



# WATERSTONE COLLEGE

## Application for Admission

### Important information:

- The full non-refundable Application Fee of R300 must accompany this Application Form.
- The application process consists of this application, which may be followed by a Placement Test, and by one or more interviews with representatives from the College.
- Based on various criteria, including, but not limited to, the Placement Test, the applicant may be offered a place at the College. The decision on whether a place is offered or not is solely at the discretion of the College, and no correspondence will be entered into.
- If the applicant is offered a place in the College, a non-refundable deposit of R3000 must be paid to the College to secure his or her place. This money will be deducted from the school fees in the learner's first year at the College.
- By completing this form, the applicant and his/her parents/guardian accept and agree to be bound by the Waterstone College Code of Conduct. In addition, the parents/guardian take(s) full responsibility for the payment of school fees.
- Please attach the following to this Application Form:
  - A copy of the latest school report.
  - A certified copy of the applicant's birth certificate.
- Current school to submit a confidential academic and conduct report (page 5).

### PLEASE COMPLETE THIS FORM IN BLOCK CAPITALS

How did you hear about Waterstone College? \_\_\_\_\_

Applying for Grade \_\_\_\_\_ in 2 \_\_\_\_\_

### SECTION 1

#### LEARNER INFORMATION (as reflected on ID or Birth Certificate)

Surname: \_\_\_\_\_

First names in full: \_\_\_\_\_

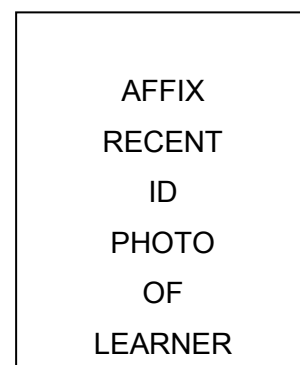
Preferred name: \_\_\_\_\_

Date of birth (d/m/y): \_\_\_\_\_

ID number: \_\_\_\_\_

Country of birth: \_\_\_\_\_

Citizenship: \_\_\_\_\_



If not born in SA, date of entry into SA: \_\_\_\_\_ (Proof of entry into SA and a work/study permit to be attached for both learner and parents)

Religious denomination: \_\_\_\_\_

Learner's cell phone number (if available): \_\_\_\_\_

Name, address, telephone and fax number of present school:

\_\_\_\_\_

Tel (\_\_\_\_) \_\_\_\_\_ Fax (\_\_\_\_) \_\_\_\_\_

Present grade: \_\_\_\_\_

Language of instruction at present school: \_\_\_\_\_

Language/s spoken at home: \_\_\_\_\_

Name of brothers/sisters who are currently at or applying to attend Waterstone College:

Name: \_\_\_\_\_ Current Grade: \_\_\_\_ Current School: \_\_\_\_\_

Name: \_\_\_\_\_ Current Grade: \_\_\_\_ Current School: \_\_\_\_\_

Name: \_\_\_\_\_ Current Grade: \_\_\_\_ Current School: \_\_\_\_\_

## SECTION 2

### FAMILY INFORMATION

	*FATHER / *GUARDIAN (If guardian, state relationship with learner) *delete where not applicable	*MOTHER / *GUARDIAN (If guardian, state relationship with learner) *delete where not applicable
Title		
Surname		
First Names		
Identity Number/ Passport Number		
Occupation		
Name of Employer/ Company		
Position in Company		
Street Address of Business		
Business Tel. No.		
Residential Address	Code:	Code:
Fax Number		
Postal Address	Code:	Code:
Home Tel. No.		
Cell. Number		
E-mail Address		

Learner is living with: both parents / father / mother / guardian **(circle that which is applicable)**

Physical address where learner is living: \_\_\_\_\_

\_\_\_\_\_ Code: \_\_\_\_\_

Marital status (parents): married / widow / widower / divorced / judicially separated / single parent  
**(circle that which is applicable)**

Number of children in family (including the applicant):

<i>Name and Surname</i>	<i>Age</i>	<i>Male/Female</i>	<i>Current School</i>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Race of learner (as requested by the Gauteng Department of Education): \_\_\_\_\_

