



WELTEVREDEN PARK PRIMARY SCHOOL

APPLICATION FORM

2024

Documents Required:

1. 2 x Completed Application Forms.
2. 2 x Copies of child's Birth Certificate.
3. 2 x Copies of each parents' Identity Document.
4. Immigrants – 2 x copies of the relevant Passport and the relevant Permit.
5. 2 x copies of proof of parents' residence in our area (street address only accepted). Postal address and Erf numbers will not be accepted. Parents, who do not have any mail sent to their street address will need to get an affidavit signed at the Police station stating their street address.
6. Parents who are renting need to have 2 copies of a signed and dated letter from the owner stating that they are renting the premises plus proof that they own the property and a copy of the landlord's ID.
7. 2 x copies of child's latest report (GRADE 2 – 7 ONLY)
8. If a new child has a sibling already in the school, 2 x copies of the school report of sibling is required.
9. 2 x copy of clinic card is needed. 6 year Booster must be done once the child has turned 6 (GRADE 1 ONLY).

ALL SUPPORTING DOCUMENTS ARE TO BE CERTIFIED !!

Weltevreden Park Primary School

P O Box 5964
Weltevreden Park
1715

Tel. 679-5625/6 and 475-5451/7937
Email admin@welties.org.za



APPLICATION FORM FOR ADMISSION FOR 2024 (Grade 1 - 7)

NB: It is imperative that you complete this form correctly. Failure to do so will result in you being sent away to complete it. False documentation will result in your application being denied.

Office use only		
Waiting List Number : _____		Class: _____
School House Colour.	Admission No.	Family No.

(We serve the right to reassess the child's grade entry should we feel that it is warranted.)

LEARNER INFORMATION: PLEASE PRINT CLEARLY

Grade Applying for: _____

SIBLING AT WPPS: YES / NO _____ SIBLING SCHOOL HOUSE _____

Right or Left Handed _____ Last school attended: _____ Province: _____

SURNAME: _____ Names: _____ (as per birth certificate)

Known as : _____ Boy/Girl: _____ Home Language: _____ Race: _____ (Rqd by GDE)

Is the child an immigrant? _____ If "yes", from which country? _____

Child's Date of Birth: _____ Child's ID Number (on birth cert.): _____

Medical Aid Name: _____ Medical Aid Number: _____

Residential Address: _____

NB: PARENT INFORMATION: BOTH BIOLOGICAL PARENTS REGARDLESS OF WHETHER TOGETHER OR NOT

Father: ID Number/Passport No: _____ Marital Status: _____ Race: _____ (Rqd by GDE)

Surname: _____ First Names: _____

Occupation: _____ Company: _____

Work Phone Number: _____ Home Phone Number: _____

Cellphone Number: _____ e-mail Address: _____

Residential Address: _____

Mother: ID Number/Passport No: _____ Marital Status: _____ Race: _____ (Rqd by GDE)

Surname: _____ First Names: _____

Occupation: _____ Company: _____

Work Phone Number: _____ Home Phone Number: _____

Cellphone Number: _____ e-mail Address: _____

Residential Address: _____

Guardian/Stepmother/Stepfather/Other: ID Number/Passport No : _____ Race: _____ (Rqd by GDE)

Marital Status: _____ Relationship to Parent: _____

Surname: _____ First Names: _____

Occupation: _____ Company: _____

Work Phone Number: _____ Home Phone Number: _____

Cellphone Number: _____ e-mail Address: _____

Residential Address: _____

**IN CASE OF EMERGENCY, IF THE PARENTS ARE UNAVAILABLE, WHO CAN WE CONTACT?
(Please supply two names and numbers, living in Johannesburg, other than those of the parents.)**

Name: _____ Relationship to child: _____ Tel. No. _____

Name: _____ Relationship to child: _____ Tel. No. _____

BROTHERS OR SISTERS ALREADY ATTENDING THIS SCHOOL / APPLYING FOR ADMISSION NOW:

Name: _____ Grade: _____

Name: _____ Grade: _____

Name: _____ Grade: _____

ADDITIONAL INFORMATION ABOUT THE LEARNER:

Is your child allergic to: Panado/Aspirin/Elastoplast/Bees or other? Details please: _____

Does your child have any health/learning/behavioural problems which the school should know about? Details please. If necessary, please attach a letter or a doctor's report.

NB: Is there any person your child is **LEGALLY NOT PERMITTED TO SEE?** _____

NB: A RESOLUTION WAS PASSED BY THE PARENTS STATING THAT: Parents are liable for all school fees and any legal costs incurred (attorney fees – client scale, collection commission, tracing agent fees, disbursements etc.)

If Parent/s fail to meet their school fee obligations, the school may record the Parent/s non-performance with a credit information bureau. Any information conveyed to a credit information bureau will be available to other credit grantors and used in making credit risk management related decisions.

- I/we understand that both biological parents are jointly and severally liable to pay school fees as in term of the South African School's Act.
- Both biological parents are liable to pay the school fees irrespective of any Divorce or Maintenance Agreement.

DECLARATION BY PARENTS/GUARDIAN:

I,(Father) Mr/Dr/Prof _____ declare that the information supplied in this application is true and correct, and that complete details have been furnished.

Signature of Father / Guardian: _____ Date of Application: _____

I,(Mother) Mrs/Ms/Miss/Dr/Prof _____ declare that the information supplied in this application is true and correct, and that complete details have been furnished.

Signature of Mother/Guardian: _____ Date of Application: _____

Please notify the office of any change in any of the above details