RIETONDALE HIGH SCHOOL

Private bag X06, Gezina, 0031
Tel: 012 329 0574
E-mail: admin@rietondalehs.co.za
Website: www.rietondalehs.co.za

GR 8 APPLICATION FOR ENROLLMENT

LEARNER NAME & SURNAME: _____

Departmental reference number: _____

PHOTO

FOR OFFICE USE			
Waiting list no:		Register class:	
Signature:		Admission no:	
Enrolment date:		Family code:	

ADMISSION REQUIREMENTS

1. When a learner applies to be admitted to the school for the first time, the parent/guardian of said learner must complete the application for enrolment form and submit it via **email**. All learners must re-register annually.
2. **Grade 8 applications**, must first be submitted online (**www.gdeadmissions.gov.za**). If successful in completing an online application and having received a reference number and sms, then only complete the school application form, downloaded from the school's website. The completed form, together with all the requested supportive documentation must be handed in at the school's front office.
3. Effective communication with you is a priority for us. We make use of the d6 Connect App. This application simplifies communication and enables us to share relevant important notices/announcements, resources and calendar events. We will also be able to notify of any absenteeism and misconduct with regards to your child.

NB: Kindly attach the following documentation:

- ☐ Proof of residential address (**original/certified copy of municipal account OR formal lease agreement**)
- ☐ **Certified copy** of learner's original **unabridged birth certificate**;
- ☐ **Latest school report** (Original/certified copy).
- ☐ **Certified copies of both parents'/guardians' identity documents**;
- ☐ Transfer card from previous school (only when approved);
- ☐ Proof of employment on an original letterhead if you **work** in the area.
- ☐ **Learners with immigrant status** must also provide the following **certified documentation**: study permit; parents' ID documents; parents' work permit; **If documentation is not available** submit proof that he or she has applied for the necessary documentation.
- ☐ In case of foster care, a copy of the court order;
- ☐ In case of divorce, a copy of the court order indicating guardianship.

Please note that the application will only be processed if ALL of the above documents have been submitted.

*The submission of any false **documentation** in the process of enrolment will lead to immediate nullification of your application and waiting list number. A new application form must then be completed and a new waiting list number will be issues thereafter.*

RIETONDALE HIGH SCHOOL

ENROLMENT FORM – 2026

PLEASE COMPLETE WITH A BLACK PEN

DO YOU HAVE ANY LEARNERS CURRENTLY/PREVIOUSLY IN THIS SCHOOL? | Yes | No |

Name of sibling(s) in the school: _____

LEARNER INFORMATION	
Full names	_____
Surname	_____
Preferred name	_____
Date of birth	_____ (dd) _____ (mm) _____ (yy)
Nationality	☐ RSA ☐ Other
ID no	☐☐☐☐☐☐☐☐☐☐☐☐☐
Passport number	_____
Asylum seeker?	☐ Yes ☐ No
Permit no	_____
Permit expiry date	_____
Religious denomination	_____
Gender	_____
Ethnic group	_____
Home language	_____
Preferred language	_____
Dexterity	☐ Right-handed ☐ Left-handed
Learner's mobile no	_____
Learner's email	_____
Residential address	_____
	_____
	_____

NEXT OF KIN (Other than the parents)	
Name	
Surname	
Contact number	
Relationship	
AND / OR	
Name	
Surname	
Contact number	
Relationship	

FAMILY INFORMATION			
	Both parents		Single parent - Unmarried
	Foster care		Single parent - Divorced
	Children's home		Recomposed
	Widow/Widower		Other
	Mother deceased		Father deceased

LEARNER HEALTH INFORMATION	
Chronic disease(s)	
Allergies	
Medication	

MEDICAL AID INFORMATION	
Name	
Tel no	
Member number	
Primary member	

FAMILY DOCTOR INFORMATION	
Name	
Tel no	
Address	

INFORMATION OF PRIMARY/PREVIOUS SCHOOL	
Previous school	
Tel no	
Address	
Highest grade passed	

BIOLOGICAL PARENT 1 / LEGAL GUARDIAN 1 INFORMATION (FATHER)

Title _____
Full names _____
Surname _____
Initials _____
Preferred name _____
Marital status _____
Nationality _____
Date of birth _____ (dd) _____ (mm) _____ (yy)
ID no | | | | | | | | | | | | | |
Passport no _____
Asylum seeker? _____
Permit no _____
Permit expiry date _____
Gender _____
Home language _____
Communication preference ☐ SMS ☐ E-mail
Mobile no _____
Home no _____
E-mail _____
Residential address _____

Postal address _____

OCCUPATION INFORMATION

Occupation status
☐ Contract worker
☐ Full time employed
☐ Housewife
☐ Part-time employed
☐ Pensioner
☐ Self-employed non-professional
☐ Own-employed professional
☐ Student
☐ Temporary employment
☐ Unemployed

Occupation _____
Employer _____
Work tel no _____
Employer address _____

Does learner live with parent? ☐ Yes ☐ No

BIOLOGICAL PARENT 2 / LEGAL GUARDIAN 2 INFORMATION (MOTHER)

