

APPLICATION FOR ADMISSION TO SCHOOL**SEOTLONG AGRICULTURE AND HOTEL SCHOOL**

WELTEVREDE FARM

Telephone: 058 - 7130182

WITSIESHOEK

Fax:

9870

Year: _____



Note: This form must be completed in full. All changes to be initialed or signed by parent / guardian. Completing the form does not necessarily mean that the learner has been accepted into the school.

Grade Applied For:	Highest Grade Passed:	Year When Grade was passed:	Accession No:
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Surname:	Initials:	Nick Name:
First Name:	Other Names:	
Date Of Birth: YYYY	MM	DD
Race:	Gender:	Male: Female:
Country of Residence:	Identification or Passport No:	
If SA, indicate province of residence:	Citizenship:	

Physical Address:	Home Telephone:			
City/Suburb	Emergency Telephone:			
Code:	Learner Cell:			
Learner Email Address:				
Home Language:	Preferred Language of Instruction			
Boarder	Yes	No		
Deceased Parent	Mother	Father	Both	Mode of transport:
Religion:	For Grade 1 only: Indicate pre-primary education	None	Non Formal	Formal

Previous School Information

Name of Previous School:		
Previous School Address:		
Code:	Province:	Country:

Learner Medical Information

Medical Aid Number:	Medical Aid Name:					
Medical Aid Main Member:	Doctor Name:					
Doctor's Address:	Doctor Telephone Number:					
Medical Condition:						
Special Problems Requiring Counseling:						
Dexterity of Learner:	Right Handed	Left Handed	Ambidextrous	Reg. Social Grant	YES	NO
				Rec. Social Grant	YES	NO

If the learner is accepted, the following documents must be submitted to the school:

1. Copy of Immunisation Records.
2. Copy of Birth Certificate
3. Progress Report from Previous School
4. Transfer Letter from Previous School

Siblings	
Number of other Children at this school: <input type="text"/>	Position in the family (e.g first): <input type="text"/>
Please supply full names below:	
Name: <input type="text"/>	Grade: <input type="text"/>
Name: <input type="text"/>	Grade: <input type="text"/>
Name: <input type="text"/>	Grade: <input type="text"/>

Parent / Guardian Information		Complete a SEPARATE parent form for each parent living at a different physical address	
Title: <input type="text"/>	Initials: <input type="text"/>	Surname: <input type="text"/>	
First Name: <input type="text"/>	Gender: <input type="text"/>	Male: <input type="text"/>	Female: <input type="text"/>
Home Language: <input type="text"/>	Race: <input type="text"/>		
Identification Number: <input type="text"/>	Or Passport number	Account Payer: <input type="text"/>	Yes <input type="text"/>
Residential Street Address: <input type="text"/>		Code: <input type="text"/>	
Occupation: <input type="text"/>	Employer: <input type="text"/>		
Surname of Spouse: <input type="text"/>	First Name: <input type="text"/>		
Occupation of Spouse: <input type="text"/>	Learner resides with this parent/s	Yes <input type="text"/>	No <input type="text"/>
Spouse ID Number: <input type="text"/>	Relationship to Learner: <input type="text"/>		
Marital status of parent: <input type="text"/>			

Correspondence Details	
Title: <input type="text"/>	Surname: <input type="text"/>
Postal Address: <input type="text"/>	
City/Suburb: <input type="text"/>	Code: <input type="text"/>

Other Contact Details	
Home Telephone: <input type="text"/>	Work Telephone: <input type="text"/>
Fax Number: <input type="text"/>	Cell Number: <input type="text"/>
Spouse Work Telephone Number: <input type="text"/>	Spouse Cell Number: <input type="text"/>
E-Mail Address: <input type="text"/>	Spouse E-Mail Address: <input type="text"/>

I hereby declare that to the best of my knowledge, the above information as supplied is accurate and correct.

