

LIVINGSTONE HIGH SCHOOL

(Founded 1926)

Principal
T.J. Bruinders

Telephone:
(021) 671 5986
(021) 671 1009

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(021) 671 8552

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<http://www.livingstonehigh.co.za>



Nulla Vestigia Retrorsum
Advance Livingstone

Postal Address (for all correspondence):
P.O.Box 2058
CLAREINCH
7740

Street Address:
100 Imam Haron Road
CLAREMONT
7700

Email:
livingstonehighschool@gmail.com

APPLICATION FOR ADMISSION TO GRADE ____ AT LIVINGSTONE HIGH SCHOOL FOR THE YEAR _____

REASON FOR TRANSFER: _____.

PLEASE PRINT.

PARTICULARS OF LEARNER

SURNAME:

FIRST NAMES (IN FULL):

GENDER: DATE OF BIRTH (dd,mm,yy).....

RESIDENTIAL ADDRESS:

STREET:

SUBURB: TOWN: CODE:.....

PRESENT SCHOOL:

CONTACT DETAILS OF PARENT(S) OR GUARDIAN(S)

PARTICULARS OF FATHER: (Compulsory)

FULL NAMES AND SURNAME:.....

ID NUMBER:

RESIDENTIAL ADDRESS (if different from applicant's):

..... CODE

TEL (HOME) WORK CELL:.....

OCCUPATION:

NAME AND ADDRESS OF EMPLOYER:

PARTICULARS OF MOTHER / GUARDIAN: (Compulsory)

FULL NAMES AND SURNAME:.....

ID NUMBER:

RESIDENTIAL ADDRESS (if different from applicant's):

..... CODE

TEL (HOME) WORK CELL:.....

OCCUPATION:

NAME AND ADDRESS OF EMPLOYER:

Please ✓

Are you aware that Livingstone High is a fee paying school?	YES	NO
Do you regard school fees as priority in your child's education?	YES	NO
Are there issues that may prevent you paying the full school fees?	YES	NO
Are there issues that may prevent you paying the full school fees? If yes, what school fees are you able to afford per month?	YES R	NO PM

SCHOOL FEES

Method of payment of School Fees:

Annual School fees are compulsory and are payable by Debit order over a ten month period or EFT.

Name of Person responsible for payment of School fees.

_____.

Relationship to Learner: _____.

Please state the main source(s) of this income e.g. Father's salary, Granny's pension:

_____.

SIGNATURE: Date:

.....

(State whether father, mother or guardian)

This section must be completed by the Class Teacher, Deputy Principal or Principal of the school the Child is currently attending:

CATOGORY A:

SKILLS

Please rate the learner on a scale from 1 to 5 In terms of the following:

5= Excellent 4= Good 3= Average 2= Weak 1= Very weak

WORK SKILLS		SOCIAL SKILLS	
Ability to understand written and verbal English		Interaction with friends	
Aptitude for mathematics.		Co-operation in a group	
Concentration		Courtesy	
Listening skills		Respect for elders	
Following instructions		Leadership qualities	
Completion of tasks		Reliability	

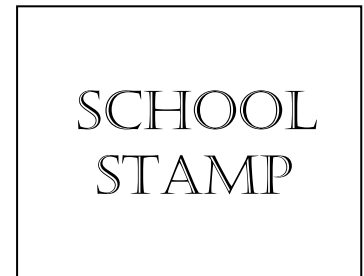
CATOGORY B:

DISCIPLINE

Point scale out of 5

5= Very positive 1= Very negative

	5	4	3	2	1
School rules (Obedience to code of conduct)					
Appearance					
Daily attendance at school					
Acceptance of responsibility					
Punctuality					



SIGNATURE: _____ (class teacher deputy principal principal)

Return the completed application form and certified copies of the applicant's most recent report and most recent Telkom or Municipal account to the school.

DECLARATION:

The signatories below do hereby declare that the information which has been recorded in this form is true and correct and hereby give the Chairman of the School Governing Body, or the Admissions Committee, permission to check and confirm any of the details or documents included in this Application. The signatories below understand that if anyof the information supplied is found to be false, action may be taken against them.

I,, the undersigned parent/guardian of declare that the above information is correct to the best of my knowledge.

SIGNED AT on this
day of(month).....(year)

SIGNATURE