



ENROLMENT FORM - 2019

PLEASE COMPLETE WITH A BLACK PEN

DO YOU HAVE ANY LEARNERS CURRENTLY/PREVIOUSLY IN THIS SCHOOL?

Yes No

Name of other learner(s) : _____

DATE: 24 OCT 2018

LEARNER INFORMATION

LEARNER

Full names: _____

Surname: _____

Preferred name: _____

Date of birth: _____

ID number: _____

Nationality: RSA Other: _____

Religious denomination: _____

Gender: Male Female

Ethnic group: _____

Home language: Afrikaans English Other: _____

Learner's language preference: Afrikaans English
 Other: _____

Learner mobile number: _____

Learner e-mail address: _____

Admission date: _____

Grade in 2019 : _____

Years in grade for 2019 : _____

Years in phase for 2019 : _____

Pre-primary education attended: Formal Informal
 Other: _____

Attach learner photo:

Photo

Method of transport: Private Taxi Bus

Taxi/Bus registration number: _____

Name of driver: _____

Contact number: _____

NEXT OF KIN INFORMATION

Name: _____

Contact number: _____

Alternative contact number: _____

Relation: _____

OFFICE USE ONLY

Family code: _____ Waiting list: A B

Register class: _____ Number on waiting list: _____

Admission number: _____ ID copy:

Application fee:

Proof of residence:

Birth certificate:

FAMILY INFORMATION

Family status: Both parents Single parent - Unmarried

Foster care Childrens home Single parent - Divorced

Other Re-composed Widow/Widower

Parents deceased: Mother Father None

LEARNER HEALTH INFORMATION

Chronic diseases: _____

Allergies: _____

Medication: _____

MEDICAL AID INFORMATION

Name: _____

Telephone number: _____

Member number: _____

Primary member: _____

FAMILY DOCTOR INFORMATION

Name: _____

Telephone number: _____

Business address: _____

INFORMATION OF PREVIOUS SCHOOL/PLAY GROUP/NURSERY

First registration of learner in Gauteng : Yes No

Learner attended school last year: Yes No

If yes, in which Province/Country: _____

Previous school: _____

Telephone Number: _____

Address: _____

Province: _____

Highest grade in previous school: _____

Reason for leaving the school: _____

BIOLOGICAL PARENT / LEGAL GUARDIAN 1 INFORMATION

Title: _____

Full names: _____

Surname: _____

Initials: _____

Preferred name: _____

ID number: _____

Home language: Afrikaans English Other: _____

Communication preference: SMS E-mail
 Mail By hand

Language preference: _____

Mobile number: _____

Home tel: _____

Fax: _____

E-mail: _____

Residential address: _____

Postal address: _____

Occupation status: Own Employer Non-Professional
 Own Employer Professional
 House wife Part time
 Contract worker Pensioner
 Student Temporary
 Full time Unemployed

Occupation: _____

Employer: _____

Work telephone number: _____

Employer physical address: _____

Is the learner living with this parent?: Yes No

BIOLOGICAL PARENT / LEGAL GUARDIAN 2 INFORMATION

Title: _____

Full names: _____

Surname: _____

Initials: _____

Preferred name: _____

ID number: _____

Home language: Afrikaans English Other: _____

Communication preference: SMS E-mail
 Mail By hand

Language preference: _____

Mobile number: _____

Home tel: _____

Fax: _____

E-mail: _____

Residential address: _____

Postal address: _____

Occupation status: Own Employer Non-Professional
 Own Employer Professional
 House wife Part time
 Contract worker Pensioner
 Student Temporary
 Full time Unemployed

Occupation: _____

Employer: _____

Work telephone number: _____

Employer physical address: _____

Is the learner living with this parent?: Yes No

DECLARATION BY PARENT / GUARDIAN

I, _____ (Name of Parent / Guardian), hereby declare that the information supplied in this form is true and just and that I, by way of my signature hereunder, authorise the Chairperson of the School Governing Body or his/her representative to control and confirm any of the details supplied. I am aware that should any information supplied be found not to be true, I may be liable to a criminal offence.

Signed at _____ on _____ day of _____ 2018.

Signature of Parent / Guardian: _____

ACCOUNTABLE PERSON'S INFORMATION Biological Parent 1 Biological Parent 2 Other

Only if 'Other', please complete section A or B below:

A) INDIVIDUAL

Title: _____

Full names: _____

Surname: _____

Initials: _____

Preferred name: _____

ID number: _____

Home language: Afrikaans English Other: _____Communication preference: SMS E-mail Mail By hand

Language preference: _____

Mobile number: _____

Telephone number: _____

Fax number: _____

E-mail: _____

Residential address: _____

Postal address: _____

Postal Code: _____

B) COMPANY / CLOSED CORPORATION / TRUST

Title: _____

Name: _____

Registration number: _____

Language preference: _____

Contact number: _____

Fax number: _____

Business address: _____

Postal address: _____

Postal Code: _____

CONTRACT WITH SCHOOL WITH REGARDS TO PAYMENT

Agreement between Junior Tech Preparatory School and _____ (Name of parent / guardian) with regards to the payment of school fees.

