



HATFIELD

Christian School

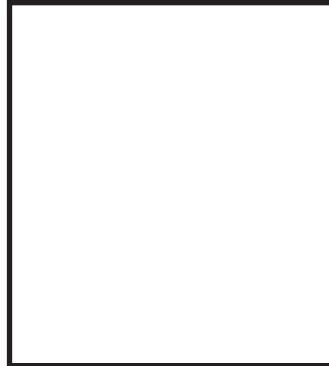
Training Leaders to Serve Nations

APPLICATION FORM

PUPIL'S NAME: _____

GRADE REQUIRED: _____

YEAR REQUIRED: _____



(Colour passport photograph)

FATHER'S SIGNATURE: _____

MOTHER'S SIGNATURE: _____

DATE OF APPLICATION: _____

Dear Parents

Thank you so much for expressing an interest in our school. Our prospectus may answer some of the questions that you have, however, please feel free to contact the school at any stage should you have further questions. The direct number for our admissions secretary is 012 361 1182. An official interview with the Principal will be arranged at a later date.

As a school we recognize that child training is essentially a parental responsibility and we exist to assist parents with the awesome task. It is our goal to serve you by working alongside you in seeing your child effectively launched into adulthood and finding his/her God-given purpose. At all times we endeavour to provide a thoroughly Christian Environment with teachers who are both suitably qualified and committed to the Lord Jesus. We endeavour to teach our subjects from a Biblical perspective thereby giving them a sound worldview.

Please furnish us with the information required and ensure that the following documents are attached to your application form.

Without this documentation, your application will not be processed.

1. Copy of your child's ID document or birth certificate.
2. Copy of your child's latest school report
3. Copy of a recent city council account.
4. Completed Pastor's recommendation form.
5. Copy of your child's immunization form and growth chart (Grade 0 – 3)
6. Colour passport photograph of your child.
7. Confidential report from the child's previous school (Grade 7 and up)
8. Financial Clearance Certificate.
9. An administration fee of R370.00 is to accompany this application.

When we have the completed application form and all the relevant documents, we will contact you to confirm receipt of the application. In the event of us contacting you for an evaluation, a fee of R900.00 is to be paid.

Owing to the limited number of places available, this process unfortunately may not guarantee your child a place at the school and the final decision is at the discretion of the Principal.

Once the School Executive has considered the application, you will be notified accordingly. If your application is successful, **an entrance fee equivalent to one month school fees is payable. Only on receipt of this deposit can we assure you of your child's place in the school.**

May God give you wisdom in selecting a suitable school.

Sincerely



GRAEME HOLLOWAY
EXECUTIVE PRINCIPAL

DETAILS OF FATHER / GUARDIAN

Surname: _____

First Names: _____

Title: _____

Preferred name: _____

ID number: _____

Date of birth: _____

Home address: _____

Postal address: _____

Home telephone number: _____

Work telephone number: _____

Cell phone number: _____

Email address: _____

Occupation: _____

Employer: _____

Marital status: _____

Church denomination: _____

Church membership: _____

Pastor's name: _____

Pastor's tel no: _____

Born again Christian: Yes No**DETAILS OF MOTHER / GUARDIAN**

Surname: _____

First Names: _____

Title: _____

Preferred name: _____

ID number: _____

Date of birth: _____

Home address: _____

Postal address: _____

Home telephone number: _____

Work telephone number: _____

Cell phone number: _____

Email address: _____

Occupation: _____

Employer: _____

Marital status: _____

Church denomination: _____

Church membership: _____

Pastor's name: _____

Pastor's tel no: _____

Born again Christian: Yes No**Name and contact number of family member or friend who can be contacted in case of emergency:**

(In event of parents/guardian not being available)

