



# BOSTON PRIMARY SCHOOL

## APPLICATION FOR ADMISSION

Date Application Received	FOR
Grade Applying For	OFFICE
Account (NEW / EXISTING)	USE
Grade of Sibling (NEW / EXISTING)	ONLY
Documents Outstanding	YES / NO
After-Care Application Submitted	YES / NO

**ADMISSION CANNOT BE CONSIDERED WITHOUT ALL OF THE FOLLOWING CERTIFIED DOCUMENTS:**

Child's clinic card, child's birth certificate with both parents' names included, child's most recent report if applying for Grade 2 – 7, both parents' ID documents, both parents' proof of employment (salary advice/letter from employer/3 months bank statements if self-employed), parents' proof of residence (recent utility account).

**APPLICATION IS HEREBY MADE FOR:**

GR R GR 1 GR 2 GR 3 GR 4 GR 5 GR 6 GR 7 & After-Care until 15:30 (GrR – Gr2) After-Care until 17:45 (GrR – Gr7) FROM MM / YYYY

PLEASE COMPLETE A SEPARATE APPLICATION FORM FOR AFTER-CARE

**PARTICULARS OF LEARNER:**

CURRENT GRADE  CURRENT SCHOOL & PROVINCE

SURNAME  NAME/S

GENDER  MALE  FEMALE IDENTITY NUMBER

HOME LANGUAGE  ENG  OTHER:  COUNTRY OF BIRTH

RESIDENTIAL ADDRESS

MEDICAL CONDITIONS THAT THE SCHOOL SHOULD BE AWARE OF

MEDICATION USED BY LEARNER

CONFIRM THE ILLNESSES WHICH LEARNER HAS HAD	Whooping Cough	German Measles	Mumps	Measles	Tetanus
Poliomyelitis	Diphtheria	Chicken Pox	Bilharzia	Cholera	Malaria
Scarlet Fever	Rheumatic Fever	Tuberculosis			

All learners should have been immunised against all the above illnesses before school attendance. Immunisation against poliomyelitis and tuberculosis is legally compulsory and written evidence of immunisation could be demanded when a learner is admitted to a school or hostel of the Western Cape Education Department for the first time. **A certified copy of the learners Clinic Card is to be attached to this application.**

**PARTICULARS OF PARENTS / LEGAL GUARDIANS:**

The information submitted herewith should therefore be given in respect of each parent/legal guardian, including parents who are divorced. In the case of legal guardianship, documented proof must be attached. Correspondence will be addressed to the parent with whom the learner resides.

**FATHER / PARENT 1 / LEGAL GUARDIAN 1:**

TITLE  INITIALS  SURNAME  ID NO.

CONTACT NOS. Work  Cell  Home

EMAIL ADDRESS

OCCUPATION  EMPLOYER

RESIDENTIAL ADDRESS

**MOTHER / PARENT 2 / LEGAL GUARDIAN 2:**

TITLE  INITIALS  SURNAME  ID NO.

CONTACT NOS. Work  Cell  Home

EMAIL ADDRESS

OCCUPATION  EMPLOYER

RESIDENTIAL ADDRESS

I, the undersigned, undertake to adhere to the School Policy and Code of Conduct; to recognize the authority and responsibility of the school to maintain discipline (legally teachers are *in loco parentis*) and accept that on occasion it may be necessary to include disciplinary measures; to allow my child to use school transport as and when needed and indemnify the school and staff against liability in this regard; I accept that my child will take part in extra-mural activities and sport of this school; I accept that in the case of an emergency the school will endeavor to contact the parents/legal guardians, failing which the school will contact the closest hospital. Any medical costs will be covered by the parents/legal guardians. I furthermore declare that the information submitted on this application form is correct. **I do acknowledge that submission of an application form does not mean that my child has been accepted.**

**SCHOOL ADMISSIONS OPEN ON 26 FEBRUARY 2021 AND CLOSE ON 26 MARCH 2021 FOR ENROLMENT IN 2022.  
SUBMISSION DATES ARE DETERMINED BY THE WESTERN CAPE EDUCATION DEPARTMENT**

NAME & SURNAME: \_\_\_\_\_ SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

**BOSTON PRIMARY SCHOOL  
PAYMENT UNDERTAKING FOR TUITION FEES**

I, We \_\_\_\_\_ (name and surname), the undersigned  
and residing at \_\_\_\_\_ (address),  
the parent(s) / legal guardian(s) of:

	LEARNERS SURNAME	LEARNERS NAME	LEARNERS GRADE APPLYING FOR
1	_____	_____	_____
2	_____	_____	_____
3	_____	_____	_____

understand that in terms of the SA Schools Act (Act No 84 of 1996), I am/we are liable to pay the annual Tuition Fees as determined by the School Governing Body of Boston Primary School.

I/We undertake to make this payment:

**A** **Annually** – Payment will be made in full by 31 March 2021.  
**(Early settlement discount applicable for School Fees only).**

**B** **Monthly Debit Order System** – Debit my/our bank account monthly on   
 the 1<sup>st</sup> working day of each month OR  
 the 15<sup>th</sup> working day of each month OR  
 the 26<sup>th</sup> working day of each month.  
**(February to November inclusive i.e. ten equal payments)**  
On acceptance, the debit order form will be sent to you after the budget meeting in November.

**C** **Monthly cash payment / Electronic Fund Transfer** - This is to be remitted  
on the first working day of each month and no later than the 7<sup>th</sup> of the month.  
**(1 February to 1 November inclusive i.e. ten equal payments)**

I/We understand that this undertaking remains valid for each academic year unless written notice of change is given 30 (thirty) days before such change is to become effective.

I/We undertake to submit a written proposal of alternative arrangements to the School Governing Body in the event of my/us not being able to meet this undertaking.

Should I/we fail to comply with my/our choice of payment as indicated above, the full outstanding amount becomes immediately due and payable and steps will be taken to collect all unpaid School Fees after 1 month of non-payment. Should outside agencies be appointed to recover my/our outstanding debt, I/we hereby agree to pay all costs between such agent and Boston Primary School.

Should any or all the above learners for whom I am/we are responsible, leave the School during the course of any month or term, I/we undertake to pay all outstanding Tuition Fees for the learner(s) on the last day of attendance, unless the School Governing Body approves otherwise in writing.

I/We understand that the Payment Undertaking for Tuition Fees must be renewed every year and that the amount due may vary subject to the changes in the annual fee structure as determined by the School Governing Body.

Signed at \_\_\_\_\_ this \_\_\_\_\_ day of \_\_\_\_\_

\_\_\_\_\_  
NAME & SURNAME OF PARENT 1 / LEGAL GUARDIAN 1

\_\_\_\_\_  
SIGNATURE OF PARENT 1 / LEGAL GUARDIAN 1

\_\_\_\_\_  
NAME & SURNAME OF PARENT 2 / LEGAL GUARDIAN 2

\_\_\_\_\_  
SIGNATURE OF PARENT 2 / LEGAL GUARDIAN 2