

ACADEMY OF EXCELLENCE PRIMARY

APPLICATION 2024

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Visit our website: www.academyofexcellence.co.za or Follow us on INSTAGRAM Page: [aoef_school](#) or
Facebook - Academy of Excellence Primary School



ACCREDITED BY UMALUSI, COUNCIL FOR QUALITY ASSURANCE IN GENERAL AND FURTHER EDUCATION AND TRAINING – ACCREDITATION NUMBER: 18 SCH01 00482

DOCUMENTS NEEDED FOR REGISTRATION – NO CHILD WILL BE ACCEPTED WITHOUT THESE DOCUMENTS

- ☐ 1 x head and shoulder ID photo of the child – most recent
- ☐ Latest School Report
- ☐ Copy of Child's Birth Certificate / Passport including **Study Permit**
- ☐ Disciplinary Record – Applications for Grades 4-6
- ☐ Copy of Parent / Guardian's ID & person responsible for payment of fees
- ☐ Proof of residence
- ☐ 3 Months' Bank Statements as well as the Payslip of the person responsible for School fees
- ☐ Copy of Clinic Card
- ☐ Copy of Medical aid card (if applicable)
- ☐ Transfer Letter – original
- ☐ Completed Instalment Agreement, Finance document, and POPI document (attached)

APPLYING FOR GRADE _____ in YEAR 2024

FOR OFFICE USE ONLY:

Not- / Accepted / Waiting list	
Signature: Finance Checked	
Signature: HOD Checked (Academics)	
Signature: Principal Checked	
Date Informed	

LEARNER DETAILS:

Surname												
Full names (as on birth certificate)												
ID- / Passport Number												
Date of Birth												
Nationality												
Race / Population Group												
Gender	Male						Female					
Dexterity of Learner	Left-Handed						Right-Handed					
The residential address where the learner resides												
Home language												
Other spoken languages												
Religion												
Number of children in the family												
Position in the family (e.g. First Born / 2 nd / 3 rd ...)												
Siblings currently in Academy of Excellence. (Gr, Name, and Surname)	Gr:											
	Gr:											
	Gr:											
Means of Transport	Parents / Motor Vehicle						Public Transport					
	Walk						School Bus					

LEARNER'S EDUCATIONAL DETAILS

Current School Name			
Address of Current School			
Tel number			
Principal			
The last grade passed	Grade	Year	
Did the learner repeat a grade? If yes, which grade and reason?	Yes	No	
Academic achievements			
Extracurricular activities			
Other achievements			
Did you apply to another school? If yes, which school/s did you apply to?	1 st Choice		
	2 nd Choice		
	3 rd Choice		
	4 th Choice		
Where did you hear about Academy of Excellence? Friend (word of mouth) <input type="checkbox"/> School Newsletter <input type="checkbox"/> Teacher <input type="checkbox"/> Signage <input type="checkbox"/> Internet <input type="checkbox"/> Facebook/Instagram <input type="checkbox"/> Website <input type="checkbox"/> Other <input type="checkbox"/> If other please specify _____			
Would you like to receive promotional and marketing products and services from the school? Yes <input type="checkbox"/> No <input type="checkbox"/>			

PLEASE INITIAL

LEARNER'S MEDICAL DETAILS

Medical Aid Name, Number, and Option				
Medical Aid Main Member				
Doctor's Name and Surname				
Doctor's Tel Number				
Doctor's Physical Address				
Has the learner received all the necessary immunisations? If not, please state the reason	Yes		No	
Has the learner suffered from any of the following illnesses? Other: _____	Asthma	Enteric fever	Malaria	Tick bite fever
	Covid 19	Scarlet fever	Measles	German Measles
	Mumps	Chickenpox	Hepatitis	Typhoid fever
	Polio	Rheumatic fever	Diabetes	Whooping cough
Is the learner receiving medical treatment for any condition? If yes, please specify	Yes		No	
Specify any other relevant medical details/issues				

MEDICAL CONSENT

In a critical medical situation, please bear in mind that there may not be time to refer to the learner's records. The school, therefore, reserves the right to utilize the quickest medical service available.

I, _____ being the parent/legal guardian of
_____ hereby agree that a medical practitioner may provide
emergency treatment as may be necessary.
Signature of parent / legal guardian _____

PARENT / GUARDIAN 1 DETAILS

Full Name/s & Surname													
ID / Passport nr													
Date of birth													
Relationship to the learner (Mother/Father/Grandparent)													
Do you reside with the learner?	YES <input type="checkbox"/> NO <input type="checkbox"/>												
Residential address													
Marital status													
Occupation													
Employer													
Work address													
Work number													
Cell phone number													
Email address													
Are you the account payer?	YES <input type="checkbox"/> NO <input type="checkbox"/>												

PARENT/ GUARDIAN 2 DETAILS

Full Name/s & Surname													
ID- / Passport Number													
Date of birth													
Relationship to the learner (Mother/Father/Grandparent)													
Do you reside with the learner?	YES <input type="checkbox"/> NO <input type="checkbox"/>												
Residential Address													
Marital status													
Occupation													
Employer													
Work Address													
Work number													
Cell phone number													
Email address													
Are you the account payer?	YES <input type="checkbox"/> NO <input type="checkbox"/>												

