



BERGVLIET HIGH SCHOOL

APPLICATION FORM GRADE 8

Firgrove Way, Bergvliet 7806

Tel +27(0)21 712-0284

Fax +27 (0)21 715-0631

e-mail admissions@bhs.org.za Website www.bhs.org.za

SURNAME	Please Attach Passport Size Photo Here	Name of Learner			
		Grade	8		
		Date admission required	DD / MM / YYYY	Term	1 / 2 / 3 / 4

Please note that a separate subject specific application form is required should your child wish to take Specialist Art, Drama, Dance OR Music.

Application Information and Requirements & Checklist

- PLEASE PRINT in CAPITALS and complete ALL sections. The supplying of false information will invalidate this application.
- ONLY E-MAILED APPLICATIONS WILL BE ACCEPTED. To : info@bhs.org.za or admissions@bhs.org.za
- Please supply a physical address as well as a postal address that is in daily use if applicable.
- A certified copy (or original) of your Municipal (Rates) account not older than 3 months or your, and/or the person who is responsible for the payment of the school fees, current Lease Agreement. (We do not accept any personal accounts or bank statements as proof of address.
- Copy of Parents'/Legal Guardians'/Person responsible for payment of school fees ID.
- Copy of Learner's ID/Current Passport or Birth Certificate. An unabridged Birth Certificate is required in the case of divorce and / or a natural parent no longer accepting responsibility for the child applying to the school.
- ID Photograph of child (passport size) – please attach in space provided.
- Copy of child's Study Permit (where applicable).
- Certified copies of the December Grade 6 report.
- A certified copy of Term 1 Grade 7 report must be handed in at the interview OR handed in as soon as it is available from your child's current school. We will also require a certified copy of the June/July report when available.
- Confidential Report – this is required to be completed by your child's current school Principal, Grade Head or designated with official school stamp, either faxed to us on (021) 715 0631 or emailed to above address or returned with the application in a sealed envelope.

For clarity, please note: Applications will not be processed without provision of all of the requested documentation.

CLOSING DATE FOR 2021 APPLICATIONS: FRIDAY, 26 MARCH 2021 AT 14H00

FOR OFFICE USE ONLY		RECEIPT NO:	APPLY ONLINE: https://admissions.westerncape.gov.za		
		DATE RECEIVED	Was the application registered by WCED	YES	NO
REQUIRED DOCUMENTS					
	Learner's I.D./Birth Certificate		Specialised Art	YES	NO
	Copies of Parents'/Guardians' ID		Specialised Dance	YES	NO
CERTIFIED	Learner's Latest Report		Specialised Music	YES	NO
	Municipal Account / Lease (As proof of Residence)		Specialised Drama	YES	NO
			Confidentiality report		

DETAILS OF LEARNER					
SURNAME				Initials	
First Names					
Birth Date				Age	
Identity Number		Gender		Male	Female
Home Language		Nationality			
ADDRESS AND CONTACT DETAILS OF LEARNER					
Physical Address					
				Postal Code	
Home Phone No					
OTHER PERSONAL DETAILS OF LEARNER					
Name of Current School				Unique CEMIS No <small>(from your Primary School)</small>	
Full postal address of current School					
Telephone No				Fax No	
Has learner repeated any previous Grade(s)?				YES	NO
If, YES , state which Grade(s)					
Number of children in family				Is learner the 1 st , 2 nd , 3 rd , etc., in family?	
Siblings attending BHS		Name		Grade	House
		Name		Grade	House
		Name		Grade	House
Has any of your family attended Bergvliet High School before? (Father/Mother/ Uncle/ Aunt etc.)? If so, please state their names, year of leaving and relationship (past learners).					
Have you applied to Bergvliet High School before?				YES	NO
Please list the activities in which you're the learner is currently involved and any noteworthy achievements <i>(You may wish to expand on the information below and attach relevant documentation)</i>					
Cultural Activities					
Sporting Activities					
Leadership Positions					
Please indicate any appropriate information in the following areas					
Physical Disabilities					
Learning Disabilities					
Social Disabilities					
Medical conditions which require special consideration					

DETAILS OF FATHER / GUARDIAN										
SURNAME						Title				
First Names										
Identity No						e-mail				
Physical Address										
						Postal Code				
Postal Address										
						Postal Code				
Home Phone No					Cell No					
Business Number					Fax No					
Name of Employer										
Occupation										
Marital Status	Married		Single/Separated Widowed		Divorced		Re-married			
Relationship to Learner	Father		Stepfather		Legal Guardian		Other <i>Specify</i>			
If re-married, give stepmother's first names						Cell no				

DETAILS OF MOTHER / GUARDIAN										
SURNAME						Title				
First Names										
Identity No						e-mail				
Physical Address										
						Postal Code				
Postal Address										
						Postal Code				
Home Phone No					Cell No					
Business Number					Fax No					
Name of Employer										
Occupation										
Marital status	Married		Single/Separated/ Widowed		Divorced		Re-married			
Relationship to learner	Mother		Stepmother		Legal Guardian		Other <i>Specify</i>			
If re-married, give stepfather's first names						Cell no				

SCHOOL FEES – Please complete <u>all</u> sections										
Who will be responsible for the school fees?	FATHER				MOTHER				OTHER Please state below and give details overleaf	
Method of Payment	Cash Annually or Monthly				Debit order				EFT	
Do you receive a welfare grant/foster subsidy Please attach all supporting documents.			YES	NO	Do you intend to apply for an exemption / partial exemption in school fees? (For school budgeting purposes) Please CIRCLE the appropriate response.				YES	NO
MORE DETAILED INFORMATION ON SCHOOL FEE PAYMENTS WILL BE REQUIRED ON ACCEPTANCE										

DETAILS OF PAYER (to be completed if not the Father / Mother as indicated above)								
SURNAME						Title		
First Names								
Identity No					e-mail			
Relationship to learner	Grandparent		Uncle/Aunt		Sponsor		Other Specify	
Physical Address								
					Postal Code			
Postal Address								
Home Phone No					Cell No			
Business No					Fax No			
Name of Employer								
Occupation								

ADMISSION ACCEPTANCE

- Completion of this application is not a guarantee that the learner will be accepted at Bergvliet High School.
- You will be informed of the school's decision once all applications have been processed.
- A textbook and subject resources levy will be payable on your acceptance.

DECLARATION BY PARENT/GUARDIAN

- I declare that all particulars furnished by me on this form are true and correct.
- I am fully aware of the admission requirements of the Bergvliet High School as contained herein. If a learner is accepted, **both natural parents** – unless the school has agreed otherwise – will be required to sign a commitment in which they, jointly and severally, accept responsibility for the timeous and full payment of school fees and for other contractual obligations, including support for school rules and an undertaking to make good any damage to school property caused by the learner. Should only one parent sign that form, with the prior consent of the school, then that parent shall accept sole responsibility for the contractual obligations.

Signed at this day of 20YY

FATHER/GUARDIAN

Signed at this day of 20YY

MOTHER/GUARDIAN