



Milner Road, Kensington B, Randburg
P. O. Box 4839, Randburg, 2125
Tel: (011) 789-6778/9

Webpage: www.knightsprep.com

E-mail: admissions@knightsprep.com

Please
attach a
recent ID
size photo
of the
student

Application Fee: R500 - Application fee is payable upon submission (non-refundable).
No application will be processed, until all documents and the R500 application fee is received.

Acceptance Fee: R2 500 Acceptance fee Gr0000 (non-refundable) – (Please note this will be topped up in the Following year January to reach the full Acceptance value for that year)
R6 500 Acceptance fee payable upon acceptance (non-refundable).
This is not a deposit nor refundable under any circumstances.

APPLICATIONS WILL NOT BE PROCESSED UNLESS COPIES OF THE DOCUMENTS REQUESTED BELOW ARE ATTACHED. KINDLY INITIAL EACH PAGE OF THE APPLICATION.

DOCUMENTS TO ACCOMPANY THIS APPLICATION:

1. The student's unabridged / abridged birth certificate and passport if available
2. Student's latest two school reports/ and any latest assessment reports
3. Recent colour ID or ID size photo (head and shoulders picture of student, please attach above)
4. I.D. Document of both parents/guardian's and person responsible for payment of fees
5. Fees Policy, structure and payment form
6. Financial Clearance Certificate from previous school (detach from application)
7. Proof of Guardianship (if applicable)
8. S.A. Study Permit (Immigrants only)

Date of Application _____

Grade applying for _____

Please note: This form is only an Application and does not automatically admit the student to Knights Preparatory School.

I/We (Father's name) _____ I.D number _____ and (Mother's name) _____ I.D number _____ parent/s or Guardian of _____ (name of child) I.D number _____ hereby consent and allow Knights or its appointed agents, permission to access my/our consumer profile on the database held by the relevant Credit Bureau/s and to verify my/our details as stated by me/us, on my/our Application Form submitted to the school.

I have read, understand and I agree to the contents of this application form:

NAME OF PARENT/GUARDIAN *Please print*

SIGNATURE OF PARENT / GUARDIAN

NAME OF PERSON RESPONSIBLE *Please print*

SIGNATURE OF PERSON RESPONSIBLE

A. STUDENT INFORMATION:	
Surname:	Male / Female:
Name:	Known as:
Date of Birth: YYYYMMDD	Age: YYMM e.g. 12y4m
Child's ID Number:	First Language:
Home Address:	
Who has parental responsibility? (circle) Dad Mom Both Parents living together? YES NO	
Current Pre-School/Preparatory:	Current Grade:
Current Pre-School/Preparatory Telephone Number:	
Grade applying for:	Year of Entry:
Medical Aid Name:	
Main Member's name:	
Medical Aid Number:	Medical Aid Plan:
Allergies: <small>Please list all</small>	
Name of Doctor:	Doctor's Telephone Number:
Nationality: <i>(Required by Government for statistical reasons)</i> e.g. South African	
Population Group: <i>(Required by Government for statistical reasons)</i> e.g. African, Indian, Asian, White, Coloured, other	
Which Province do you reside in?	

B. FATHER / GUARDIAN INFORMATION:	
Surname:	
First Name:	
Marital Status: Single <input type="checkbox"/> Married <input type="checkbox"/> Widowed <input type="checkbox"/> Divorced <input type="checkbox"/>	
Spouse's Name:	
Home Address:	
Postal Address: P.O. Box	Postal Code:
Do you stay with the applicant?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Identity Number/ Passport Number:	
Are you a South African Citizen?	Yes <input type="checkbox"/> No <input type="checkbox"/>
If not, give details of citizenship and South African resident status:	
Occupation:	
Company employed by:	
Work Telephone Number:	
Work e-mail Address:	Cell:
Home Telephone Number:	
Home e-mail Address:	
Do you attend a church?	
If yes, name of church	

C. MOTHER/GUARDIAN INFORMATION:	
Surname:	
First Name:	
Marital Status: Single <input type="checkbox"/> Married <input type="checkbox"/> Widowed <input type="checkbox"/> Divorced <input type="checkbox"/>	
Do you stay with the applicant (child)? Yes: <input type="checkbox"/> No: <input type="checkbox"/>	
Spouse's Name	
Home Address:	
Postal Address: P.O. Box	Postal Code:
Identity Number/ Passport Number:	
Are you a South African Citizen?	Yes: <input type="checkbox"/> No: <input type="checkbox"/>
If not, give details of citizenship and South African resident status:	
Occupation:	
Company employed by:	
Work Telephone Number:	
Work e-mail Address:	Cell:
Home Telephone Number:	
Home e-mail Address:	
Do you attend a church?	
If yes, name of church	

D. GENERAL:	
Do you have any family and / or friends currently in the school?	
If yes, state the grade and name of such student/s.	
Please outline the two main reasons why you want your child to attend Knights Preparatory School.	1. 2.
Do you have any other children of school-going age that you are not applying for? If yes, give reasons why they will not be attending Knights Preparatory School.	
How did you hear about us? Example: Friend, advert, church, current/past student, etc.	
Approximately how far do you live from school? (Required by GDE for statistical reasons.)	(Please circle) 5kms or less 10kms 15kms 20kms 25kms or more

