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|  | **Jahari Christian Academy** |
|  | *Young, strong and powerful* |
| **2020** | **SCHOOL APPLICATION FORM** |
|  | **Proverbs 14:26,27**  *“He who fears the Lord has a secure fortress, and for his children it will be a refuge. The fear of the Lord is a fountain of life, turning a man from the snares of death”.*  The beginning of all godly education is … the FEAR OF THE LORD.  Address: 12 Eighth Rd, Rynfield Agricultural Holdings, Benoni, 1513 /P O Box 11518, Rynfield, 1514  Email: [jahari.school@gmail.com](mailto:jahari.school@gmail.com)  Office: +27119696570 Corrie Vermaak +27842401899 Madeleine Vermaak +27842641286  *FNB Branch 250112 Account number 62301898401*  *NPO 085-202 GDE EMIS 400413 PBO 930041299*  *Board members: Themistoklis Candiotes (Principal - retired); Andries Cornelius Vermaak (Principal); Lukas Bosch* |

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| **Jahari Christian Academy** | **Jahari Christian Academy**    ***Young, strong and powerful*** |

SCHOOL APPLICATION FORM

**SCHOOL APPLICATION FORM**

Date of Application: …………………………………

# **Pupil’s particulars**

|  |  |
| --- | --- |
| Surname: ……………………………………… | First Name: ……………………..……………… |
| Date of Birth: …………………………………. | Religion: …………………….………………….. |
| Country of Birth: ……………………………… | Identity Number: …….…………………………. |
| Home Language: ……………………………… | Nationality: ……………………………………. |
| Residential Address: ……………………………………………………………………………………… | |
| …………………………………………………………………………………………………………….. | |
| ……………………………………………….…………………………………………………………….. | |
| Postal Address: ……………………..…………… | Code: ……….…………………..…………….. |
| …………………………………………………… |  |
| Name of Current School: …………………………………………………………………………………. | |
| Tel Nr of School: ………………………………… | Current grade: …………………………………. |
| Grade applying for: …………………………….. | Year: …………………………………………… |
| How did you hear about us?  Friends /relatives | Website Advert Other |

# **SIBLINGS**

|  |  |
| --- | --- |
| Do you currently have siblings attending Jahari Christian Academy? Yes No | |
| Sibling Name: ……………………………….. | Grade: …………………………………………. |

# **MEDICAL DETAILS**

|  |  |
| --- | --- |
| Please state any medical problems you child has that we need to be aware of:  …………………………………………………………………………………………………………. | |
| Doctor’s Name: ………………………………….. | Tel. Number: ………………………………… |

# **4. PARENTS PARTICULARS***Parent responsible for school fees:*

|  |  |  |  |
| --- | --- | --- | --- |
| Title: …… | First Name: ……………………………………………………………………….….…………….. | | |
| Surname: …………………………………………………………………………………………..………..………. | | | |
| Identity Number: ………………………………………………………………………………….………..………. | | | |
| Home address (domicilium citandi et executandi): | | | Postal Code: …….…………….………. |
| …………………………………………………………………………………………….……….………………... | | | |
| ………………………………………………………………………………………….………….………………... | | | |
| Home Tel. Number: | | …………………………………….……. | Fax: …………………………………… |
| Cell Number: | | …………………………………………. | …………………………………………. |
| Postal Address: | | …………………………………………. | Postal Code: …………….…………….. |
|  | | ………………………………………… |  |
| Email Address: | | …………………………………………………………………..……………………… | |
| Company Name: | | …………………………………………………………….…………….……………… | |
| Occupation: | | ……………………….………………………………………………………………… | |
| Business Tel. Number: | | ………………………..………………………………………………………………… | |
| Business Postal Address: ….……………………..……………………………………………….……………… | | | |

# **other PARENT**

|  |  |  |  |
| --- | --- | --- | --- |
| Title: …… | First Name: ……………………………………………….……………………………….……….. | | |
| Surname: ………………………………………………………………………..………………………..…………. | | | |
| Identity Number: ……………………………………………………………..………………………..……………. | | | |
| Home address (domicilium citandi et executandi): | | | Postal Code: …….……….……………. |
| ……………………………………………………………………….………………………….…….……………... | | | |
| …………………………………………………………………………….……………………….………………... | | | |
| Home Tel. Number: | | ………………………………….………. | Cell Number ..………….……………… |
| Postal Address: | | …………………………….……………. | Postal Code: ………….……………….. |
|  | | …………………………….…………… |  |
| Email Address: | | ……………………………………………………………………………………..…… | |
| Company Name: | | …………………………………………………………………….………….………… | |
| Company Name: | | ……………………………………………… Occupation: ……………….…………… | |
| Business Tel. Number: | | …………………………… Business Postal Address…………………...……………… | |

