



ONZE RUST

Date received:
Captured on Excel:

PRIMêRE SKOOL / PRIMARY SCHOOL

14 Genl Hattingstraat/street
Uitsig
9301

Posbus/PO Box 34075
Faunasig
9325

051 522-6901
086 587 3883
admin@onze-rust.co.za

Pre-Primary School		Primary School			Admission No.	
Gr & Year		Grade		Year	Finance No.	
Half day	Full day	Which grade was repeated?			SA SAMS	
Language of Education		ENGLISH	AFRIKAANS		Subject Input	

DOCUMENTS REQUIRED	SOUTH AFRICAN CITIZENS		
	Copy of ID of Father	Copy of Salary Slip Father	self-employed – 1 month bank statement
	Copy of ID of Mother	Copy of Salary Slip Mother	
	Copy of ID of Legal Guardian	Copy of Salary Slip–Legal Guardian	Medical Aid card
	Proof of Guardianship	Copy of Last School Report	SASSA proof
	Copy of Child's Birth Certificate	Provisional Transfer letter	Disciplinary letter – (Gr 4–7)
	Copy-Clinic Card (immunisation dates pg. 4-5)	Proof of school fees payments year to date (current school)	Proof of home street address (Mangaung statement)
	Copy-Clinic Card (3 graphs pg. 14-19)		
	NON – SA CITIZENS/ IMMIGRANTS		
	Foreigners		Asylum / Refugee
Permanent residence permit	Temporary residence visa	Child's Birth certificate – country of origin	
Child's Birth certificate – country of origin	Child's Birth certificate – country of origin	Asylum seeker visa	
Permanent residence permit/certificate	Permanent residence permit/certificate	Refugee permit	
Parents ID/Passport – country of origin	Parents ID/Passport – country of origin	Parents ID documents	
Study Visa	Study Visa	Study Visa	
All copies – certified. No copies will be made by the school. No Emailed applications will be accepted.			

FOR OFFICE USE	Principal Signature	Approved	Waiting list
	Payment	Receipt/Pmt No.	Date paid
	School Fees for 2 months		
	Gr 1, 2, 3 package		

LEARNER DETAILS	Surname	Full names (on ID)		
	Initials	Name to be written on Books/Diplomas		
	Previous Surname	Gender	Male	Female
	Birth date	YYYY	MM	DD
	ID No.	Race: African/Black; Asian; Indian; Coloured; White; Other		
	Citizenship	SA	Immigrant	Religion: Eg. Christian, Hindu, etc.
	Home language	Transport to school		
	Child lives with	Mother	Father	Guardian
	Parents Cell No.	Mother	Father	Guardian
	Parents Deceased	Mother	Father	Both

HOME ADDRESS	Residential Address – where Child stays + proof	Postal Address
	Building name	
	Street Name & No.	
	Suburb	
	Town/City	
Postal Code		

PREVIOUS SCHOOL	Name of School		
	Street Name & No.	Tel No.:	
	Suburb	Fax No.:	
	Town/City	Postal code	
	Province		

CHILDREN IN THE FAMILY (Not cousins)	Name	Surname	Brother / Sister	Age	Gr	School
MEDICAL AID	Medical Aid Name		Medication - specify			
	Medical Aid No.		Special problems			
	Main Member		Health Status			
	Doctor Name		Doctor Tel No.			
	Writing Hand	LEFT	RIGHT	Doctor Address		

SASSA / WELFARE	Registration		Receiving		Grant No.
	Child Support		Child Support		
	Maintenance		Maintenance		
	Foster Child		Foster Child		
	Care Dependency		Care Dependency		

FATHER/ Guardian Details	Surname		Initials		Mr	Dr	Prof
	Full names (on ID)		Nickname				
	Previous Surname		Race : African/Black; Asian; Indian; Coloured; White; Other				
	Birth date	YYYY	MM	DD	Citizenship	SA	Immigrant
	ID No.						
	Your home address						
	Occupation & Company						
	Company & address						
	Relationship to learner						
	Marital Status	Single	Married	Divorced	Widow	Traditional	
	Email address (Print)						
	Cell No.						
Emergency - 3 rd person of contact - Name, Surname, relationship to child				Tel. No.(w)			
				Cell No.			

MOTHER/ Guardian Details	Surname		Initials		Mr	Dr	Prof
	Full names (on ID)		Nickname				
	Previous Surname		Race : African/Black; Asian; Indian; Coloured; White; Other				
	Birth date	YYYY	MM	DD	Citizenship	SA	Immigrant
	ID No.						
	Your home address						
	Occupation & Company						
	Company & address						
	Relationship to learner						
	Marital Status	Single	Married	Divorced	Widow	Traditional	
	Email address (Print)						
	Cell No.						
Emergency – 4 th person of contact - Name, Surname, relationship to child				Tel. No.(w)			
				Cell No.			

ACCOUNT PAYER	
Father	
Mother	
Guardian	

WHATSAPP No. – to receive information and messages						
E-mail Address for Communication:						

- ✓ I hereby acknowledge and declare that the above information is accurate and correct and that ALL required documents are attached.
- ✓ I hereby commit to paying the whole year's school fees (monthly/annually – before 28 Feb) according to the SA School Law, Article 39+40 as published in the Government Gazette 28864, Part D, 24(v). *(Onze Rust Primary School is a Quintile 5 school – school fees paying school – Parents are obligated to pay school fees in full.)*
- ✓ I hereby acknowledge that should my child's school fees not be up to date/outstanding, my school fee's account will be handed over to the Debt Collectors and I will be responsible for their fees as well.
- ✓ I hereby acknowledge that should my child's school fees not be up to date/outstanding, my child will not be allowed to go on any outing/excursions the school may have.
- 📧 All successful applications will be contacted within one month after the closing date. Should you not receive an email, a month after the closing date, your application was unsuccessful and will be placed on our waiting list.
- 📧 Once the application has been approved the school fees for January is immediately payable at the bank.
- 📧 An information booklet containing the bank details, rules, necessities, uniform, etc., will be given/mailed to you.

SIGNATURE Parent/Guardian : _____ **Date :** _____