

**HOËRSKOOL KING EDWARD HIGH SCHOOL**

**APPLICATION FOR ADMISSION 2022**

Tel: 039 737 3273 E-mail: [kehs@telkomsa.net](mailto:kehs@telkomsa.net)

10 School Street / PO Box 91 MATATIELE 4730

Website: [www.kingedwards.co.za](http://www.kingedwards.co.za)



|    |                                   |       |          |
|----|-----------------------------------|-------|----------|
| 1. | FULL names and surname of learner | Name: | Surname: |
|    | First name:                       |       |          |
|    | Boarding required : YES or NO     |       |          |

|    |                |            |    |                 |
|----|----------------|------------|----|-----------------|
| 2. | Date of Birth: | dd/mm/yyyy | 3. | Current School: |
|----|----------------|------------|----|-----------------|

|    |      |      |        |    |                     |
|----|------|------|--------|----|---------------------|
| 4. | Sex: | Male | Female | 5. | Applying for Grade: |
|----|------|------|--------|----|---------------------|

|    |  |
|----|--|
| 6. | Name and Surname: Father/ Legal Guardian |
|----|--|

|    |  |
|----|--|
| 7. | Name and Surname: Mother/ Legal guardian |
|----|--|

|    |                     |    |                |
|----|---------------------|----|----------------|
| 8. | Residential Address | 9. | Postal Address |
|----|---------------------|----|----------------|

|     |                        |                              |     |    |
|-----|------------------------|------------------------------|-----|----|
| 10. | Father's Cell Number   | Work Number                  |     |    |
|     | Father's Home Number   | Father's Occupation          |     |    |
|     | Father's Place of Work | Persal No.                   |     |    |
|     | e-mail (print)         | Learner resides with father? | YES | NO |

|     |                        |                              |     |    |
|-----|------------------------|------------------------------|-----|----|
| 11. | Mother's Cell Number   | Work Number                  |     |    |
|     | Mother's Home Number   | Mother's Occupation          |     |    |
|     | Mother's Place of Work | Persal No.                   |     |    |
|     | email (print)          | Learner resides with mother? | YES | NO |

|     |                           |                      |                         |
|-----|---------------------------|----------------------|-------------------------|
| 12. | Additional Contact Person | Telephone / Cell No. | Relationship to Learner |
|-----|---------------------------|----------------------|-------------------------|

|                       |  |                       |                     |                     |                  |                |                    |                    |                  |
|-----------------------|--|-----------------------|---------------------|---------------------|------------------|----------------|--------------------|--------------------|------------------|
| 13.                   | Status of Family   |                       |                     |                     |                  |                |                    |                    |                  |
|                       | <table border="0"> <tr> <td><b>A</b> Both parents</td> <td><b>B</b> Stepfather</td> <td><b>C</b> Stepmother</td> <td><b>D</b> Widower</td> </tr> <tr> <td><b>E</b> Widow</td> <td><b>F</b> Guardians</td> <td><b>G</b> Separated</td> <td><b>H</b> Divorce</td> </tr> </table> | <b>A</b> Both parents | <b>B</b> Stepfather | <b>C</b> Stepmother | <b>D</b> Widower | <b>E</b> Widow | <b>F</b> Guardians | <b>G</b> Separated | <b>H</b> Divorce |
| <b>A</b> Both parents | <b>B</b> Stepfather  | <b>C</b> Stepmother   | <b>D</b> Widower    |                     |                  |                |                    |                    |                  |
| <b>E</b> Widow        | <b>F</b> Guardians   | <b>G</b> Separated    | <b>H</b> Divorce    |                     |                  |                |                    |                    |                  |

|                  |   |                 |                    |                 |                  |                 |                 |
|------------------|---|-----------------|--------------------|-----------------|------------------|-----------------|-----------------|
| 14.              | Race Group  |                 |                    |                 |                  |                 |                 |
|                  | <table border="0"> <tr> <td><b>B1</b> Black</td> <td><b>B2</b> Coloured</td> <td><b>B3</b> Asian</td> </tr> <tr> <td><b>B4</b> Indian</td> <td><b>B5</b> White</td> <td><b>B6</b> Other</td> </tr> </table> | <b>B1</b> Black | <b>B2</b> Coloured | <b>B3</b> Asian | <b>B4</b> Indian | <b>B5</b> White | <b>B6</b> Other |
| <b>B1</b> Black  | <b>B2</b> Coloured  | <b>B3</b> Asian |                    |                 |                  |                 |                 |
| <b>B4</b> Indian | <b>B5</b> White   | <b>B6</b> Other |                    |                 |                  |                 |                 |

