

Collegiate Junior School for Girls



Founded in 1874, Collegiate Junior has been built on the foundations of traditions spanning over more than 140 years. We hope your association with our school will be a long and happy one. Our main aim is to provide your daughter with a balanced and worthwhile education in a friendly, caring and disciplined environment. We acknowledge that this can only be done in partnership with parents. May we work together successfully thereby enabling your daughter to make the most of all the opportunities available at our school. Collegiate Junior nurtures happy and progressive children.

*The school's motto is
Facta Non Verba
(deeds not words)*

Street Address	Kestell Street, Parsons Hill, 6001
Postal Address	P O Box 34274, Newton Park, 6055
Telephone number	041 396 4500
Fax number	041 374 5834
E-mail	school@collegiate.co.za
Web page	www.collegiate.co.za



APPLICATION FOR ADMISSION

Attach one photo of applicant here

Year applied for:

Grade 00 R 1 2 3 4 5 6 7

A. PUPIL INFORMATION

PUPIL INFORMATION		ADMISSION NUMBER	FAMILY CODE	INTERVIEW
Surname		First name(s)		
Date of birth		ID Number		
Faith		Race		
Home Language				
Name of present school		Present Grade		
With whom does the child stay?	Both Parents	Mother	Father	Other
If other, please detail (please supply copy of ID)				
Name				
Relationship				
Address				

B. PARENT / GUARDIAN INFORMATION

Marital status of parents	Married	Divorced	Single	
	Father	Title (Mr etc)	Mother	Title (Mrs etc)
Surname				
First name(s)				
ID number				
Occupation				
Telephone number (H)				
Telephone number (W)				
Cell phone number				
E-mail address				
Residential address				
Street & Number				
Suburb				
Town & Postal Code				
Postal address				
P O Box				
Suburb				
Town & Postal Code				
Work address				
Company Name				
Address				
Suburb				
Town & Postal Code				

For office use only

C. Is mother an ex-pupil of Collegiate? Yes No

Maiden name: Years attended:

Name & present grade of sister/s attending either Collegiate Junior School or Collegiate High School

.....
Name, present grade & school of brother/s

D. State any other family connection to Collegiate?

Does she suffer from Asthma, Epilepsy, or any other illnesses?

.....
Is she allergic to anything?

Other medical conditions the school needs to be aware of:

E. N.B. Immunisation against Poliomyelitis & Tuberculosis (BCG) is compulsory by Statute.

State achievements at previous school:
The school encourages students to be involved in school extra-mural activities.
List, with details, those in which your child has participated.

Leadership:

Academic:

F. Sporting: Cultural:

MUSIC TUITION (Applicable to Grade 3 - 7 pupils only)

Has your daughter received music tuition? Yes No For how long?

Instrument/s (please detail)

Highest external exam passed:

Grade	1	2	3	4	5
R.S.M.	UNISA	Trinity College			

G. Do you wish your daughter to continue with the music tuition next year? Yes No
(during school hours)

EMERGENCY CONTACT DETAILS (other than the parents)

Relationship	
Name	
Tel. number (H)	
Tel. number (W)	
Cell phone number	

H. School Fees are payable monthly by Debit Order or annually in advance.
If fees are paid annually in advance a discount is applicable.

Person responsible for school fees:

Father	Mother	Guardian
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 Name:

I/We understand that the payment of school fees is compulsory, I/we hereby accept personal responsibility for the punctual payment of such school fees by signing hereunder.
I/We certify that the above information is correct (application to be signed by both parents or guardian).

Father: Date:
Mother: Date:
Guardian: Date:

I. YOUR APPLICATION CAN ONLY BE PROCESSED ONCE THE FOLLOWING DOCUMENTATION HAS BEEN RECEIVED BY THE SCHOOL:

- | | |
|--|---|
| <ul style="list-style-type: none">• Copy of birth certificate• Copy of clinic card• Copy of school report (December previous year & June current year)• 2 x recently taken Passport size photographs of applicant (attach one on front)• 1 x recent school fee statement from current school | <ul style="list-style-type: none">• Copy of ID Document of Father• Copy of ID Document of Mother• Copy of ID Document of Guardian (If relevant)• Copy of Municipal Account |
|--|---|

J. CURRENT SCHOOL DETAILS

Name of present school:
Address:
Tel. no.:

TO BE COMPLETED BY BURSAR AT PRESENT SCHOOL

Contact person/bursar at present school:

Name of person responsible for payment of fees:

Annual school fees:

How are the fees paid:

Debit order	Cash	Bank Transfer
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Monthly payments: Balance owing:

Signed by bursar:

Date:

School stamp