EMERGENCY CONTACT DETAILS (FAMILY OR FRIEND)

Name & Surname	
Relationship to learner	
Cell phone number	

DECLARATION OF PARENTS / LEGAL GUARDIANS

I/We accept and understand the following:

- The school is based on Christian principles and undertakes that this will not be undermined.
- Each parent is therefore requested to complete this form as proof that you accept the position of the school, and everybody involved as set out above as well as the risks involved therewith.
- Accept that at the sole discretion of the principal, the school reserves the right to transfer a learner to a lower Grade in case the learner being too young and/or below the required academic standard.
- In case of a learner being too old for the grade he/she is placed in, the school reserves the right to ask the learner to leave the school, should satisfactory progress not be achieved.
- If the school suspects that the learner is using drugs a urine test and /or alcohol test will be done to confirm the suspicion. If the child disagrees to the test, it will be considered as a positive, and relevant steps will be taken. The school may conduct drug/alcohol tests at the discretion of the school principal/SMT. No Gambling or Bullying is allowed.
- That Academy of Excellence reserves the right to ask a girl learner to leave the school should she fall pregnant. This will apply to a boy learner as well if he is responsible for the pregnancy.
- That, at the sole discretion of the principal, the school reserves the right to expel and/or ask the learner to leave the school, should such learner not adhere to or strictly follow the general school rules. I/we have read it, it has been explained to me, and I/we accept, understand, and agree with the contents in full.
- The school fees are based on an annual amount and are therefore not affected by the learner's absence from school during holidays or for any other reason. Any discount for early settlement will be at the sole discretion of management as well as discounts given for any other reason. Discount will also be recalculated should I/we fail to adhere to the initial agreement.
- That the instalment agreement I/we enter with Academy of Excellence is legally binding and payable in advance on or before the 1st day of every month.
- I/we accept and understand that a penalty fee of R100.00 will be charged for every payment not received by the 1st of the month if Academy of Excellence must phone me/us or forward correspondence to me/us reminding me/us of payments to be made.
- Accept/understand that no registration or school fees are refundable should I/we remove my/our child from the school during the month, term, or year.
- Accept and understand that (1) one month's written notice is required when I/we want to remove my/our child from school to cancel the instalment agreement; otherwise, the instalment will remain in place of notice. Complete the cancellation form.
- Accept and understand that upon registration and signing of this contract, I/we undertake to pay Academy of Excellence the required amount for the registration fee for the year.
- Accept/understand and agree that if payments on the instalment agreement are in arrears, Academy of Excellence as a Registered Independent School can refuse any further teaching of a learner and forward the learner's name and particulars to the Free State Department of Education, in which case the learner will be placed in a government school.
- That I/we will have to pay for any damages to school property due to misbehaviour and/or negligence of my/our child.
- That responsibility for the prompt payment of all accounts as prescribed in the rules and regulations and any other amounts of which I/we am/are indebted to Academy of Excellence.
- That upon signature hereof, I/we will/shall be liable for a minimum of one year's fee if no cancellation form has been signed.
- The prescribed number of learners per class may be exceeded through the placing of a current learner who has to repeat a grade.
- This application for admission will be reconsidered in the case where important relevant information, which should be brought to the school's attention, is withheld.
- The school and everybody involved, undertake to implement reasonable and generally acceptable measures concerning the safety and well-being of all learners, educators, and visitors to the school.
- Due to the nature of the matter, the school and everybody involved, do not accept any responsibility for accidents that may take place in the class, on the school terrain, on sports fields or outings, etc
- I/we, subject to the terms set out herein, indemnify the School and everybody involved for any losses or damages in general, however, they may occur, that I as a parent / legal guardian of the above learner may suffer as a result of any occurrence whereby the learner may be involved, whether as the causing or suffering party, whilst participating in any school activity, except if such loss or damage arises as a consequence of the gross negligence or wilful misconduct of the school or any person acting for or controlled by the School.
- I authorise that the aforesaid learner may be involved in all excursions undertaken / use of school bus by his/her group of class during school days as part of his/her learning experience and, where applicable, I agree that he/she may utilise the transport arranged by the school for such excursions.
- I also indemnify the school, and everybody involved for any damages or losses that I as a parent/legal guardian of the above learner may suffer under such circumstances and voluntarily accept the risks associated therewith, except if such loss or damage arises because of the gross negligence or wilful misconduct of the school or everybody involved.
- Furthermore, if legal action is instituted against me/us for not paying the fees accordingly and my/our child is still attending the school, the full outstanding amount for the respective year will become due and payable.
- I/we have familiarized myself/ourselves with the School's Financial Policy. Arrear accounts will be blacklisted and handed over for collection and the account holder will then be held responsible for the payment of all interest, collection fees, and legal fees on attorney and client scale.
- In the event of any change of address and/or information completed on this application, the parties to this application are OBLIGATED to notify the school in writing.

