

North West Province Department of Education and Sports Development.

8564 IPELENG SECTION DERTIG MORETELE LOCAL MUNICIPALITY HAMMANKRAAL 0407 082 252 9042 082443 2604 matlaisanehighschool@gmail.com 600101147matlaisanesecondary@gmail.com		MATLAISANE SECONDARY SCHOOL PRIVATE BAG X 1005 TEMBA 0407
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APPLICATION FORM GRADE 8-11.

- FOR PROSPECTIVE APPLICANTS FOR 2022.**
- Preference will be given to learners of Dertig, Lefatlheng, Sespond, Ramaphosa and Danhouse villages. (Mahobotle, Tlhagele and Mmatsheko primaries).
- The age of the learner seeking admission should fall within accepted norms as determined by the current legislation.
- Supporting documents – only **CERTIFIED COPIES** not older than 3 Months must be furnished to verify information given in the application. Copies made a school will be charged.
- Admission is on first come first serve.
- NB: No incomplete form will be accepted.
- Applications must be handed in person at the office. No faxed or emailed applications will be accepted.
- Late applications will only be considered if space is available.

NB: Please enclose photocopies of the following documents with this application.

Please enclose **Photocopies** of the following documents with this application ✓/x

CERTIFIED ABRIDGED BIRTHCERTIFICATE / ID of learner	
CERTIFIED ID Documents of both parents/ guardians	
ORIGINAL Latest result / report	
Transfer letter (only next year January if the application is approved)	
Learner profile	
Study permit (if applicable)	

PLEASE COMPLETE IN FULL OR MARK WITH X (CROSS) WHERE RELEVANT

A. PARTICULARS OF LEARNER

Surname					
Full Names					
Nick Name					
ID/Date of Birth/ Passport number					
Gender	MALE			FEMALE	
Race	Asian	African	Coloured	Indian	White
Religion				Home Language	
Highest grade passed					
Are you repeating this grade?	NO			YES	
Name of previous school					

B. REASONS FOR LEAVING PREVIOUS SCHOOL:

1	Behavioural problems	Yes	No	6	Expulsion	Yes	No
2	School provided a transfer card without explanation	Yes	No	7	Failing grade once or more	Yes	No
3	Repeating a grade	Yes	No	8	Disciplinary action problems	Yes	No
4	Relocation from another province	Yes	No	9	Relocation within NORTH WEST	Yes	No
5	Please state Province name			10	Relocation from another country	Yes	No

C. PARTICULARS OF BIOLOGICAL PARENTS/ GUARDIANS

PLEASE COMPLETE IN FULL OR MARK WITH X (CROSS) WHERE RELEVANT

MARITAL STATUS	MARRIED	DIVORCED	FATHER DECEASED	MOTHER DECEASED
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FATHER	STEPFATHER	GUARDIAN	GRAND FATHER
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Surname			
Full Name			
Title			
Id no			
Tel (H)			
Tel (W)			
Cell phone No			
Home address (chosen domicile et executants)		Work address:	
Occupation			
Employer			

MOTHER	STEPMOTHER	GUARDIAN	GRAND MOTHER
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Surname			
Full Name			
Title			
Id no			
Tel (H)			
Tel (W)			
Cell phone No			
Home address (chosen domicile et executants)		Work address:	
Occupation			
Employer			

D. NEXT OF KIN/ RELATIVE(S) OTHER THAN PARENT OR GUARDIAN (s)

Surname			
Full Name			
Relationship with learner			
Id no			
Tel (H)		Tel (W)	
Cell phone No			
Address			

E. BROTHER/ SISTER IN MATLAISANE SECONDARY

1. Name and surname of learner	
Grade / Class	
2. Name and surname of learner	
Grade / Class	

F. EMERGENCY

Special needs of learner (e.g. epilepsy, allergies, etc)	
Family doctor's details: Name:	
Telephone number	
In case of emergency, whom do we call	
Contact number of the person	
Medical aid and number	

