

## STUDENT APPLICATION FORM 2022



Mqele Administrative Area

Elliotdale

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### THE FOLLOWING DOCUMENTS ARE COMPULSORY :

1. A Non- refunded application fee of R100
2. A Non- refunded registration fee of R 500
3. A Non- refundable tuition fee of R 200 per subject
4. Copy of most recent school report.
5. Certified Copy of ID.
6. Certified copy of I.D for parent/ guardian
7. 2022 Proof of Registration from Department of Education

**Banking details:** Bank: Absa Bank; Branch Name: JHB Inn City;  
Branch Code: 632005; Cheque Account Number: 4102720996

**Account Name:** Loyiso Keti Educational Centre (PTY) LTD

### PLEASE NOTE:

It is a responsibility of a student to register with department of education, all cost occurred during registration & examination at your centre allocated by Department of Education will be your responsibility as well.

**A. SECTION A**

**STUDENT INFORMATION**

First Names:

Middle Name:

Surname:

I.D:

Gender:

Country:

Nationality:

SA Citizen:

Cell phone 1:

Cell phone 2:

Email Address:

Disability:

Current/Last School attended:

Address

**B. PARENT/GUARDIAN/SPONSOR INFORMATION**

First Name:

Middle Name:

Surname:

I.D. No:

Relationship:

Cell phone 1:

Cell phone 2:

Email Address:

Address

### C. SUBJECT INFORMATION

**Note:**

**It is compulsory for student to choose minimum of three or more subjects.**

#### Subject Choices

<b>Subjects</b>	<b>Mark with X</b>
English	
IsiXhosa	
Life Science	
Maths	
Physics	
Geography	
Agriculture	

### D. PARENT/SPONSOR & LEARNER CONTRACT

1. I will be loyal to the school, and will encourage my child to identify with the school's ideals, and to obey the school rules.
2. I give permission that my child may participate in any of the extra-curricular activities organized by the school. This includes sporting and cultural activities as well as excursions/tours. I understand that reasonable precautions will always be in place to ensure the safety of children. I further understand that some activities may imply additional costs and I expect to be consulted on this matter before my child is asked to participate.
3. I accept full responsibility for the prompt payment, in advance, of all school fees and legitimate expenses as indicated on duly rendered school accounts. I understand that I may be asked to withdraw my child if I am not able to settle my account.

4. I hereby undertake and bind myself to pay any costs, including legal fees, tracing fees and collection costs which may be incurred by the school in it's recovery of any outstanding amount due by me.
  
5. Should it be necessary for any reason to withdraw my child during the school year, I understand that I will be responsible for the payment of school fees up to the end of the month in which my child is withdrawn from the school.
  
6. I understand that the school dormitories and dining room do not function during school holidays and out-weekends and I accept the responsibility to make alternative arrangements for my child at such times.
  
7. I give permission that my child may be subject to medical tests for drugs or other illegal substances if there is evidence or reasonable suspicion that he/she may be involved in substance abuse activities. I understand that such testing will always be dealt with confidentially and in a professional manner and that I will be kept informed with regard to the process. I agree to be responsible for any laboratory costs that may be involved.
  
8. I give permission that my child may be given basic medication should the need arise.

Signature: **Parent/Guardian** \_\_\_\_\_

Date: \_\_\_\_\_

Signature: **Student** \_\_\_\_\_

Date: \_\_\_\_\_

Thank you for your honesty and cooperation. Void

Signature of Principal: \_\_\_\_\_

Date: \_\_\_\_\_