WINDSOR

HIGH SCHOOL

SMUTS ROAD. RONDEBOSCH EAST 7780 OFFICE: 6962974 . FAX 697 4775 STAFF / SPORT: 6962975



NAME OF LEARNER:	
CURRENT SCHOOL:	

APPLICATION FOR ENROLMENT AT WINDSOR HIGH SCHOOL GRADE 8 OF 2012

PLEASE NOTE:

PLEASE ENSURE THAT ALL THE FOLLOWING DOCUMENTS ARE ATTACHED TO THIS APPLICATION.

THE TERM "PARENT" AS DEFINED IN THE SASA REFERS TO THE PERSON/S RESPONSIBLE FOR THE CHILD.

APPLICATIONS WILL BE CONSIDERED AS INCOMPLETE AND CANNOT BE PROCESSED IF ANY ONE OF THE FOLLOWING REQUIREMENTS IS OUTSTANDING OR ANY SECTION OF THE QUESTIONNAIRE INCOMPLETE.

- * 2 Recent ID photos of Learner: Please write learner's name on the back of the photo and put it in a clear money bag.
- * Certified Copies of:
 - (a) Learner's birth certificate / identity document
 - (b) Identity document of Parent / Guardian
 - (c) Proof of immunisation
- * Proof of Address (electricity, telephone or rates account original not older than 3 months;
- * Latest available Report of learner (Grade 6 final report please continue to submit latest copies of learner's reports throughout the year, i.e Grade 7 March, June, September)
- * OPTIONAL: Copies of certificates, etc. that may assist the committee to get a broader view of the learner.

PLEASE NOTE:

Closing date for the first round of applications is Friday 3 June 2011.

Please refer to the abridged Windsor High Admission Policy on page two before completing this application. Completing an application before the due date is NOT a guarantee of acceptance. Please apply to more than one school .

OFFICE USE ONLY	OFFICE CHECKLIST
LEARNER ACCEPTED (Y/N)	I.D. PHOTO'S x 2
DEPUTY SIGN ACCEPTANCE	CERTIFIED COPY OF LEARNER'S BIRTH CERTIFCATE
PRINCIPAL SIGN ACCEPTANCE	CERTIFIED COPY OF PARENTS I.D. DOCUMENTS
PARENT ACCEPTS (Y/N)	ORIGINAL COPY OF UTILITY BILL NOT OLDER THAN 3 MONTHS
RECEIPT NUMBER	LATEST AVAILABLE REPORT FOR LEARNER
CEMIS UNIQUE NUMBER	IMMUNISATION FORM/ PROOF
DATA CAPTURED (Y/N)	OTHER SUPPORTING DOCUMENTS
REGISTER CLASS 2012	

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ABRIDGED ADMISSION POLICY OF WINDSOR HIGH SCHOOL - 2012

This policy must be read in conjunction with the WCED policy for the Management of Admission and Registration of Learners at Ordinary Public Schools (circular 0026/2010)

1. Applications:

- 1.1 It is the purpose of this policy to maintain a constant number of learners at the school with due regard to the limited classroom physical space available at the school.
- 1.2 Applications will only be considered for admission to Grade 8 for the year 2012.
- 1.3 No applications grades 9 12 for the year 2012 can be considered in 2011.
- 1.4 A total of 140 learners will be accepted for admission to Grade 8 in 2012.
- 1.5 Applications of prospective learners must be completed in full with all supporting documents attached and reach the school by the 3 June 2011.
- 1.6 All applications duly completed as indicated above and on the official Windsor High School application form will be considered by the Admissions Committee of the school.
- 1.7 The committee will be guided by the policy criteria outlined in Clause 2 below.
- 1.8 Timely submission of an application form does not guarantee admission to the school, i.e, admission is not on a "first come, first served" basis.
- 1.9 While no application fee is charged it should be noted that should the learner be accepted and the parent acknowledges that acceptance, a first payment of R600 of the school fee for 2012 must be paid into the school's bank account. Should the parent later withdraw the acceptance, that amount will not be refundable.
- 1.10 Parents will be informed of the status of their application circa 1st July 2011.

2. Admission Criteria:

- 2.1 In anticipation of the number of applicants exceeding the available space, an Admissions Committee, constituted by the school and headed by the principal or a competent person so delegated, shall consider all applications and **shortlist** within the following guidelines:
- 2.1.1 75% (105 out of 140) shall be learners who reside within close proximity to the school (+/- 5 kilometre radius) in the area we serve Rondebosch East, Lansdowne, Crawford, Kenwyn, Kenilworth and Wetton. Applicants residing in other areas of the Southern Suburbs shall be considered on the merit of their applications in this category.
 Recommendations of applicants by the principals of primary schools situated in the areas above will also be considered.
- 2.1.2 15% (21 of 140) shall be learners who have siblings of good standing currently enrolled at the school or whose siblings of good standing were previously enrolled at the school.
- 2.1.3 10% (14 of 140) shall be learners who do not fall into any of the categories outlined above and who will be considered on the merit of their applications.
- 2.1.4 Learners who may fall into one or more of the broad categories outlined above shall not be "double counted" or "doubly disadvantaged" as the case may be.
- 2.1.5 Please note that the above are <u>shortlisting</u> criteria and not necessarily the final criteria used to accept or deny an application.
- 2.2 The Admissions Committee shall reserve the right to apply further criteria to decide on the final outcome of the application of any shortlisted applicant.
- 2.3 All successful applicants will be informed circa 1 July 2011 of the results. Parents are in turn expected to submit a written acknowledgment indicating whether or not the placement is accepted and make a first payment of the school fee for 2012 of R600.
- 2.4 Places not taken up in this way will be offered in order of merit to applicants on the standby list.

