

TYNDALE CHRISTIAN SCHOOL

ADMISSION APPLICATION

(To be returned to our administration office)

Application Procedure:

1. Complete this application form and submit it together with the following documents:

- Copies of previous school reports ,
- Copy of proof of immunisations,
- Certified copy of birth certificate.
- Recent testimony from Pastor.
- Two recent passport sized colour photographs

2. A test for grade placement and/or school readiness may be requested.

3. An interview with a Board Member will be arranged.

4. You will be notified telephonically about the success of the application.

5. Successful applicants will be required to pay a registration fee in order to secure the applicants position in the school.

1. PUPIL DETAILS:

1. Surname: _____

2. First names in full _____

3. Date of application: _____

4. Age at date of application: _____

5. Date of birth:

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6. Gender Male Female

7. Date entered S.A. Education: _____
(Immigrants only)

8. Does the applicant currently have a brother or sister in the school?

YES	NO
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9. Home Language

Afrikaans	English	IsiNdebele	SiSwazi	IsiXhosa	SeSotho	SePedi	SeTswana	TshiVenda	XiTsonga	Other

10. Can the pupil understand and speak English?

YES	NO
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11. Ethnic Background

African	Coloured	Indian/Asian	White	Other

2. SCHOOLING DETAILS:1. Present grade of applicant: 2. Last grade passed:
*(If applicable, please submit copies of all previous school reports)*3. Grade for which you are applying: 4. Has the applicant repeated any grades?

5. Reason: _____

6. Previous schools attended:

Name of School	Province/Country	Period:	Grades:

Phone number of last school attended : _____

7. Has the pupil ever been expelled, suspended or refused admission to another school?
If so, please specify. _____8. Has the pupil ever been in trouble with the law, arrested, fined, etc.?
If so, please specify _____9. Has the pupil ever had any disciplinary difficulties? 10. Has the pupil ever used tobacco, alcohol or drugs of any kind? **3. MEDICAL DETAILS:**1. Name and phone number of medical doctor where the pupil's medical history is known.
_____2. Has the pupil been immunised against all normal infectious and/or contagious diseases?
*(Please submit proof)*3. Does the pupil suffer from any serious illness or have any particular medical problem?
(Give details and a doctor's certificate where applicable) _____

_____4. State which childhood diseases the pupil has contracted: _____

5. List any allergies: _____

6. Has the pupil ever had any occupational, speech or remedial therapy?
Please specify: _____
*(Please submit copies of reports)*7. Have the pupil's eyes been tested before? _____

8. For use in the case of emergencies, please indicate your medical aid name and number, if applicable.

6. PARENT UNDERTAKING:

I, the parent of _____ undertake to fulfil the following requirements:

1. School Fees:

I agree to pay the school fees by the **first day of each month**, for 12 months of the year.
I agree to pay a non-refundable registration fee, per pupil, on acceptance at the school.
I agree to the conditions of payment as set out in the Parent Handbook.
I agree to allowing the school to use debt collectors to take action against me for failing to pay school fees.

2. Discipline:

I will make every effort to discipline my child at home and to support the teacher and Principal in their efforts to train and educate my child in the manner outlined in the Parent Handbook.
I will adhere to the school rules and teach my child to adhere to these rules.

3. Tuition of Pupils:

I agree to support the school and its staff in their task of teaching and training the pupils, both academically and spiritually as set out in the Parent Handbook and the Statement of Faith.

4. School Prospectus:

I have read the School Prospectus and Handbook and agree to support the school in its philosophies and applications as set out in this document.

7. PARENT INVOLVEMENT:

We believe that the education of children is primarily the parent's God-given responsibility.
We as a school exist to assist parents in this task. We therefore encourage our parents to be involved in whatever way possible. There are committees which offer scope for involvement as well as other practical areas.
With this in mind, please complete the information below:

Is there a particular area in which you would like to be involved? _____

8. INDEMNITIES:

The parent / legal guardian undertakes to:

- Indemnify the school, its employees and officials, against any injury, harm or other loss caused to any pupil of the school.
- Exempt the school, its employees and officials, from liabilities incurred on account of injuries to or illness of the pupil, and agrees and consents that the school or any of its teachers may consent to any operation or medical treatment of the pupil should such consent be required for medical reasons on an urgent basis, and should it not be possible for the parent of the pupil to be contacted immediately.
- Exempt the school from any liability for loss or damage suffered due to the loss or damage of articles brought onto the school property.
- Indemnify the school, its employees and officials, against any injury, harm or other loss caused to any pupil of the school whilst on school outings and trips, provided the school endeavours to take adequate steps within its power to provide for the safety of the pupils.

9. SCHOOL UNDERTAKING:

1. The school shall provide the pupils with tuition in accordance with the core curriculum and core syllabus, evaluating pupils according to their particular educational phase.
It is intended that the prescribed curriculum will enable pupils to write a recognised matric exam in order to qualify for local tertiary institutions.

2. The school shall make every effort to fulfil its mission policy as stated below:
" Tyndale Christian School is an affordable, independent English Christian School that seeks to assist parents of all evangelical denominations, in training their children academically, physically, spiritually and socially, by means of quality, God-fearing education."

I hereby certify that all the information given in this document is entirely true and correct.

Signatures: Mother: _____
Father: _____
Person responsible for payment of the accounts: _____
Date: _____