E. MARKETING:	
<p>During the course of the school year photographs of the children who have excelled or participated in special events at Knights may be published in newspapers, on Facebook or other social media. This is exciting for the children as they receive recognition for their endeavours. Please confirm below that you permit Knights Preparatory to use such photographs.</p> <p>Please indicate by ticking the box below, if you give Knights Preparatory permission to use photographs of your children for the purposes of marketing the school. YES <input type="checkbox"/> or <input type="checkbox"/> NO</p> <p>Signed: _____ (Parent/Guardian) Date: _____</p>	

F. LEGAL GUARDIAN OR PERSON/S RESPONSIBLE FOR PAYMENT OF FEES:

Surname: _____ Name: _____

I.D. Number: _____ Marital Status: _____

Are you a South African citizen? YES NO

If not, details of citizenship and South African status: _____

Occupation: _____

Company employed by: _____ Tel No: _____

E-mail Address: _____

In the event of the parents being divorced, is it required that a copy of the student's report be sent to the non-custodian parent and/or fee payer as well? YES NO

If yes, the email address to which a copy of the student's report is to be sent:

In the event of the parents being divorced, the onus rests entirely on the person completing this form to ensure that the parent and/or guardian and/or other entity stipulated as the fee payer is in terms of the agreement of settlement and/or court order handed down in respect of such divorce, that the fee payer is correctly stipulated as in terms of such court order. In the event of the person responsible for payment of fees fails to effect payment of the fees when due, the person signing this application form shall be responsible for payment of any fees due to Knights Preparatory School.

Signature of person responsible for fees

G. ENTITY (E.G. TRUST) RESPONSIBLE FOR PAYMENT OF FEES:

Name of Entity: _____

Is the said entity a close corporation, company or trust? _____

Responsible person: _____

If said entity is a company, close corporation or trust, the registration number is required:

If a company, close corporation or trust, a resolution authorising the said person to sign this application form is required:

Street address: _____

Postal address: _____

Telephone number: (h) _____ (b) _____ (cell) _____

E-mail address: _____

If the entity or Trust fails to pay the fees for any reason whatsoever, the person signing this application form shall be responsible for payment of any fees due to Knights Preparatory School.

H. APPLICANT – GENERAL INFORMATION

1. Is there any professionally tested and diagnosed learning difficulty with the student? If yes, explain and provide relevant documentation e.g. diagnostic test, eye test, psychologist report, etc.

2. Briefly outline student's sporting and or cultural participation to date.

3. Briefly outline student's hobbies and other interests.

4. In the event of divorce please attach any relevant documentation required by the school e.g. Restraining Order.

5. In the event of an emergency please give us alternative contact details:

5.1 Full Name (Mr/Miss/Mrs) _____

Contact Number: _____

Email Address: _____

Relationship to learner: _____

5.2 Full Name (Mr/Miss/Mrs) _____

Contact Number: _____

Email Address: _____

Relationship to learner: _____

I. SCHOOL FUNCTIONS AND SPORT FIXTURES PROCEDURE

After School Function and Sport Fixture – Parental Responsibility:

We have unfortunately had to implement a late penalty for parents who do not fetch their child timeously after a school function.

The same penalty applies to sport fixtures. Should your child not be picked up at the time stipulated in the letter, they will either be sent to our Aftercare facility (during aftercare hours), or a late penalty will apply.

*The **late penalty** will be **R220** per half an hour which starts 15 minutes after the stipulated end time of a function or fixture.*

J. STATEMENT OF FAITH

At Knights, this is what we believe:

- In one God, who exists in three Persons—the Father, Son, and Holy Spirit. He is loving, holy and just.
- That the Bible is God’s Word. It is inspired and accurate. It is our perfect guide in all matters of life.
- That sin has separated us all from God, and that only through Jesus Christ can we be reconciled to God.
- That Jesus Christ is both God and Man. He was conceived by the Holy Spirit and born of the virgin Mary. He led a sinless life, took all our sins upon Himself, died and rose again. Today, He is seated at the right hand of the Father as our High Priest and Mediator.
- That salvation is God’s gift to us. It is available to anyone who confesses the Lord Jesus with their mouth and believes that God has raised Him from death to life.
- That water baptism is a symbol of the cleansing power of God and a testimony of our faith in the Lord Jesus Christ.
- That the Holy Spirit is our Comforter. He guides us in all areas of our lives. He also blesses us with spiritual gifts and empowers us to yield the fruit of the Spirit.
- That the Holy Communion is a celebration of Jesus’ death and our remembrance of Him.
- That God wants to transform, heal, and provide for us, so that we can live blessed and victorious lives that will impact and help others.
- That we are called to preach the gospel to all nations.
- That our Lord Jesus Christ is coming back again just as He promised.

We/I, _____ and _____ confirm that we/I are the parent/s of _____.

