

FOR OFFICIAL USE

DEPOSIT RECEIPT No.	
BIRTH CERTIFICATE	
CLINIC CARD	
TUITION AGREEMENT	
REPORT	
CONFIRMATION	
CEMIS	



FOR OFFICIAL USE

ADMITTED TO GRADE
DATE STARTING

**APPLICATION FOR ADMISSION TO
RONDEBOSCH BOYS' PREPARATORY SCHOOL**

78 Campground Road Rondebosch 7700. Tel 021-686 4635 Fax 021-685 1492
e-mail: info@rondebosch.com http://www.rondebosch.com

TO ENTER GRADE on 20..... at the age of years months

DETAILS OF CUSTODIAL PARENT/FATHER:

MARITAL STATUS: I.D. No.:
 FULL NAMES: TITLE:
 CELL. PHONE NO.: FAX. NO.:
 EMAIL ADDRESS:
 RESIDENTIAL ADDRESS:
 CODE: TEL. NO.: (H)
 HIGHEST EDUCATIONAL QUALIFICATION:
 OCCUPATION: POSITION:
 NAME OF FIRM: TEL. NO.: (W)

DETAILS OF OTHER PARENT:

MARITAL STATUS: I.D. No.:
 FULL NAMES: TITLE:
 CELL. PHONE NO.: FAX. NO.:
 EMAIL ADDRESS:
 RESIDENTIAL ADDRESS:
 CODE: TEL. NO.: (H)
 HIGHEST EDUCATIONAL QUALIFICATION:
 OCCUPATION:
 NAME OF FIRM: TEL. NO.: (W)

IF DIVORCED – PLEASE STATE LEGAL GUARDIAN
 STATE NAMES AND GRADES OF BROTHERS AT RBPS / RBHS:

DETAILS OF PUPIL:

SURNAME OF PUPIL:
 FIRST NAMES OF PUPIL:
 PREFERRED NAME:
 DATE OF BIRTH OF PUPIL: DAY OF MONTH YEAR
 • (Please attach copy of Unabridged Birth Certificate) I.D. No. of PUPIL:

CITIZENSHIP: COUNTRY OF ORIGIN:

IMMIGRANT: YES / NO STUDY PERMIT: YES / NO DATE STARTED S.A. EDUCATION:

HOME LANGUAGE OF PUPIL: HOME LANGUAGE OF FAMILY: RELIGION:

NAME & ADDRESS OF PREVIOUS SCHOOL ATTENDED BY PUPIL (Including Pre-School)

• (Please attach a copy of your son's most recent report - ONLY FOR GRADE 2 - 7)

NAME OF SCHOOL:

ADDRESS OF SCHOOL:

PRESENT TEACHER'S NAME: CODE:

TEL. NO.: FAX. NO.:

DATE OF LEAVING ABOVE SCHOOL: LAST GRADE PASSED:

HAS YOUR SON EVER REQUIRED REMEDIAL, OCCUPATIONAL OR PHYSIO-THERAPY? YES / NO

IF YES, PLEASE SUPPLY DETAILS (Use a separate page if necessary)

MEDICAL HISTORY

State any important illnesses from which the pupil has suffered (e.g. Asthma, Epilepsy)

1. FORMER RONDEBOSCH SCHOOLS ASSOCIATION:

Are you (or your spouse) an Old Boy of Rondebosch Boys' High? If yes, state year (E)

2. Are you (or your spouse) a registered member of the O.B.U? YES / NO

3. HOUSE CHOICE: (If Old Boy)..... (ANDREWS, FLETCHER, MARCHAND)
(Please complete 3 only should you wish to perpetuate a family tradition)

4. Any other relevant information:

DECLARATION AGREEMENT:

1. All of the above information is, to the best of my knowledge, true and correct.
2. On acceptance of my son as a pupil, I undertake to abide by the rules of the school as detailed in the School Prospectus.
3. In the event of my son being accepted as a pupil at R.B.P.S., I confirm that I will be prepared to sign a Tuition Agreement which will be legally binding.

FULL NAME (PRINT)

.....
FATHER

.....
MOTHER

.....
GUARDIAN

SIGNATURES:

.....
FATHER

.....
MOTHER

.....
GUARDIAN

.....
DATE

PLEASE NOTE: * Applicants from Grade 2 - 7 will undergo class placement interviews.

* Please attach all supporting documents where applicable.

* Please attach copy of Unabridged Birth Certificate.

* Copy of latest school report ONLY for Grade 2 - 7.

Furthermore, I consent by my signature to the application to RBPS conducting, at its discretion, an inquiry into my personal credit history with an authorised provider of such information.