Name: _____

Relationship: _____

Home no: _____

Cell no: _____

PUPIL INFORMATION

Surname: _____ First Names: _____
 Preferred Name: _____ Present grade or level of schooling: _____
 (name used on class lists, etc)
 Gender: _____ Home Language: _____
 Race: _____
 (required by IEB/GDE)
 ID number: _____ Citizenship: _____
 Date of birth: _____ Present age: _____
 Child's email address: _____ Child's cell phone no: _____
 (if applicable) (if applicable)
 Name and grade of any siblings attending HCS: _____

MEDICAL INFORMATION

Child's doctor's name: _____ Doctor's telephone no: _____
 Medical Aid: _____ Number: _____
 Main member / Initials and Surname: _____

Does your child have any of the following:

| | | |
|-----------------------|------------------------------|-----------------------------|
| Physical disabilities | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Allergies | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Long term medication | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Occupational therapy | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Speech therapy | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Remedial therapy | <input type="checkbox"/> Yes | <input type="checkbox"/> No |

Has your child ever been:

| | | |
|-------------------------------------|------------------------------|-----------------------------|
| Expelled | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Suspended | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Involved in disciplinary hearing | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Refused admission to another school | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Recommended to repeat a year | <input type="checkbox"/> Yes | <input type="checkbox"/> No |

If you have replied **YES** to any of the above, kindly give full details:

(The school reserves the right to request an independent report where deemed necessary)

PREVIOUS SCHOOL INFORMATION

Last school attended: _____ City/ Town and Province: _____
 Telephone no: _____ Contact name and position: _____

FURTHER IMPORTANT INFORMATION:

In applying for admission to Hatfield Christian School, it is important that you understand the following:

- Your child will be taught according to the faith promulgated by the Hatfield Christian Church. A Statement of Faith of the Hatfield Christian Church is attached to this document. Adherence in lifestyle to this Statement of Faith is an inherent requirement of enrolment.
- In order for us to administer the finances of the school effectively our school fee policy is as follows:
 - **PROMPT PAYMENT** of school fees is essential for efficient administration of the school and also assists us in keeping the fees as low as possible.
 - It is a requirement that school fees be paid on the **FIRST DAY** of the month. Statements with outstanding balances are sent home before the last day of each month. Fees are paid by debit order as this not only eliminates the risk of having large amounts of money in the office, but also cuts out a lot of administration. If for any reason you are unable to pay your account timeously, please contact the accounts office.
 - The annual school fee is spread over 12 months for your convenience. Therefore, please pay promptly for the holiday periods as well.
 - After the 7th of each month, a letter will go out reminding you of outstanding amounts. Accounts not paid within 30 days will result in your child/children automatically being placed on probation at the school. Accounts unpaid after 60 days become subject to interest of 2% per month calculated from the due date.
 - We will expect parents to have made other arrangements for their children's education if the account is still unpaid after 60 days.
 - The school does not take responsibility for fees sent to school with pupils until a receipt has been issued.
 - A R370.00 fee per pupil is payable with your application (**Non-refundable**).
 - An amount of R900.00 is payable on the day of the child's evaluation (**Non-refundable**).
 - A non-refundable entrance fee, equal to one month's fee for the current year, is payable per pupil upon acceptance (**Grade 0 – 6**).
 - A non-refundable entrance fee, equal to two month's fee for the current year, is payable per pupil upon acceptance (**Grade 7 – 12**).
 - Parents sign re-enrolment forms towards the end of the year each year indicating their commitment to the school for the following year. Together with this, an amount of R1700.00 and R1400.00 (second child) is payable by the 30th of November each year. This is then offset against fees in the March of the following year.
 - If you wish to remove your child from the school, **ONE FULL TERMS NOTICE IS REQUIRED IN WRITING**. You will be responsible for payment of the school fees for the term even if the child leaves before the notice period is up. School records will be not be forwarded to the new school until payments of all outstanding accounts are finalized.

We have read and understood the School Fee Policy and agree to settle our account as specified.

Fathers Signature/Guardian: _____

Date: _____

Mothers Signature/Guardian: _____

Date: _____