APPLICATION FORM

1. PARTICULARS OF LEARNER: (COMPLETED BY THE PARENT)

Surname:		
Full First Names:		
Residential Address:		
Postal Code:		
Gender:		
Male Female		
Home Language:		
English Afrikaans Xhosa Other		
If other, please specify:		
Date of Birth:		
D D M M Y Y Y		
ID No:		
Does the Learner suffer from any allergies or chronic ailments?		
Yes No		
If "Yes" Specify:		
Has the Learner undergone any operations?		
Yes No		
162 100		
If "Yes" indicate date and specify nature of operation:		
Learner has been immunised against:		
culosis (BCG)	YES	NO
nyelitis	YES	NO
neria	YES	NO
nus (DT)	YES	NO
ping Cough (DPT)	YES	NO
ophilus influenza Type B (HIB)	YES	NO
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I,		declare that:	
	Full Name of Learner),		
(a)	I am/was a learner in Grade at	:	
_		(Name of School) during _	(year).
(b)	I attained my present grade fairly an	d honestly.	
(c)	The report card showing that I passe	ed my previous grade is an a	ccurate and
	correct one.		
Sign	ed at(Place) on this	s day of	2010.

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SPORTS:

	LEARNER		
SPORTS CODE	PARTICIPATED IN AT	LEARNER	
OFFERED BY	PRIMARY SCHOOL	INTERESTED IN	
WINDSOR HIGH	LEVEL		OTHER
ATHLETICS			
SOFTBALL			
CRICKET			
RUGBY			
SOCCER			
NETBALL			
VOLLEYBALL			
CROSS COUNTRY			

CLUBS AND SOCIETIES:

OFFERED BY WINDSOR HIGH	LEARNER PARTICIPATED IN AT PRIMARY SCHOOL LEVEL	LEARNER INTERESTED IN DOING	OTHER
SCRIPTURE UNION			
MUSLIM SOCIETY			
ENVIRONMENTAL			
CLUB			
INTERACT			
DRAMA			
DEBATING CLUB			
SCHOOL'S QUIZ			

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3. PARTICULARS OF PARENTS

Occupation:				
D No:		T 1 1	T 1	
Passport No (IF NC		OCI IMENIT)		
Passport no (IF NC) SA IDENTITY D	DCOMENT)		
Gender: Male □ 1				
Residential Address	s:			
Postal Code:				
Postal Address:				
Contact Details:				
Cellular:				
Home: ()				
Office: ()				
Fax: ()				
E-Mail:				
			in case of emerge	nov.
Aiternative telepho	ne number (ranni)	member of other,	in case of emerger	iicy.
NI 01-4:1:				
	ip of emergency c	эпіасі		
Medical Aid:				
Vame:				
Membership No:				
Family doctor:		phone:		
ARTICULARS OF				
ATTACH DOCUMENTS T			each parent or guar	dian)
PARENT 2:	ciów must be supp	ned in respect or	sach parent of guar	didii)
Full Names and Sur	rname:			
Place of employme	nt (Namo of Com	any)		
race or emproyme	III (IVAIIIE OI COIII	any /		

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Postal Code:			
Postal Address:			
Contact Details:			
Cellular:			
Home: ()			
Office: ()			
Fax: ()			
E-Mail:			
Alternative telephone	number (family member or ot	ther) in c	ase of emergency:
Membership No:			
Medical Aid: Name: Membership No: Family doctor: PARTICULARS OF SIBLIN	phone: NGS ATTENDING WINDSOR HIGH	I SCHOOL	
Medical Aid: Name: Membership No: Family doctor:	phone: NGS ATTENDING WINDSOR HIGH		
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Medical Aid: Name: Membership No: Family doctor: PARTICULARS OF SIBLIN Full Name & Surname	phone: NGS ATTENDING WINDSOR HIGH	I SCHOOL	
Medical Aid: Name: Membership No: Family doctor: PARTICULARS OF SIBLIN Full Name & Surname	phone: NGS ATTENDING WINDSOR HIGH	H SCHOOL Grade	
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Medical Aid: Name: Membership No: Family doctor: PARTICULARS OF SIBLIN Full Name & Surname	phone: phone: NGS ATTENDING WINDSOR HIGH RESULTS THE LAST PAGE OF THIS APPLI	H SCHOOL Grade	Grade:

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/we , _					the undersigned			
Parent	/ Guardian) c	of			(Name of Le	arner)		
					e is true and correc			
					audulent action and	l that fur	nishing of such	informati
lisquali	nes my applic	cation for	admission	to Windsor F	igh School.			
Signed a	nt			on this _	day of		201	_,
James i	n Print				Signature of Par	rents		
					(Responsible for	r all fees)		
	•				n the budgetary nee nent which will be us		school.	
Please	ndicate belo	w the mo	st likely me	ethod of payr	9	sed:	school.	
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responsibility for payment due in accordanc	e with the agreement set out herein and further agree
to forfeit all rights / monetary payments if I b	oreak this contract.
Signed at	on this day of
2011.	
1	1
2	2
Names in Print	Signature of Parents