|     |                 |        |        |
|-----|-----------------|--------|--------|
| 15. | Learner         | Father | Mother |
|     | Identity Number |        |        |
|     | Citizenship     |        |        |

|     |                       |         |  |           |
|-----|-----------------------|---------|--|-----------|
| 16. | Religion              |         |  |           |
|     | Mother Tongue         |         |  |           |
|     | Medium of Instruction | English |  | Afrikaans |

|     |   |                             |       |
|-----|---|-----------------------------|-------|
| 17. |   | Name of Learner             | Grade |
|     | Biological Brothers/ Sisters at KEHS<br>(not cousins) | <b>for account purposes</b> |       |
|     |   |                             |       |

|     |  |     |  |    |  |
|-----|--|-----|--|----|--|
| 18. | Has your child ever been refused admission or been expelled from another school? | YES |  | NO |  |
|-----|--|-----|--|----|--|

|     |                         |                |
|-----|-------------------------|----------------|
| 19. | Proposed Admission Date | dd / mm / yyyy |
|-----|-------------------------|----------------|

|     |                                       |              |
|-----|---------------------------------------|--------------|
| 20. | Does your child have health problems? |              |
|     | Condition                             | Details      |
|     |                                       |              |
|     | Dexterity of learner                  | Right Handed |
|     |                                       | Left handed  |
|     |                                       | Ambidextrous |

|     |   |     |  |    |  |
|-----|---|-----|--|----|--|
| 21. | Is your child up to date with the immunization schedule?<br>(Attach a copy to this application) | YES |  | NO |  |
|-----|---|-----|--|----|--|

|     |                          |  |
|-----|--------------------------|--|
| 22. | Name of Family Doctor    |  |
|     | Telephone No             |  |
|     | Name of Medical Aid Fund |  |
|     | Medical Aid Number       |  |

|     |                                     |  |
|-----|-------------------------------------|--|
| 23. | Sporting and Cultural Achievements: |  |
|-----|-------------------------------------|--|

|   |        |     |    |        |
|---|--------|-----|----|--------|
| Does your child receive a social grant? | YES    |     | NO |        |
| Is either of the parents deceased?      | FATHER | YES | NO | MOTHER |
|   |        |     |    | YES    |
|   |        |     |    | NO     |
| Does your child have any disability?    | YES    |     |    |        |
| If yes, please state:                   |        |     |    |        |

|   |  |
|---|--|
| Statement for school fees to be addressed to:<br><i>Name of Parent/Guardian</i> |  |
| Address   |  |

**VERY IMPORTANT: LIABILITY FOR SCHOOL FEES, SURETYSHIP AND DECLARATION**

I/We understand that should the learner be accepted into King Edward High School, Matatiele, all parents/legally appointed guardians of learners are jointly and severally liable for the payment of school fees, irrespective of the marital status of the parties involved. I/We hereby declare that to the best of my/our knowledge the above information as supplied above is accurate and correct.

**SHOULD THE PERSON SIGNING THIS FORM NOT BE THE PARENT OR LEGALLY APPOINTED GUARDIAN OF THE LEARNER THE FOLLOWING APPLIES:**

I/We by placing our signature on this document further bind myself/ourselves as sureties and co-principal debtors with the parents and /or legally appointed guardians of the aforesaid learner to King Edward High School, Matatiele (also referred to herein as "KEHS" ) for all money due to KEHS from time to time in respect of the learner above (including but not limited to school fees, hostel fees, tuition, travel and all amounts that may be due to KEHS in respect of the learner from whatsoever cause arising).

\_\_\_\_\_  
Name of Parent/ Guardian (please print)

\_\_\_\_\_  
Signature of Parent/ Guardian

\_\_\_\_\_  
Date

**Attach the following documents to the application**

- |   |   |
|---|---|
| 1. Copy of ID's of both parents   | 2. Copy of child's Birth Certificate                                |
| 3. 1 <sup>st</sup> and 2 <sup>nd</sup> Term Report from previous school | 4. Attach a small recent photo (ID size) of your child to this form |
| 5. Copy of child's immunization schedule                                |   |