhede van 2de Ouer woonagtig by die selfde adres:**

Van: \_\_\_\_\_ Voorletters: \_\_\_\_\_  
 Naam: \_\_\_\_\_ Beroep : \_\_\_\_\_  
 ID nr: \_\_\_\_\_ Geslag : \_\_\_\_\_  
 Selnr: \_\_\_\_\_ Werk Tel nr: \_\_\_\_\_  
 Verwantskap tot leerder: \_\_\_\_\_  
 Huwelikstatus: \_\_\_\_\_

**Besonderhede van 2de Ouer NIE woonagtig by dieselfde adres:**

Van: \_\_\_\_\_ Voorletters: \_\_\_\_\_  
 Naam: \_\_\_\_\_ Beroep : \_\_\_\_\_  
 ID nr: \_\_\_\_\_ Geslag : \_\_\_\_\_  
 Sel nr: \_\_\_\_\_ Werk Tel nr: \_\_\_\_\_  
 Verwantskap tot leerder: \_\_\_\_\_  
 Huwelikstatus: \_\_\_\_\_  
 Adres: \_\_\_\_\_

**Korrespondensie besonderhede van persoon verantwoordelik vir rekening:**

Titel: \_\_\_\_\_ Voorletters: \_\_\_\_\_  
 Van: \_\_\_\_\_  
 Posadres: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**Betalingssooreenkoms:**

Ek onderneem om alle verskuldigde gelde jaarliks te vereffen, stiptelik voor of aan die einde van Oktober.

**VERKLARING/DECLARATION**

Ek versoek dat my seun/pleegseun toegelaat word as leerling van Grey Kollege en onderneem om my te onderwerp aan al die reëls en voorskrifte van die skool.

Ek onderneem om aan die Skoolhoof, sonder versuim kennis te gee van enige adresverandering.

Ek verleen volmag aan die Skoolhoof en/of personeel om in dringende gevalle namens my op te tree en besluite te neem.

Ek verleen vrywaring aan die skool en/of personeel indien my seun deur die skool en/of personeel vervoer sou word.

\_\_\_\_\_

\_\_\_\_\_



# GREY COLLEGE PRIMARY

## APPLICATION FOR ADMISSION

**FOR OFFICE USE**

 Debtors nr: \_\_\_\_\_  
 Admission no. \_\_\_\_\_  
 Date admitted: \_\_\_\_\_  
 Gr: \_\_\_\_\_  
 Teacher: \_\_\_\_\_

**Authorisation and Undertaking**

**NB** - It is compulsory that a copy of your son's **birth certificate**, as well as a copy of your son's **latest school report** be enclosed.

**NB** Does he currently have a brother at Grey Pre-Primary or Grey Primary? \_\_\_\_\_ If so, in what Gr? \_\_\_\_\_

**Applying for Grade** \_\_\_\_\_

**Pupil information:**

 Surname: \_\_\_\_\_  
 Initials: \_\_\_\_\_  
 Full name: \_\_\_\_\_  
 Name known by: \_\_\_\_\_  
 Date of birth: \_\_\_\_\_  
 Race : \_\_\_\_\_  
 ID nr: \_\_\_\_\_

**Contact details:**

 Residential Address: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 Home tel nr: \_\_\_\_\_  
 Father cell nr: \_\_\_\_\_  
 Mother cell nr: \_\_\_\_\_

 Citizenship of pupil RSA  Oth   
 If other, specify country \_\_\_\_\_

 Home Language: \_\_\_\_\_ Tuition Language: Afr  Eng 

 Deceased Parents: Mother  Father  Both  None 

Mode of transport to school: \_\_\_\_\_

Religion: \_\_\_\_\_

Sport and Culture participation: \_\_\_\_\_

Provincial colours: \_\_\_\_\_

Pre-primary training received at: \_\_\_\_\_

**Previous School:**

 None  School in this province   
 School in other province  School in other country 
**Details of Previous School:**

 Name: \_\_\_\_\_ Address of School: \_\_\_\_\_  
 Province: \_\_\_\_\_

**Medical Details:**

 Medical Aid Number: \_\_\_\_\_  
 Name of Medical Aid: \_\_\_\_\_  
 Name of Main Member: \_\_\_\_\_  
 Name of Doctor: \_\_\_\_\_ Tel. \_\_\_\_\_  
 Medical condition: \_\_\_\_\_

 Is the learner Right handed  or Left handed? 

 Number of children in family  Position in family eg. first = 1 

**Special problems requiring counselling.**

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## Family Detail



### Parent/Guardian Information

Title: \_\_\_\_\_  
 Initials: \_\_\_\_\_  
 Surname: \_\_\_\_\_  
 Full name : \_\_\_\_\_  
 Name known by: \_\_\_\_\_  
 Gender: \_\_\_\_\_  
 Home Language: \_\_\_\_\_  
 Race : \_\_\_\_\_  
 ID nr: \_\_\_\_\_

Residential Address: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 Home phone nr: \_\_\_\_\_  
 Work phone nr: \_\_\_\_\_  
 Fax nr: \_\_\_\_\_  
 Cell nr: \_\_\_\_\_  
 Email: \_\_\_\_\_

Occupation: \_\_\_\_\_  
 Employer: \_\_\_\_\_  
 Relationship to learner: \_\_\_\_\_  
 Marital status: \_\_\_\_\_

### Detail of second Parent living at same address

Surname : \_\_\_\_\_ Initials: \_\_\_\_\_  
 Name: \_\_\_\_\_ Occupation: \_\_\_\_\_  
 ID nr : \_\_\_\_\_ Gender: \_\_\_\_\_  
 Cell nr: \_\_\_\_\_ Work phone nr: \_\_\_\_\_  
 Relationship to Learner : \_\_\_\_\_  
 Marital status: \_\_\_\_\_

### Detail of second Parent NOT living at same address

Surname: \_\_\_\_\_ Initials: \_\_\_\_\_  
 Name : \_\_\_\_\_ Occupation: \_\_\_\_\_  
 ID nr : \_\_\_\_\_ Gender: \_\_\_\_\_  
 Cell nr : \_\_\_\_\_ Work phone nr: \_\_\_\_\_  
 Relationship to Learner: \_\_\_\_\_  
 Marital status: \_\_\_\_\_  
 Address: \_\_\_\_\_

### Correspondence details of person responsible for account:

Title: \_\_\_\_\_ Initials \_\_\_\_\_  
 Surname: \_\_\_\_\_  
 Postal Address: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

### Payment Agreement:

I undertake to pay, annually, all amounts owing, promptly before or at the end of October.

### DECLARATION

I hereby wish to apply for my son to be admitted as a pupil of Grey College and I undertake to abide by all the rules and regulations of Grey College.

I undertake to notify the Principal of any change of address without delay.

I hereby grant full authority to the Principal and/or staff to act on my behalf in cases of emergency.

I hereby grant full indemnity to the school should my son be transported by the school/staff.

SIGNATURE OF PARENT/GUARDIAN \_\_\_\_\_

DATE \_\_\_\_\_