

Sancta Maria Junior School

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Sancta Maria Convent
141 Rossini Boulevard
Vanderbijlpark

NPO No.: 057-317

APPLICATION PROCEDURE - 2024

Please complete the attached Admission Form **in full**. *Please print legibly and ensure that contact phone numbers are correct.*

1. An **administration fee** (non-refundable) of **R200** is payable when submitting the form.

PLEASE NOTE THAT THE ADMINISTRATION FEE DOES NOT GUARANTEE ADMISSION

2. *(Copies of the documents will be made at the office when you submit the application):*

- Birth Certificate and ID Photo of learner
- Clinic Card
- Proof of Residence (e.g. rates and taxes account) not older than 3 months
- Parents' I.D. documents
- Parents' Proof of Employment
- Guardians' I.D. documents (if child is not living with parents)
- Baptism Certificate (Catholics only)
- Report Card (if applicable)
- Medical Aid Card

Immigrants –originals of the following documents are needed to apply (NO COPIES)

- Original birth certificate from country of origin
- **Child** – valid study permit; passport
- **Parents** – passport ; valid visa and work permit
- All other supporting documents as mentioned above

3. The parent/guardian responsible for the payment of school fees must sign the Admission Form. All their relevant details must be filled in on the form, especially the address of where the child is living.

4. School Fees for 2023 : **(fees are payable in advance, on/before the 7th of every month)**

R17 270.00 payable in monthly installments of R1 570.00 from Jan – Nov.

Book fees for 2023 range from R780.00-Gr R to R1 115.00-Gr 7

SCHOOL FEES WILL INCREASE IN 2023, AMOUNTS WILL ONLY BE FINALISED IN NOVEMBER 2023

5. You have to arrange your own transport and aftercare

It is your responsibility to contact the school for confirmation on whether your

child's application has been accepted or not



Catholic
Education



SANCTA MARIA JUNIOR SCHOOL - 2024

Office Use only

GRADE (class)	
ADMISSION NO:	
ACCOUNT NO:	
STARTING DATE:	
PRINCIPAL/DATE	

VERITAS



141 ROSSINI BLVD.
P.O.BOX 2567
VANDERBIJLPARK
1900
TEL: 016 933 4791
FAX: 016 981 2462
FAX TO MAIL: 086 509 2931



For office use only

	Amount	Date / Receipt number	Notes
Registration			
Book Fees			
School Fees			

Documents received	Documents received (Immigrant applicants)
Birth certificate and ID Photo	Original birth certificate from country of origin
Clinic card	Study permit - child
Proof of residence	Passport - child
Parents and/or Guardians I.D. documents	Visa/Work permit - parents
Parents Proof of Employment	Passport - parents
Medical Aid Card	
Baptism certificate	
Report and Transfer Card	

Details of child

Surname:					
First names in full:					
Date of Birth:		BOY	GIRL		
Home language:	Foster child	YES	NO		
Who does the child live with?	BOTH PARENTS	MOTHER	FATHER	GUARDIAN	
If child is living with a guardian/s -relationship to child					
Mode of transport: (Taxi, by foot, car, bicycle, by aftercare)					
No of children in family:	Learner position (e.g. First)				
Other children at this school (names and grades):					
Learner is	LEFT HANDED	RIGHT HANDED	AMBIDEXTROUS		
Church: (eg. Catholic, Anglican etc)					
Are either of the parents deceased?	YES	NO	If yes, please give details:		
Citizenship: (RSA / immigrant)					
Knowledge of English is :	GOOD	AVERAGE	STILL LEARNING		

Medical particulars

Medical aid	Medical Aid Number
Main Member	Doctor
Doctor telephone no	Doctor's rooms address
Any specific medical conditions (eg allergies or asthma)	

Particulars of Parent / Guardian

Father	Mother	Guardian
Surname:	Surname:	Surname:
Initials:	Initials:	Initials:
Name:	Name:	Name:
I.D. / Passport no.:	I.D./Passport no:	I.D./Passport no:
Postal Address: Code:	Postal Address: Code:	Postal Address: Code:
Street Address Code:	Street Address Code:	Street Address Code:
Tel (W):	Tel (W):	Tel (W):
Whatsapp No	Whatsapp No	Whatsapp No
Cell:	Cell:	Cell:
Employer:	Employer:	Employer:
Occupation:	Occupation:	Occupation:
Marital status:	Marital status:	Marital status:
Email	Email	Email
Person responsible for the payment of school fees?		

Please take note that the SASA (South African Schools Act) stipulates that the person signing this form is responsible for the payment of school fees

*** I am prepared to adhere to the Catholic Christian values of this school. ***

Signature of Parent/Guardian

Date

Details of previous school (if applicable)

Name of school

Town/Provinve

Telephone no:

Date departed: