A current Passport sized PHOTO of the pupil

A Mercy, Catholic, Independent School

APPLICATION FOR ADMISSION

Tel:(011) 726 1310 * www.mcauleyhouse.co.za * Cnr Napier & Sansouci Road, Parktown West Email: primaryschool@mcauleyhouse.co.za * Email: highschool@mcauleyhouse.co.za

ACC REF:

FINANCIAL CHECK:

SCHOOL STAMP:

<u>INSTRUCTIONS:</u> THIS IS ONLY AN APPLICATION FORM. MCAULEY HOUSE SCHOOL RESERVES THE RIGHT TO ACCEPT OR DECLINE THIS APPLI	CATION.
THE PAYMENT OF R600.00 ADMINISTRATION FEE <u>DOES NOT GUARANTEE ADMISSION</u> TO MCAULEY HOUSE SCHOOL.	
ONLY HAND DELIVERED APPLICATIONS WILL BE ALLOWED. NO FAXED OR EMAILED APPLICATIONS OR DOCUMENTS WILL BE ACCEPTED.	

<u>Certified copies</u> of the following documents must accompany this <u>application:</u>

- 1. The identity documents / passport of parent / guardians
- 2. The **Unabridged Birth Certificate** / Identity Document / Passport & Study Permit (for Foreign students only), of the pupil
- 3. The latest school report of the pupil
- 4. Latest School Fee Statement for the learner
- 5. Proof of income for parents / guardians (3 latest pay slips)
- 6. Proof or residence
- 7. Vaccination / Clinic Card
- Testimonial Form A testimonial form will be given to you when you hand in your application. The current school will then have to e-mail the testimonial form back to McAuley House.

ADMINISTRATION FEE (NO CASH ALLOWED)

Proof of payment for R600 (non-refundable)

Standard Bank: 003345521

Branch: 004805

Ref: 1160 / child's name + surname

NB! IF THE PUPIL IS ACCEPTED, AN IMMEDIATE

NON-REFUNDABLE ACCEPTANCE DEPOSIT OF

R7,000.00 IS REQUIRED. THIS WILL BE CREDITED

TO THE SCHOOL FEES AND ESSENTIAL LEVIES.

e-mail the testing	monial form	back to McA	uley Hous	se.								
			Pl	UPIL'S	S INF	ORMA	TION	J				
FIRST NAME:		D YEAR APPL	YING FOR	: (Circle G	_	RNAME		Year of entr	y- Eg: Grade	e 1 in	2020)	
Grade	R	1	2	3	4	5		6	7	8		10
Year of Entry												
Is this a first time	applicat	ion?		if NO w	hen dic	l you firs	t apply	/?				
Do you wish to b	e conside	ered for ear	lier entr	y if a pla	ice bec	omes av	ailable	?				
MALE/FEMALE	MALE / FEMALE PUPIL'S DATE OF BIRTH: DD / MM / Y Y Y Y CURRENT AGE:											
PUPIL'S I.D / PA	PUPIL'S I.D / PASSPORT NO:											
CITIZENSHIP:						HOME L	.ANGU	AGE:				
PRESENT SCHOOL: PRESENT GRADE:												
DETAILS OF ANY REMEDIAL TEACHING OR THERAPY RECEIVED:												
RELIGIOUS DENOMINATION:												
If Catholic, which sa received? F Please supply certified	Please tick	$\sqrt{}$	BAPT	ISM	RE	CONCILIA	TION	EUCH	IARIST	С	CONFIRMATION	
COMPLETE IF THE PUPIL HAS A SISTER/BROTHER CURRENTLY AT MCAULEY HOUSE SCHOOL (NOT COUSINS)												
	NAME OF	SIBLING			GRAD	E D/	ATE OF	BIRTH	ACC NO)	SPORTS HOU	JSE
COMPLETE IF THE PUPIL HAS A SISTER/BROTHER CURRENTLY APPLYING AT MCAULEY HOUSE SCHOOL (NOT COUSINS) NAME OF SIBLING APPLYING FOR GRADE NAME OF SIBLING APPLYING FOR GRADE												
NAIVIE	JE SIBLING		APPLTI	NG FUR C	NADE		NANE	OF SIBLING		A	AFFEIING FOR GI	ADE