- I/We GRANT permission for a photo/image that includes this student without any other personal identifiers to be published on the School's Internet website as well as Social Media Platforms, including, but not limited to Facebook, WhatsApp, Twitter, and Instagram.
- I/we hereby declare that I/we have read and understood all the above and accept all the terms and conditions and therefore subject myself/ourselves to the school's policies and procedures.

Please initial

PRINCIPALS' INTERVENTION PROCESS TO ASSIST LEARNERS TO ACQUIRE BIRTH CERTIFICATE / IDENTITY DOCUMENT / STUDY PERMIT FROM THE DEPARTMENT OF HOME AFFAIRS:

- If a child does not have a birth certificate and/or a study permit, the child may receive conditional admission. The parents must ensure that the required admission documents are submitted to the school where the learner enrolls, within a stipulated period of 4 (Four) Months. The responsibility to finalize the conditional admission does not solely lie with the parents of the learner, but also, with the principal of the school.

If the parents fail to submit the documents within the time frame given, the learner will be de-registered from the school and a transfer letter will be given to the parents.

Please initial

Full name (block letters) and signature of the person responsible for payment of fees.

Signature of parent/guardian

Date:

DETAILS OF THE PERSON RESPONSIBLE FOR PAYMENT OF SCHOOL FEES

Name & Surname

ID- / Passport Number

Date of birth

Relationship to learner

Marital status

Residential Address

Employer

Residential address

Work number

Cell phone number

Email address

SUBJECTS THAT THE SCHOOL OFFER

Grade 1 - 3

English Home Language

Sotho First Additional Language

Afrikaans Second Additional Language

Mathematics

Life Skills

Grade 4 - 6

English Home Language

Afrikaans First Additional Language

Mathematics

Natural Sciences and Technology

Social sciences

Life Skills

ACADEMY OF EXCELLENCE PRIMARY SCHOOL

PROTECTION OF PERSONAL INFORMATION POLICY (POPI)

PARENTAL CONSENT FORM

PROTECTION OF PERSONAL INFORMATION

BY SIGNING THIS FORM, AND UNLESS YOU AT ANY TIME INSTRUCT THE SCHOOL EXPRESSLY AND IN WRITING TO THE CONTRARY, YOUR CONSENT IS GIVEN TO THE SCHOOL TO:

- COLLECT, STORE, AND PROCESS CREDIT INFORMATION;
- COLLECT, STORE AND PROCESS NAMES, CONTACT DETAILS, AND INFORMATION RELATING TO YOURSELF AND YOUR CHILD, AND TO SUCH INFORMATION BEING MADE AVAILABLE TO STAFF OR RESPONSIBLE PERSONS ENGAGED OR AUTHORISED BY THE SCHOOL FOR SCHOOL-RELATED PURPOSES TO THE EXTENT REQUIRED FOR THE PURPOSE OF MANAGING RELATIONSHIPS BETWEEN THE SCHOOL, PARENTS/GUARDIANS, AND CURRENT LEARNERS AS WELL AS PROVIDING REFERENCES AND COMMUNICATING WITH THE BODY OF FORMER LEARNERS;
- INCLUDE PHOTOGRAPHS, WITH OR WITHOUT NAME, OF YOUR CHILD IN SCHOOL PUBLICATIONS, ON THE SCHOOL'S WEBSITE, OR IN PRESS RELEASES TO CELEBRATE THE SCHOOL'S OR YOUR CHILD'S ACTIVITIES, ACHIEVEMENTS, OR SUCCESSSES;
- SUPPLY INFORMATION AND A REFERENCE IN RESPECT OF YOUR CHILD TO ANY EDUCATIONAL INSTITUTION THAT YOU PROPOSE YOUR CHILD MAY ATTEND. WE WILL TAKE CARE TO ENSURE THAT ALL INFORMATION THAT IS SUPPLIED RELATING TO YOUR CHILD IS ACCURATE AND ANY OPINION GIVEN ON HIS ABILITY, APTITUDE, AND CHARACTER IS FAIR.
- THE SCHOOL CANNOT BE LIABLE FOR ANY LOSS YOU OR YOUR CHILD IS ALLEGED TO HAVE SUFFERED RESULTING FROM OPINIONS REASONABLY GIVEN, OR CORRECT STATEMENTS OF FACT CONTAINED, IN ANY REFERENCE OR REPORT GIVEN BY US INCLUDING INFORMING ANY OTHER SCHOOL OR EDUCATIONAL INSTITUTION TO WHICH YOU PROPOSE TO SEND YOUR CHILD OF ANY OUTSTANDING FEES.
- THE SCHOOL MAY NOT DISTRIBUTE, OR OTHERWISE PUBLISH ANY OF YOUR PERSONAL INFORMATION IN ITS POSSESSION, UNLESS YOU GIVE YOUR CONSENT, IN WRITING, TO THE SCHOOL THAT IT MAY DO SO. SHOULD THIS BE THE CASE, THE SCHOOL MAY ONLY DISTRIBUTE OR OTHERWISE PUBLISH THE INFORMATION SPECIFIED IN YOUR CONSENT TO THE PEOPLE AND FOR THE PURPOSE STATED IN YOUR WRITTEN CONSENT.

Name of Parent: _____

ID Number: _____

Signature: _____

Date: _____