Reg social grant	Yes		NO	
Need Social Grant	Yes		NO	

EXTRA – CURRICULAR ACTIVITIES:

1. I, PARENT /GUARDIAN hereby give permission that my child will be allowed to participate in the following extra-curricular activities at school: (Indicate with a tick) =

Athletics		Indigenous Games	
Tennis		Choir	
Debate		Soccer	
Public speaking		Cricket	
Basketball		Cross-country	
Netball		Chess	
Softball		Cultural activities	
Volleyball		Other specify	

And that he/she may take part in tours and excursions organised by the school, except:

Reason / Motivation:

- I accept that all reasonable precautions will be taken to ensure the safety and wellbeing of my child and that I will be held responsible for the payment of medical/hospital expenses where applicable and where educational staff were not negligent in the execution of their duties.
- I delegate my parental/guardian duties to the principal or his representative in case of necessity for medical/surgical treatment for my child. To the best of my knowledge, my child is in good health and there is no reason why he/she cannot participate in the above-mentioned sports activities.
- I however would like to draw your attention to the fact that my child suffers from the following conditions (e.g. epileptic fits, allergic reactions, etc.)

I hereby declare that to the best of my knowledge, the above information as supplied is accurate and correct.

Name of Parent / Guardian (please Print)

Signature of Parent / Guardian:

Date: / /

OFFICE USE ONLY					
1 Date:	2 Accepted	3 Accession Number:			
4 Rejected	5 Reason for Rejection				
6 Documentation Received	6a Learner Profile	6b Birth Certificate / Id copy			
6c Progress report from previous school		6d Transfer letter from previous school			
6e Parents ID Copies	Application Form Completed Fully				

G. ACADEMIC PARTICULARS OF LEARNER

1 GRD 8 and 9

GRADE 10-11 SUBJECTS CHOICES CIRCLE A GROUP OF YOUR CHOICE

LEARNING AREAS- COMPULSORY	COMPULSORY SUBJECTS					
	Language, literacy, and communication (ENG)	Tswana Home Language	1 st Language		SUBJECT CHOICES	
Mathematics	English	2 nd Language				
Natural Sciences	Life Orientation					
Social Sciences	1	2	3	4	5	6
Economical and Management Services	Maths	Accounting	Maths	Tourism	History	Maths
Technology	Physical Science	Economics	P. science	Consumer	Geography	Physic
Life Orientation	Geography	Business Studies	Consumer	Economics	B. Studies	L. Sciences
Creative Arts	Life Sciences	Maths	L. Science	Maths LIT	Maths Lit	Accounting

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H. SCHOOL UNIFORM AVAILABLE AT SCHOOL

2021 Prices. NB* Price may change in 2022.

Pull Over with emblem	R150.00
Blazer	R650.00
Summer Dry Mac with emblem	R200.00
Winter Dry Mac with emblem	R280.00
Tracksuit	R460.00
Yellow T. Shirt with emblem	R150.00
Socks	R30.00
Tie	R30.00
Hat	R80 NB* For grade 12 Only
Round Neck Shirt	R100.00
Panel Skirt	R120.00
Pleated Skirt	R140.00

I. Compulsory schooling

You must formally register your child on the application form at the school nearest to your home or work address.
Your child must attend school if /she is between the ages 14-18.

J. SCHOOL ATTENDANCE

MESSAGE FOR PARENTS

TYPEK

It is compulsory for parents of learners to purchase a "*typek*" duplicating paper.

Attendance at school

You must see that your child goes to school every day and be on time. Failure to do may result in the Head of Department taking legal action against you.

K. DONATION

Parents capable of making donations / contributions to supplement the little departmental allocation should deposit in this account.

FIRST NATIONAL BANK

ACCOUNT NUMBER : 55080018242.

REFERENCE : NAME OF LEARNER AND CLASS

L. Principal

Principal Name:	MOATSHE P. M.
Signature	<i>Duly Signed</i>
Principal Number	082 443 2604
Date	30-03-2021