Name of Parent / Guardian (Please Print) : _____

Signature of Parent / Guardian _____

Date: -----/-----/-----

Office use only:			
1. Date:	2. Accepted:	3. Accession Number:	
4. Rejected:	5. Reason for Rejection:		
6. Documentation Received:	6a Immunisation Record:	6b. Birth Certificate:	
6c. Progress Report from Previous School:		6d. Transfer Letter from Previous School:	

SEOTLONG

Landbou & Hotelskool



📍 Privaatsak/Private Bag X866
WITSIESHOEK 9870
📞 (058) 713 0182
✉ admin@seotlongagrischool.com

ADMISSION, POLICY AND SCHOOL RULES

Learner Name & Surname: _____

Parent/ Guardian Surname & Name: _____

Parent/ Guardian Cell: _____

_____ (Work Tel)

Date form taken: ____/____/2022

Date form returned: ____/____/2022

Closing Date: 31 August 2022

Form MUST be submitted by parent or guardian.

1. ID copies of parents are **COMPULSORY**.
2. If not the parent of the learner please attach legal documents or affidavit from the SAPS.
3. ID or Birth Certificate of learner (Certified).
4. Proof of residence.
5. Learner June report (Term 1 & 2)
6. R250 indemnity fee payable on registration.
7. **ONLY** or **STRICTLY** learners of school going age will be **ADMITTED**.
8. We only admit learners who are going to study Grade 8, 9 and 10
9. Incomplete forms will not be considered.

SCHOOL UNIFORM

Monday, Tuesday, Wednesday and Friday

- Green trouser, white shirt (boys and girls).
- Green skirt, white shirt (girls).
- It is compulsory that girls wear in Term 1 & 4 (No trousers).
- Black belt only.
- School tie with logo.
- School green jersey with logo.
- Green blazer with logo.
- White socks for girls, grey socks for boys.
- Black school shoes no takkies.
- No other colour is allowed, if found it will be confiscated and will not be returned.
- No hats of any colour are allowed.

Thursday

- Green school t-shirt, no hostel t-shirt allowed
- School tracksuit
- Takkies

GIRLS

Hair: To be off the face. Neat and clean all the time.

Neck length must be tied up. No fancy hair plating will be allowed.

No spiky hair styles. Hair should look natural, no highlights and lowlights.

No dreadlocks.

Jewellery: Small earrings. No visible body piercing, no bracelets, rings or necklaces allowed.

Only a watch maybe worn

Make- up: No make- up may be worn

Nail polish: no nail polish may be worn.

BOYS

Hair: Hair must be shaved off (bald head).

Jewellery: No earrings, bracelets, rings or necklaces allowed. Only watch may be worn

No visible piercing is allowed.

Boys may not wear make - up.

Parent signature: _____

Date: _____

Learner signature: _____

Date: _____

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SCHOOL HOURS

Monday: 07:00 – 15:00

Tuesday: 07:00 – 14:40

Wednesday: 07:00 – 15:00

Thursday: 07:00 – 14:40

Friday: 07:00 – 13:25

Late coming is **STRONGLY** condemned and **WILL NOT BE TOLERATED AT ALL.**

Learners must be seated in their respective classroom by 07:30.

Learners will be subjected to afternoon classes from 15:30 – 16:30.

All **Grade 8 and 9** learners receive compulsory instruction in the following learning area or subjects.

1. Creative Arts
2. Economics and Management Sciences
3. English First Additional Language
4. Life Orientation
5. Mathematics
6. Natural Sciences
7. Sesotho Home Language
8. Agricultural Sciences
9. Hospitality

Grade 10

STREAM A	STREAM B
1. Sesotho Home Language	1. Sesotho Home Language
2. English First Additional Language	2. English First Additional Language
3. Life Orientation	3. Life Orientation
4. Mathematics	4. Mathematics
5. Agricultural Management Practices/ Physical Sciences	5. Computer Applications Technology/ Economics
6. Agricultural Science	6. Tourism
7. Agricultural Technology	7. Hospitality

Grade 10 (Stream A and B)

Computer Applications Technology, Learners will be subjected to a selection test if the number exceeds the expectation.

Please choose either Stream A or B

Also choose AMP and Physical Sciences in stream A

Choose also CAT and Economics in Steam B

Parent signature: _____

Date: _____

Learner signature: _____

Date: _____