AGREEMENT

I/We_							
	(full name of parent / guardian 1)						
_							
	(full name parent / guardian 2)						
the ur	ndersigned, currently residing at						
trie ui	(insert full residential address)						
do bo	roby, subject to the following terms and conditions, apply for the admission of						
uo ne	reby, subject to the following terms and conditions, apply for the admission of						
	as a learner to McAuley House School.						
	(full name of pupil)						
I/Wo d	leclare						
	That I/we am/are the legal guardian(s) of the learner whose details appear on this application form.						
	I/We confirm that all the particulars that I/we may furnish or that have been furnished on this application form shall, to the best of my/our knowledge and belief, be full, true and accurate in every respect.						
	undertake:						
	To adhere to and abide by the Child Safe guarding Policy (available on the schools website <u>www.mcauleyhouse.co.za</u>)						
0	To inform the school of any changes in the particulars submitted in the Application Form, especially any changes of address or						
1	telephone numbers.						
	To ensure that my / our child attends school regularly and timeously and that she/he complies with the Code of Conduct and Rules of						
	McAuley House School. We understand and accept that should she/he break this Code of Conduct, the matter will be dealt with in						
	terms of the school's Disciplinary Procedure. To adhere to the Terms & Conditions of McAuley House School.						
	To abide by and comply with all the rules and regulations of the McAuley House School, and I/we hereby acknowledge that it is						
	incumbent upon me/us to make myself/ourselves familiar with the all the rules pertaining to the McAuley House School.						
	To ensure that my/our child participates in the extra-mural activities at McAuley House School. I/We undertake to support him/her in						
	these activities.						
	understand and accept that						
	McAuley House School is an Independent Catholic School and I/we, (including my child) will respect and uphold the Catholic ethos of						
	the school and this will include the necessity of my child's attendance and participation in Religious Education classes at school, Masses, Retreats and other Catholic functions or liturgies at school or off the school property.						
	responsible for paying the account.						
0							
I / we	give permission:						
	ur child to participate in all activities of the school which the Management of McAuley House School considers desirable,						
including extramural activities, outings, tours and visits to places outside of the school property.							
Cia	ad at Johannachurg this						
Signe	ed at Johannesburg this day of 20						

Signature: Mother / Guardian

Signature: Father / Guardian

ACCOUNT DETAILS

IMPORTANT NOTE:

THIS SECTION MUST 1. NAME & SURNAME:		SON / PERSONS RESPONSIBLE F	OR THE SCHOOL FEES					
IDENTITY NUMBER:								
TEL NO. :	EMAIL: (please print c.	learly)	(NB*)					
RESIDENTIAL ADDRESS:	RESIDENTIAL ADDRESS:							
2. NAME & SURNAME:								
IDENTITY NUMBER:								
TEL NO. :	EMAIL: (please print c.	learly)	(NB*)					
RESIDENTIAL ADDRESS:								
PAYMENT OF FEES								
 I/we hereby assume absolute responsibility for the payment of any fees and charges that may fall due as a result of the admittance to McAuley House School, of the pupil whose details appear on this application form. I/we acknowledge that school fees are payable in advance by the 1St day of each month, from 1st January to 1st October, and that there are various payment options offered by McAuley House School. I/we acknowledge that a term's (3 months) notice is required in writing or a term's fees are required in lieu of notice, if a child is withdrawn from McAuley House School. If a pupil leaves the school during term for any reason, whatsoever either at the insistence of the Principal or Parents, the balance of the school fees for that term, will be forfeited or a term's fees in lieu of notice will be payable. I/we acknowledge that should any one installment payable in terms hereof not be paid on due-date, then the balance outstanding at the date of the next statement, shall immediately become due and payable by me/us and that no indulgence or grant of time by McAuley House School shall be deemed a waiver of its rights hereunder. I/we choose the residential address set out above as my/our domicillium citandi et executandi for the service on me/us by McAuley House School of all notices, processes and other communications. I/WE UNDERSTAND AND AGREE THAT: That R3,500.00 of the deposit is non-refundable and will be forfeited should the parent(s)/guardian(s) decide for whatever reasons, not to send the learner to McAuley House School. School fee refunds will only be given if parents/guardians are withdrawing the learner from McAuley House School after the appropriate notice has been given. That in accordance with the rights of an Independent school, should I/we not meet the terms of payment required, I/we might be asked to keep the pupil at home until the arrears are paid. Accounts that are continually ignored and no comm								
I/we the above mentioned declare that I/we are responsible for the payment of school fees and agree to abide by the above conditions of payment.								
1)	(sign)	2)	(sign)					
"I/we hereby consent to McAuley House School or its appointed agents to carry out a credit enquiry in order to establish whether I/we can meet the obligations in terms of this agreement and in the event that I/we fail to meet the obligations, may record my/our non-performance with the application credit bureau." Sign: 1)								

Date: __

PARENT'S / GUARDIAN'S PERSONAL DETAILS					
	FATHER / GUARDIAN	MOTHER / GUARDIAN			
TITLE					
SURNAME					
NAME					
MARITAL STATUS					
ID NUMBER					
ARE YOU A PAST Mc AULEY PUPIL?					
RELATIONSHIP TO PUPIL					
EMPLOYER					
POSITION IN COMPANY					
OCCUPATION					
WORK TEL					
HOME TEL					
CELL TEL					
PLEASE INDICATE THE CELL NUMBER TO BE USED FOR SMS PURPOSES ONLY BY CIRCLING IT					
EMAIL ADDRESS (please print clearly)					
RELIGION					
STREET ADDRESS					
POSTAL ADDRESS					
	GENERAL DETAILS				
Are the pupil's parents/guardians marr	ied?				
If not, with whom does the pupil live?					
If the pupil does not live with either par she / he live? (we need name, surname and					
What is the relationship of the above p	erson to the child (e.g. aunty, gran etc.)				
Address where the pupil lives					
MEDICAL DETAILS OF PUPIL					
DETAILS OF ANY ILLNESS / DISABILITI	ES:				
DOCTORS NAME:	TEL:				
MEDICAL AID NAME:	NUMBER:				
MAIN MEMBERS NAME:					
IN CASE OF EMERGENCY (other than the parents) *COMPULSORY					
NIANAE-		FIGN TO BURIL			

CELL: _____ TEL (H): _____ TEL (W): ____