- a. Accept responsibility for the payment of fees for above child before or on the seventh (7th) day of each month:
- A Monthly
- B Cash
- C Internet transfer
- E Stop order
- b. I agree to inform the Principal in writing if I am unable to pay the fees. My child's admission will be secured for one (1) month.
- c. I understand that the school will take the necessary legal steps to recover any outstanding fees.
- d. I agree to give one (1) calendar month's notice should my child no longer attend school. In the last term, I undertake to give notice in October as November doesn't serve as a notice month.
- e. I declare that the forms have been completed correctly. I have read and understand the acceptance requirements and school rules.
- f. If you prefer to receive statements by e-mail, please indicate e-mail address
- g. I / We the parents / guardian of _____ undertake to honour the agreement as set out above.

Signature of Parent / Guardian: _____ Date: _____

PERMISSION / CONSENT TO TAKE PART IN ALL ORGANISED ACADEMIC, SPORT AND CULTURE ACTIVITIES

- I, parent / guardian of _____ hereby give permission that he / she may participate in all academic, sport and culture activities presented by the school in an organised manner. To participate in tests conducted by the school support team with the object of improvement in school work and to identify other problems.
- I grant permission that my child may be transported by a public bus company approved by the school management. If there is only a small group of learners that needs to be transported, parents / teachers with valid drivers licences may be asked to transport them.
- I accept that all reasonable precautions will be taken for the safety and wellbeing of my child and that I will be held responsible for the payment of the medical and / or hospital fees if enforced upon, in case of an injury which cannot be ascribed to the responsible personnel's coarse negligence.
- I hereby delegate my powers as parent / guardian to the Principal of the school or representative if medical or surgical treatment may be needed for my child. As far as I know, he / she is physically able to participate in any organised activities and he / she resides in good health.
- I confirm that all medical information supplied in the Learner Information section of this form is accurate and complete. This information may be used in case of an emergency.
- I undertake to inform the school if any of the above information may change.
- I undertake to support my child to obey the Code of Conduct and the disciplinary system of Junior Tech Preparatory School as included in the Policy of the school.
- I hereby confirm that the school is allowed to use imagery of my child in any publication, in any format.

Signature of Parent / Guardian: _____ Date: _____

INDEMNITY

I/We the parents of/I the guardian of _____ (name of learner) indemnify unconditionally and without restriction Junior Tech Preparatory School and/or the shareholders of Junior Tech Preparatory School or any person employed by Junior Tech Preparatory School or any person acting on behalf of Junior Tech Preparatory School against any losses, claims, injury or death that may be caused to the above learner by virtue of his or her use of any of the facilities provided by Junior Tech Preparatory School.

Signed at _____ on _____ day of _____ 2018.

Signature of Parent / Guardian: _____



Junior Tech Preparatory School

A PARTNERSHIP AGREEMENT

At JTPS, Staff, Parents and School Governing Body work together to develop successful learners who are safe, happy, and healthy, considerate, independent, confident and challenged.

We want our school to be a **centre of excellence** for learning- for children and adults and our wider community. We want to create a school where:

- Children are safe, happy and healthy
- Children make outstanding progress and are confident, independent, enthusiastic and determined learners
- Staff are inspirational practitioners, able and enthusiastic to learn from and develop others
- Everyone shows respect and consideration for other people

We want to grow through supporting and developing other schools and continuing to learn ourselves.

We want our school to be an environment which is **rich, exciting and fun**, that is underpinned by these important characteristics:

Learning:

- Creating and thinking critically: Problem solving – using and applying skills
- Confidence to take risks and to be independent
- Collaboration
- Responsibility, Resilience, Resourcefulness, Reflection, Reasoning (5Rs)
- Exploring, Playing
- Active learning
- Tolerance and respect for others, their ideas and opinions
- Enthusiasm for learning

Teaching:

- Tenacious- wanting the best for every child, every lesson, every day
- Engaging and Inspiring
- Analytical and reflective assessment: rigorous and influences every lesson
- Challenging- underpinned by high expectations
- High Quality Interaction- questioning and feedback which guides next steps, praises effort
- Excellent relationships underpinned by care and respect
- Rich Language and learning environment

Leadership:

- Consistent- underpinned by a clear, well communicated vision
- Rigorous- analytical, informed by high expectations and determination to achieve the best for every child
- Relevant-based on thorough knowledge of the school, its children, families and staff,
- Current research, social and political climate
- Exemplary- excellent role models to ensure consistency and clarity
- Aspirational
- Motivating

Professional Conduct:

- Reflective on own practice- proactive in seeking professional development
- Empathetic to others' needs, concerns, priorities
- Seek Solutions or Guidance
- Polite to children, staff, governors, visitors
- Enthusiastic "can do" approach and positive in the face of adversity and change!
- Communication which is clear, effective: good listening, maintaining confidentiality
- Teamwork- sharing planning, ideas, resources; flexible, approachable, sense of humour

School

We will:

- Provide a high-quality education in a safe and happy environment
- Provide information to parents on their child's progress through regular meetings and the school report
- Clearly communicate the school's expectations on behaviour
- Involve parents in any concerns or problems with their child
- Advise parents on how to support their child in home learning
- Ensure that parents are kept informed about school activities through regular newsletters and notices
- Actively encourage parental interest and involvement in school life

Parents

I/We will:

- See that my child goes to school regularly, on time and properly equipped.
- Attend meetings and discussions about my child's progress.
- Support the school's behaviour policy.
- Let the school know about any concerns or problems that might affect my child's work or behaviour.
- Support my child in homework and other opportunities for home

learning.

- Agree to read and act on information received.
- Attend all the school's activities and functions.

Childs Name

Class

Parent / Gaudian Name

Signature

Date

Principal

Signature

Date