Title _____
Full names _____
Surname _____
Initials _____
Preferred name _____
Marital status _____
Nationality _____
Date of birth _____ (dd) _____ (mm) _____ (yy)
ID no | | | | | | | | | | | | | |
Passport no _____
Asylum seeker? _____
Permit no _____
Permit expiry date _____
Gender _____
Home language _____
Communication preference ☐ SMS ☐ E-mail
Mobile no _____
Home no _____
E-mail _____
Residential address _____

Postal address _____

OCCUPATION INFORMATION

Occupation status
☐ Contract worker
☐ Full time employed
☐ Housewife
☐ Part-time employed
☐ Pensioner
☐ Self-employed non-professional
☐ Own-employed professional
☐ Student
☐ Temporary employment
☐ Unemployed

Occupation _____
Employer _____
Work tel no _____
Employer address _____

Does learner live with parent? ☐ Yes ☐ No

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PERMISSION FROM PARENTS

Protection of Personal Information

1. I/we, being the parent/s or legal guardian/s of the learner, consent to:

   a. my/our personal information being collected, processed and stored by the school in terms of the relevant provisions of the Protection of Personal Information Act 4 of 2013 (POPI) for purposes of the proper functioning, management and governance of the school, as prescribed in the South African Schools Act, 84 of 1996 and other relevant national and provincial educational legislation and policies, and
   b. the learner's personal information (including academic, attendance, behavioural and other school-related records) being collected, processed, shared and stored by the school in terms of the relevant provisions of the Protection of Personal Information Act 4 of 2013 (POPI) for purposes of enrolment of the learner in the school, the proper functioning, management and governance of the school, as prescribed in the South African Schools Act, 84 of 1996 and other relevant national and provincial educational legislation and policies.
   c. include photographs, with or without name, of your child in school publications/website/D6 Gallery or in press releases to celebrate your child's activities, achievements or successes.
   d. supply information and a reference in respect of your child to any educational institution which you propose your child may attend. We will take care to ensure that all information that is supplied relating to your child is accurate and any opinion given on his/her ability, aptitude and character is fair. However, the school cannot be liable for any loss you or your child is alleged to have suffered resulting from opinions reasonably given, or correct statements of fact contained, in any reference or report given by us.
   e. communicate with you via electronic means such as the SMS system or D6 communicator or class dojo etc.

2. I/we confirm that I/we have been informed that the abovementioned personal information will be dealt with in line with the school's POPI policy, which is available upon request to the school. I also confirm that I am aware that my/our rights with regards to the protection of my personal information is also detailed in this policy.

3. I/we confirm that I/we understand that it is my/our responsibility to inform the school as soon as any of the personal information I have provided herein changes and undertake to furnish the school with such amended information as soon as possible.

4. The school may not distribute or otherwise publish any of your personal information in its possession, unless you give your consent, in writing, to the school that it may do so. Should this be the case, the school may only distribute or otherwise publish the information specified in your consent to the people and for the purpose stated in your written consent.

_____

NAME OF CHILD

_____ _____

NAME OF PARENT/GUARDIAN **SIGNATURE OF PARENT/GUARDIAN**

_____

DATE

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RHS 32

INDEMNITY FORM

EXTRA-CURRICULAR ACTIVITIES

1. I, _____ (full name and surname),

   parent/guardian of _____

   ID _____full name and surname and ID-number of learner), hereby give permission that he/she may attend/participate in the school's extra-mural activities entirely at his/her own risk.

2. I accept that the necessary precautions will be taken to ensure the safety and wellbeing of my child and that I will be responsible for the payment of any hospital and/or medical accounts, if applicable, in the event of an injury not resulting from the negligence of the supervising staff members.

3. I authorise the principal of the school or his representative(s), to act on my behalf should urgent medical attention be necessary for my child. To the best of my knowledge he/she is in good health.

4. I request the responsible persons to pay special attention to the following: (Name any illness or condition e.g. allergies, asthma, epilepsy, etc.) _____

   _____

5. The following information is required in the event of medical treatment or hospitalisation:

   5.1 Name and address of employer:_____

   5.2 Name of Medical Aid:_____ Plan / Option: _____

   Membership no: _____

   5.3 Force number(Permanent Force, SA Police, etc.): _____

   5.4 Complete the following **only** if you qualify for special medical tariffs or do not have a medical aid:

   5.4.1 Occupation: _____

   5.4.2 Yearly gross income: Husband: _____ Wife: _____

   5.4.3 Number of dependants (including spouse): _____

   5.4.4 Age of dependants (excluding spouse): _____

   5.5 Residential address of parent/guardian: _____

   5.6 Telephone numbers: Home: (_____)_____ Work: (_____)_____

   Cell: (_____)_____ Other: (_____)_____

SIGNATURE: PARENT/GUARDIAN _____ **DATE:** _____

ID NUMBER: _____

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CONSENT: SCHOOL POLICIES

I, (names in full) _____ parent/guardian of

_____

1. Declare that the forms as requested have been completed fully and that the particulars are true and correct.
2. Agree to adhere to the requirements regarding admission as stipulated in the "ADMISSION REQUIREMENTS".
3. Undertake to pay all school fees as stated in the financial document.
4. Choose the residential address as domicilium citandi et executandi, and hereby agree to the delivery of all notices and documents to said address.
5. Undertake to notify the school in advance of change of address or when my child is leaving school.
6. Undertake to support the school in the implementation of the school rules and requirements regarding school uniform, school fees and school attendance.
7. Recognize the Governing Body of the school as the democratically elected governing body of the school, and will support the school and the Governing Body in all the decisions made in the interest of the school.