We/I confirm that we/I have fully read and understood the Statement of Faith, set out above, and confirm that we/I and my/our child/children agree to unconditionally abide by the tenets of faith set out therein and its ongoing application at Knights.

Signature

Signature

Date

K. PARENT CONTRACT

To be completed by Parent / Guardian and / or person and / or entity responsible for the payment of fees.

We understand and hereby agree to be bound by the following terms and conditions:

1. Knights Preparatory School is an independent school and entry to the school is not guaranteed on application and / or interview. See the attached Admission Policy.
2. On acceptance and enrolment of the student, Knights Preparatory School requires the sum of R6 500.00 to be paid as an acceptance fee. Such acceptance fee is non-refundable. The parent/guardian, person or entity responsible for payment of the fees shall have no claim to repayment thereof. _____ **Sign here**
3. Adherence to the terms and conditions of Knights Preparatory School Learner's Code of Conduct ("code"), as amended from time to time at Knights Preparatory School's discretion, a copy of which will be available on request (on website) and which code is deemed to be an integral part of this form. Additionally, parents are required to support the Christian ethos of Knights and children are required to participate in all activities in this regard.
4. In the event of non-payment of fees or breach of any other provision of this application or the code or for any reason whatsoever the Board of Knights Preparatory School shall in its sole discretion, be entitled to terminate this agreement with immediate effect. Knights Preparatory School has the right to unilaterally terminate the student's tuition at Knights Preparatory School on 30 days written notice to the parent/s and/or guardian/s and/or person or entity responsible for payment of the student's fees, or such shorter period as the Board of Knights Preparatory School deems appropriate in its sole discretion. The student shall be withdrawn from Knights Preparatory School at the end of the notice period in question or as per mutual agreement between Knights Preparatory School and the parent/guardian.
5. Fees are due in advance on the 1st working day of each month.
6. Parents and/or guardians and/or person/s responsible for payment of fees shall be jointly and severally liable in respect of the fees and other charges levied by Knights Preparatory School, the one paying the other to be absolved. This obligation is applicable notwithstanding the fact that both parents and/or guardians are either divorced and/or separated.
7. All applications for Grade 1 are subject to the applicant passing a professional recognised School Readiness test, the recommended age of the child must be 6 turning 7 in the year for Grade 1. Grade 2 to 7 applicants are required to undergo a Grade assessment test at Knights Preparatory School which is part of the application process.
8. Once the student has been accepted into Knights Preparatory School, one term's written notice (4 months) of the student's intention to leave or withdraw from Knights Preparatory School and/or fees which will equate to not less than four calendar months in lieu thereof is required when the student leaves Knights Preparatory for any reasons whatsoever. Such written notice aforesaid is to be given not later than the 1st day of term.
9. Knights Preparatory School endeavours to take such steps reasonably required to do what is necessary to keep the student out of harm, and free from loss, while in its charge and under its control, taking into account what can be reasonably foreseen and provided for in each such circumstance. Subject to the limitations placed on Knights Preparatory School right to exclude liability in terms of Section 103 of the School Education Act No 6 of 1995 (Gauteng Province), both parents and/or guardians jointly and severally indemnify Knights Preparatory School, its Director/s, employees and/or agents (who may be found to be vicariously liable) against any claim that the student or the parents and/or guardians may have in respect of any injury, loss or damage of whatsoever nature and howsoever arising while on Knights Preparatory School premises and/or school activities or outings off Knights Preparatory School premises and/or in their charge and/or under their control.
10. Knights Preparatory School is a gun free, smoke free and alcohol free environment.
11. **Domicilium citandi et excutandi:** The parties choose as their respective domicilia citandi et executandi for all purposes in terms hereof the addresses listed below:
Father/ Guardian's Address: _____
Mother/Guardian's Address: _____
12. I/We hereby grant Knights Preparatory School permission to appropriately process the above-mentioned personal information.
13. I/We, the parent and/or guardian and/or trustee of the trust and/or duly authorised person of the legal entity, declare, by our signature hereto, that the information contained herein is to the best of our knowledge and belief, both true and correct.
14. Student/s Name/s: _____
Date: _____
Father/Guardian's Name: _____ Signature: _____
Mother/Guardian's Name: _____ Signature: _____

L. GRADE 0000

<input type="checkbox"/>	<u>Please tick the appropriate box:</u>
<input type="checkbox"/>	Half day (<i>until 13:00</i>) – 3 days a week
<input type="checkbox"/>	Full day (<i>until 17:30</i>) – 3 days a week
<input type="checkbox"/>	Half day (<i>until 13:00</i>) – 5 days a week
<input type="checkbox"/>	Full day (<i>until 17:30</i>) – 5 days a week

Child's Name: _____ Date: _____

Signed: _____ Parent's Full Name: _____



FINANCIAL CLEARANCE CERTIFICATE

(To be completed by the previous school if applicable)

Full Name of Pupil _____

Current School _____


Fees Paid to Date _____

Fees Outstanding _____

Notice Given YES NO

Comments _____

Signature of Principal/Bursar Designation Full name Date

School Stamp 

More than Conquerors