

APPLICATION FOR ADMISSION TO MARYVALE COLLEGE**HIGH SCHOOL**

10 St. Mary's Road
Maryvale, Johannesburg, 2192
Telephone: 011 640 3061 / 011 640 3069
Email: admin@maryvalecollege.co.za

PRIMARY SCHOOL

Cnr. Louis Botha Avenue & Cheltondale Road
Orchards, 2192
Tel: 011 485 1210 / 011 640 1120
Fax: 086 457 1441
Email: primaryadmin@maryvalecollege.co.za

YEAR APPLIED FOR: _____

Accession No (Office use):

PLEASE NOTE: AN ENTRANCE TEST DOES NOT GUARANTEE A PLACEMENT IN OUR SCHOOL. This form must be completed in full. All changes to be initialed or signed by parent / guardian. Completing the form does not necessarily mean that the learner has been accepted into the school. **PLEASE PRINT CLEARLY**

Section 1: LEARNER DETAILS:

Grade Applied for:				Highest Grade Passed:			
Surname:				Initials:			
First Name:				Other Names:			
Date of Birth: YYYY		MM	DD	Gender:		Male:	Female:
Identification/Passport No:							
Citizenship:				Right-handed <input type="checkbox"/>		Left-handed: <input type="checkbox"/>	
Home Language:				Religion:			
Physical Address (Residential): Street/Flat Number: Street Name: Suburb: Code:						Learner Cell No:	
Home Telephone No:				Emergency Telephone No:			
Mother deceased – write yes or no:				Father deceased – write yes or no:			

Section 2: PREVIOUS SCHOOL INFORMATION (Please provide [original] latest school report)

Name of Previous School:	
Telephone Number:	Email Address:
STATUS OF SCHOOL FEES: Please have the document entitled 'School Fees Clearance' completed and returned to Maryvale College NOTE: The information provided will be verified	

Section 3: LEARNER MEDICAL INFORMATION

Medical Aid Number:	Medical Aid Name:
Medical Aid Main Member:	
Doctor's Name:	Doctor's Telephone Number:
Medical Condition:	

Section 4: THE FOLLOWING DOCUMENTS MUST ACCOMPANY THE APPLICATION FORM:**Original documents required. Please keep a copy for your records** (note: we do not make copies at our office)

	OFFICE USE ONLY
<ul style="list-style-type: none"> Certified copy of Birth Certificate Certified copy of Passport & Study Permit/Visa / Permanent Residence or other immigration document (to be compliant with immigration status) Two years school reports (this year PLUS previous year) Copy of Baptism Certificate (Catholics only) Identity-size photo of learner 	
<ul style="list-style-type: none"> R300 Application fee / Assessment (non-refundable) for all grades EXCEPT Grade R Applicants to prove affordability (a minimum of R20 000.00 per month, after deductions, qualifies) Proof of income of person/s responsible for payment (i.e. current salary advice OR 3 x months bank statements [i.e. if you are self-employed]) 	Receipt No:
<ul style="list-style-type: none"> IDs (or Passport) of person/s responsible for payment Proof of Residence (current, not older than 3 months) School Fees Clearance document 	
NB: The deposit is non-refundable (development levy – not part of school fees) Primary School – R4800 / High School – R5000	Deposit Paid (Receipt No.):

PLEASE PRINT CLEARLY

Section 5: SIBLINGS (Please indicate details of any siblings in our school)		
Full Name:	Grade:	
Full Name:	Grade:	
Full Name:	Grade:	

Section 6: PARENT / GUARDIAN INFORMATION											
Surname of FATHER :					First Names						
Occupation/employer:					Monthly Salary (NETT):						
Marital Status:					Home Language:						
Tel: Work			Tel: Home			Tel: Cell					
Email Address: PRINT CLEARLY											
Identification No / Passport No:								Account Payer:		Yes	No
<u>Physical Address</u> (Residential): Street/Flat Number: Street Name: Suburb: Code:					<u>Postal Address</u> : Box No: Suburb: Code						

Surname of MOTHER :					First Names						
Occupation:					Monthly Salary (NETT):						
Marital Status:					Home Language:						
Tel: Work			Tel: Home			Tel: Cell					
Email Address: PRINT CLEARLY											
Identification No / Passport No:								Account Payer:		Yes	No
<u>Physical Address</u> (Residential): Street/Flat Number: Street Name: Suburb: Code:					<u>Postal Address</u> : Box No: Suburb: Code						

Section 7: DETAILS OF NEXT OF KIN OF LEARNER (Other than immediate family) – in case of emergency										
Full Names:										
Telephone:	Work:			Home:			Cell:			

HOW DID YOU HEAR ABOUT MARYVALE COLLEGE?

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:/...../.....

MARYVALE COLLEGE IS AN INDEPENDENT CATHOLIC DAY SCHOOL
WE ACCEPT LEARNERS OF ALL RELIGIONS FROM PRE-GRADE TO MATRIC

MARYVALE COLLEGE

Independent Catholic Day School
PO Box 51698, Raedene, Johannesburg 2124
www.maryvalecollege.co.za

Pre-Primary and Primary School

Principal: Mrs K Smith
Cnr Louis Botha Ave and Cheltondale Rd.
Orchards, Johannesburg 2192
Tel: (011) 485 1210/13
Fax: 086 457 1441
Email: primaryadmin@maryvalecollege.co.za



High School

Principal: Mr Q H Davids
10 St. Mary's Rd.
Maryvale, Johannesburg, 2192
Tel: (011) 640 3061/9
Email: admin@maryvalecollege.co.za

SCHOOL FEES CLEARANCE

Name of Pupil	
Name of Person responsible for fee payment	
ID No. of Person responsible for fee payment	

Name of School where the pupil is currently enrolled: _____

Annual fees for _____ (year) R _____

Fees paid to date R _____

Fees outstanding R _____

Comment: _____

This is to certify that the above person has paid the school fees as indicated

Name of Head/Bursar

Signature of Head/Bursar

Date

SCHOOL STAMP



KINDLY RETURN THIS FORM TO MARYVALE COLLEGE EITHER VIA EMAIL OR FAX (see details for High School/Primary School at the top of this page)



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TPN Credit Bureau

Maryvale College is affiliated to TPN Credit Bureau, a registered credit bureau, all account payment profiles, patterns and behaviour is recorded monthly with the credit bureau for the purposes as per the National Credit Act.

CONSENT CLAUSE: _____
(Parent/s/Guardian, Name and Surname)
Contractual Agreement

The Parent/s/Guardian consents to and authorized **Maryvale College**, to:

- a) Contact, request and obtain information at any time from any supplier, service or credit provider (or potential credit provider) or registered credit bureau in order to assess the behaviour, profile, payment patterns, indebtedness, whereabouts, and creditworthiness of the Parent/s/Guardian, and
- b) Provide information about the behaviour, profile, payment patterns, indebtedness, whereabouts, and creditworthiness of the Parent/s/Guardian to any registered credit bureau or to any supplier, service or credit provider (or potential credit provider) seeking a trade reference regarding the Parent/s/Guardian dealings with the supplier, service and/or credit provider.

SIGN HERE: _____

DATE: _____