AND

CONSENT: EXTRAMURAL ACTIVITIES

1. I, parent/guardian, herewith give permission that my child can participate in the curriculum and extramural activities as set by the Rietondale High School and may also attend relevant trips and tours.
2. I accept that all possible precautions will be taken to ensure his/her safety. I will be responsible for medical and hospital accounts (if applicable) in cases of injuries which cannot be ascribed to negligence on the side of the person in charge.
3. To my knowledge he/she is healthy and physically able to participate in the activities mentioned.
4. I grant power of attorney to the principal or his/her representative in case of medical treatment or surgery.
5. I request the person in charge to take note of the following: (e.g. abnormal bleeding, allergies, epileptic seizures, diabetes, etc. _____

   _____

   _____(PLEASE LIST IN DETAIL)

_____	_____	_____
PARENT/GUARDIAN *(Signature)*	**LEARNER** *(Signature)*	**DATE**

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UNDERTAKING TO PAY STATUTORY OBLIGATION:

1. I, we (names in full) _____, parent(s)/guardian(s) of _____has applied and received online confirmation to be able to enrol the mentioned child as learner at Rietondale High School.

2. I/we hereby certify that I/we am/are the biological/adoptive parents or that I/we have legal custody and/or legal guardianship in respect of the above named learner.

3. I/we take note and understand the following:
   a. In terms of Section 39 of the South African Schools Act, parties are liable to pay compulsory school fees. This is a statutory obligation. In terms of Section 40 and 41 of the South African Schools Act, the school may enforce the payment of these compulsory fees.
   b. The responsible parties will be liable for the timeous and full payment of school fees as approved by the parents and guardians at the Annual General Parents' Meeting.
   c. The monthly instalments are to be paid in advance at the Financial Office of Rietondale High School, via EFT or debit order by the 7th of each month. The banking details are: Rietondale High School, ABSA account 050275574.
   d. The payment options are as follows:

Annually in advance	
Monthly in advance	

   e. Biological/adoptive parents/guardians are jointly and severally liable for the payment of the school fees irrespective of their marital status.
   f. In the event of non-payment of school fees, the school will institute legal action against both parents/guardians irrespective of maintenance and court orders which exist between the parties.
   g. All queries regarding school fees should be addressed in writing to the Financial Office.
   h. If parties are two months in arrears, the full amount of school fees will become due and payable immediately.
   i. In the event of the school having to take legal action for the recovery of school fees, all legal costs, including attorney/client fees and collection costs incurred by the school, will be charged to the parties' accounts.
   j. The school or the School Governing Body reserves the right to request a credit report of the parties liable for the school fees by virtue of the signatures on this contract.
   k. In the event of the school fees being in arrears, the school has the right to list both parties as a default payer at the Credit Bureau.

In the event of legal action being instituted against the parties hereto, the parties:

- consent to the jurisdiction of the Magistrates Court for purposes of any action resulting from this Agreement;
- agree to all costs relating to such action to be on the scale of attorney/client fees;
- consent that judgement be taken against the parties without any further notice to him/her and that an emolument attachment order be granted against the parties' salaries for the outstanding amount;
- each choose domicillium citandi et executandi for all purposes hereunder at their respective physical addresses stated in the information section. Any written notice or communication shall be deemed to have been received by the addressee on the fifth day following the date of posting thereof by prepaid registered mail or on the date of delivery if delivered by hand.

The parties hereto bind themselves jointly and severally.

EXEMPTION

Parties who wish to apply for exemption must personally collect the application forms from the Financial Office and personally return them. Any application for exemption from the payment of school fees must be submitted in writing together with all supporting documentation, to the Financial Office. An application for exemption is subject to review on a quarterly basis. A party who is dissatisfied with the decision referred to in regulation 6(1) may, in writing and within 30 days after receipt of the notification of that decision, appeal to the Chairperson of the School Governing Body.

The Governing Body has the right to investigate an applicant's financial position.
Until exemption (total or part) is granted, the parties remain liable for full payment of school fees.

DETAILS OF PERSON(S) RESPONSIBLE FOR THE ACCOUNT (BOTH PARENTS/GUARDIANS):

PARENT/GUARDIAN 1:

Surname:		E-mail address:	
Title:		Tel no (home):	
Full names:		Tel no (work):	
Occupation:		Cell no:	
Employer:		Home address:	
Work address:			
		Relationship to learner:	
Signature:		Date:	

PARENT/GUARDIAN 2:

Surname:		E-mail address:	
Title:		Tel no (home):	
Full names:		Tel no (work):	
Occupation:		Cell no:	
Employer:		Home address:	
Work address:			
		Relationship to learner:	
Signature:		Date:	