Contact details of person/s to contact in case of an **emergency**

Name: \_\_\_\_\_ Tel H(\_\_\_\_) \_\_\_\_\_ W(\_\_\_\_) \_\_\_\_\_

Cell: \_\_\_\_\_

Name: \_\_\_\_\_ Tel H(\_\_\_\_) \_\_\_\_\_ W(\_\_\_\_) \_\_\_\_\_

Cell: \_\_\_\_\_

### **SECTION 3**

#### **OTHER LEARNER INFORMATION**

##### **School Activities:**

Current sporting and cultural activities participated in at school and out of school, and highest level/ team represented:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

##### **Therapies and Assessments:**

Has the learner had any of the following over the past two years?

- Occupational Therapy Yes No
- Speech and Audiology Assessment Yes No
- Assessment by a psychologist Yes No

Where applicable, please include a copy of the assessment/s with this application.

## SECTION 4

### MEDICAL INFORMATION

Medical Aid Name \_\_\_\_\_ Medical Aid Number \_\_\_\_\_

Name of Principal Member \_\_\_\_\_

ID no. of Member \_\_\_\_\_

Doctor's Name \_\_\_\_\_ Doctor's telephone number \_\_\_\_\_

Medical problems (e.g. asthma, allergies, diabetes, etc.) \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

## SECTION 5

### FINANCIAL OBLIGATIONS

School Fees, Admission Deposit and the Development Bond/ Levy are payable as indicated in the annually adjusted fee schedule, and thereafter for each year of tuition at Waterstone College. Should a learner leave the school, one full term's notice is required, or else that term's fees will still be charged in full.

Person responsible for payment of fees: \_\_\_\_\_

ID Number: \_\_\_\_\_

Postal Address \_\_\_\_\_ Code: \_\_\_\_\_

**SIGNATURE: (of person responsible for fee payment)** \_\_\_\_\_

## SECTION 6

### DECLARATION

As parent/guardian and learner, we undertake to support the College fully and abide by its rules and regulations as contained in this application form, the College Policies Book, Code of Conduct and any others as laid down by the Principal and the College Council.

We declare the information furnished by us on this form to be true and correct.

Signature Father/Guardian: \_\_\_\_\_ Date: \_\_\_\_\_

Signature Mother/Guardian: \_\_\_\_\_ Date: \_\_\_\_\_

Signature of Learner: \_\_\_\_\_ Date: \_\_\_\_\_  
(College Only)

WATERSTONE COLLEGE  
PO Box 990350  
Kibler Park  
2053  
Fax: (011) 943-4066

**CONFIDENTIAL**  
To be returned **directly**  
to Waterstone College  
after completion by  
present school  
Principal/ Grade Tutor



1. **Name of Learner** \_\_\_\_\_ **Present Grade** \_\_\_\_\_  
**Present School** \_\_\_\_\_ **Date of Birth** \_\_\_\_\_  
Number of years at present school \_\_\_\_\_

2. **Academic;**

Learning Area: Gr 1-3	
Literacy English	
Numeracy	
Life Skills	

Subject: Gr 4-11	
English	%
Afrikaans	%
Mathematics	%

1 = Not achieved      2 = Partially achieved  
3 = Achieved          4 = Outstanding

3. **Sports:** Comment on ability, participation, sportsmanship, team membership.  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

4. **Cultural and Creative Activities: music, dance, drama etc** Comment on participation in clubs and societies. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

5. **Character and Leadership Potential:**  
\_\_\_\_\_  
\_\_\_\_\_

6. **Any known problems:** (e.g. Family, Emotional, Remedial, Medical, Behavioural, Ability to adapt, etc.)  
\_\_\_\_\_  
\_\_\_\_\_

7. **School Fees:** Paid in full/ Not paid/ Monthly payments paid to date (Please circle appropriate comment)

8. **Parental Involvement at present school (please specify):** \_\_\_\_\_  
\_\_\_\_\_

9. If we accept this learner, is there any relevant information you would like drawn to our attention? If so, please specify: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Principal/Grade Tutor's signature: \_\_\_\_\_  
Date: \_\_\_\_\_

PLACE PRESENT  
SCHOOL STAMP HERE