***To be completed if school account will be paid by someone other than father or mother:***

|  |  |  |  |
| --- | --- | --- | --- |
| Title: …… | First Name: ………………………..………………………….…………………………………….. | | |
| Surname: ………………………………………………….………………………..….……………………………. | | | |
| Identity Number: …………………………………………..……………………..…………………………………. | | | |
| Home address (domicilium citandi et executandi): | | | Postal Code: …….……………….……. |
| ………………………………………………………………………………………………………………..……... | | | |
| …………………………………………………………………………….……………………………….………... | | | |
| Home Tel. Number: | | ………………………………….………. | Cell Number ..……………….………… |
| Postal Address: | | …………………………….……………. | Postal Code: ……….………………….. |
|  | | …………………………….…………… |  |
| Email Address: | | ……………………………………………………………………………………..…… | |
| Company Name: | | ……………………………………………… Occupation: ……………….…………… | |
| Business Tel. Number: | | …………………………… Business Postal Address………………………..………… | |

***To be completed if school account will be paid by a sponsoring company:***

|  |  |
| --- | --- |
| Company Name: ………………………………………………………………..…………………………………. | |
| For the attention of: …………………………………………………………..……………………………………. | |
| Postal address (domicilium citandi et executandi): | Postal Code: ……………….…………. |
| ……………………………………………………………… Tel. Number: …………………………….. | |
| ………………………………………………………………………………………….…………………………… | |

***Please notify the school immediately of any changes in address or contact details***

# **next of kin of applicant (other than immediate famly)**

|  |  |  |
| --- | --- | --- |
| First Name: ……………………………………………Surname: …….….………………………………….. | | |
| Tel. Number: | ………………………………….………. | Cell Number ..……………………… |
| First Name: ……………………………………………Surname: …….….………………………………….. | | |
| Tel. Number: | ………………………………….………. | Cell Number .……………………… |

# **documents required**

* Certified copy of birth certificate
* Copy of latest school report
* Immunisation card (Grade 00-7)
* Copy of both parents / guardians’ identity documents
* Transfer card from current school
* Current month school fee statement from current school

# **TO BE COMPLETED BY APPLICANT’S PARENTS OR LEGAL GUARDIAN**

8.1 I agree that the applicant will be bound by the School’s Code of Conduct.

8.2 A non-refundable application fee of R200 will be payable within 14 calendar days of acceptance.

8.3 The non-refundable application fee may be amended from time to time.

8.4 I understand that should I withdraw my child from Jahari Christian Academy one term’s notice, or four calendar months’ notice must be given in writing. Failure to give notice will result in aforesaid fees being payable to the school.

8.5 The person responsible for the payment of school fees will be bound by the school’s Fee Structure which is enclosed.

8.6 Should I fail to comply with the Fee Structure, I agree to the jurisdiction of the Magistrate’s Court and I will be responsible for the school’s legal costs for the recovery of the outstanding school fees on an attorney and own client scale, including tracing costs where applicable.

8.7 I agree and consent that Jahari Christian Academy may conduct a full credit check with the Credit Bureau.

8.8 Kindly submit all required documentation for the application to be processed.

8.9 I understand that I will be liable for the settlement of the annually renewable SwitchedOn licence fee if I decide to remove my child before the end of the year.

Date: ………………………………………….

**PARENT/LEGAL GUARDIAN 1**

Parent/Legal Guardian First Name: …………………………… Surname: ………………………………

**Signature: ………………………………………………………………………………………………….**

**PARENT/LEGAL GUARDIAN 2**

Parent/Legal Guardian First Name: …………………………… Surname: ………………………………

**Signature: ………………………………………………………………………………………………….**

**If applicable, details of person or company responsible for fees:**

First Name: ………………………..…… Surname: ………………………… Designation: ………………

**Signature: ……………………………… Company Name: .…………………………………………….**

Company stamp:

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| **Jahari Christian Academy** | **Jahari Christian Academy**    ***Young, strong and powerful*** |

# SCHOOL APPLICATION FORM

**ADMISSIONS POLICY**

Jahari Christian Academy is an independent English medium school situated at Nr 12 Eighth Road, Rynfield Agricultural Holdings in Benoni. We have a full combined school, with a dedicated staff serving the needs of its learners from Grade 1 through Grade 12. Jahari Christian Academy was registered with the Gauteng Education Department in 2010 as EMIS 700400413 and with the Department of Social Development as a non-profit organisation.

Our reason for being is to provide a holistic approach to the education of children—imparting spiritual values which serve as a foundation; providing an environment which promotes emotional wellbeing; stimulating and developing the child’s physical interests and talents; and sharpening the life skills necessary for every child to become a mature, productive member of society. There is no discrimination on any basis, even religious persuasion. In fact, the school is absolutely non-elitist, striving to make a quality private education available to any child.

