



ANNEXURE B

**EVERSDAL PRIMARY SCHOOL
APPLICATION FOR ENROLMENT**

APPENDIX FOR APPLICATION – OUTSIDE DIRECT (GEOGRAPHIC CLOSEST SCHOOL) AREAS

See Admission Policy.

Please complete the form.

1. Surname and initials of parents: _____

2. Address: _____

3. Name / Names of learner(s): _____

4. Reasons for considering EVERSDAL PRIMARY SCHOOL as a future school:

5. Are there any other family members in the school? _____

Provide details: _____

Were there any other family members who attended this school in the past?

Provide details: _____

6. Is your prospective Gr. 1 learner currently in Eversdal Pre-Primary School?

7. Do you work in any of the areas mentioned in Annexure A? If yes, please specify address.

8. Which school is closest to your place of residence?

Reason why this school was not considered.

9. Would our Aftercare facilities be used should your application be successful?

10. Do you accept the responsibility and undertake to pay the compulsory school fees?

11. Any other information that you consider to be important?

UNDERTAKING:

I, the undersigned, understand the following:

That...

1. EVERSDAL PRIMARY SCHOOL is my school of choice.
2. the school is not necessarily my closest school.
3. the necessary travelling arrangements have been considered and that they would not have a negative impact on my child(ren).
4. I cannot claim enrolment, as the application will be considered by the Governing Body.
5. the decision(s) of the Governing Body is final.
6. I will be informed of enrolment, at a specific time, after preference has been given to pupils living in the direct (geographic closest school) area.
7. failure to meet the above-mentioned conditions, or any false declarations, will terminate my application.

SIGNED: PARENT: _____

WITNESS: _____

DATE: _____ **2019**