We follow the School of Tomorrow Accelerated Christian Education Curriculum (A.C.E). in the Foundation Phase. This trend setting educational model is revolutionary in that the focus is not on a teacher lecturing a large group of learners, but rather on the individual needs and abilities of each child. From Grade 3 to Grade 12 we offer the fully digital SwitchedOn Education curriculum. This is a world class quality curriculum that culminates in the American High School diploma when students graduate in Grade 12. This certificate is recognised in South Africa as a foreign equivalent to the South African National Senior Certificate (NQF4). It is accepted and accredited worldwide by higher education institutions and employers.

**Admission Process**

Parents complete the application form and return it to the school with all the supporting documents listed, together with the registration fee (which is payable within 14 days from submission of application form. If a birth certificate is not available, a Learner may only be accepted conditionally until a copy of the birth certificate is obtained from the regional office of the Department of Home Affairs. It is an offence to make a false statement about the age of a child (Births and Deaths Registration Act, 1992, No 51, of 1992). The parent must ensure that the admission of the learner is finalised within three months of conditional admission. If the parent is unable to show proof of immunization against the following communicable diseases: polio, measles, tuberculosis, diphtheria, tetanus and hepatitis B., the parent must have the learner immunised as part of the free primary health care programme.

The principal reviews the submitted application in conjunction with the School Management Board. The secretary will arrange a subsequent interview between parents and principal. Please note the following procedures:

* Grade 1: A reading readiness test is conducted in November of the previous year to intake, to diagnose the child’s school readiness.

When a learner transfers from one school to another, the principal completes a transfer card and hands it to the parent, or forwards it to the principal of the receiving school. The learner’s transfer card must be attached to the application form for admission to the receiving school. If the transfer card is not available the principal of the receiving school may admit the learner and place the learner in a grade on the basis of the available information.

**Admission of non-citizens:**

The South African Schools Act, 1996 and this policy apply equally to learners who are not citizens of South Africa and whose Parents are in possession of a permit for temporary or permanent residence issued by the Department of Home Affairs. Persons classified as aliens must, when they apply for admission for their children or for themselves, show evidence that they have applied to the Department of Home Affairs to legalise their stay in the country in Terms of the Aliens Control Act, 1991 (No. 96 of 1991).

For a child to be admitted to Jahari Christian Academy, both parents must attend Parent Orientation. Our ACE and digital approach to learning is very different to that used at other schools, and it is therefore necessary for parents to attend an orientation meeting to equip and inform them in the education of their child.

Re-enrolment forms are distributed at the end of the 3rd term each year for re-enrolling for the following year. Re-enrolment of learners depends upon attendance at Parent Orientation, behaviour of learner, and payment of school fees.

Andries Cornelius Vermaak

Principal

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SCHOOL APPLICATION FORM

**DECLARATION**

# **TO BE READ AND SIGNED BY PARENTS OR LEGAL GUARDIAN**

* I declare that all information given is true.
* I declare that all concerned will honour the Code of Conduct of Jahari Christian Academy and will abide by the disciplinary procedure as applied at Jahari Christian Academy.
* I hereby indemnify the school’s Governing Body and School Management for any expenses / losses/ injuries incurred by me or my child/ward while being a learner at of Jahari Christian Academy. I am aware that the school complies to being searched regularly by the local SAPS for illegal substances.
* An application fee of R200.00 must accompany each new application. A registration fee of R 600.00 will be payable on acceptance.
* I/We are aware of the school fee obligation and that the obligation to pay school fees rests with me/us.
* I/We declare that I/we are financially able to fulfil the school fee obligation, and will comply with the procedures of the school in the payment of the said school fees.
* I understand that all monies owing to this school (as determined by the Board) will be paid monthly in advance by the 3rd of the month. The Academy will charge a late payment penalty fee of R100.00; unless a prior arrangement in writing has been made. Continual overdue accounts will result in a review of the student’s continuation of enrolment at the Academy.
* I further declare that all Guardians/Parents are aware of and endorse this application. I also give permission that legal or other collection action is taken for non-payment, and understand that I will be held responsible for any/all costs involved with such action. I agree that my credit record may be verified.
* I/We acknowledge that the school fees will be increased annually.
* I am aware that one (1) months’ notice is due should I wish to transfer my child to another school (a full month’s fee will be charged if notice is not given).

This done and signed at \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ this \_\_\_\_\_\_\_ day of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ 201\_\_

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

FATHER / GUARDIAN MOTHER / GUARDIAN

**Person or company responsible for fees:**

First Name: ………………………..…… Surname: ………………………… Designation: ………………

**Signature: ……………………………… Company Name: .…………………………………………….**

Company stamp: