



2025
WCED TRANSFER REQUEST FORM
BETWEEN TWO ORDINARY PUBLIC SCHOOLS
(GRs.2-7 & Gr.9-12)

WESTERN CAPE EDUCATION DEPARTMENT (WCED) TRANSFERS 2025

The information on this form will be captured on the WCED online admissions system to assist the parent.

Primary Parent / Legal Guardian Information

Parent / Legal Guardian type (Please tick)		Biological	Adoptive	Legal Guardian	Step	Other				
Title: (Please tick)		Mr.	Miss	Mrs.	Ms	Prof.	Dr	Rev	Hon	Adv
First Name		Second Name		Surname						
Date of birth			Gender	Male	Female					
SA Citizen	YES	NO	ID number /Passport Number / Permit							
Marital status: (Please tick)		Divorced	Married	Separated	Single	Widowed				

IMPORTANT!!! Please Complete

Contact Information

Cell phone No.	Emergency Contact No.
Tel. No. (work)	Alternative Contact No.
Alternative Name and Surname	Alternative: Relationship
Email address	

Physical Address

Western Cape Address	YES	NO			
Address type: (Please tick)	Street / Road	Flat	Farm	Plot	Other
Address No / House / Street Number	Address / Street Name				
Building / Complex / Block / Apartment name					
Country	Province				
Town	Suburb				

Work Address (Optional)

Western Cape Address	YES	NO			
Address type: (Please tick)	Street / Road	Flat	Farm	Plot	Other
Address No / House / Street Number	Address / Street Name				
Building / Complex / Block / Apartment name					
Country	Province				
Town	Suburb				
Which address must be used for your application?		Physical Address		Work Address	

OPTIONAL (Secondary Parent / Legal Guardian Information)

Parent / Legal Guardian type (Please tick)		Biological	Adoptive	Legal Guardian	Step	Other				
Title: (Please tick)		Mr.	Miss	Mrs.	Ms.	Prof.	Dr	Rev	Hon	Adv
First Name		Second Name		Surname						

Date of birth					Gender	Male			Female				
SA Citizen	YES			NO	ID number /Passport Number / Permit								
Gender		Male			Female			SA Citizen	YES			NO	
Marital status: (Please tick)				Divorced	Married	Separated	Single	Widowed					
IMPORTANT!!! Please Complete													
Contact Information													
Cell phone no.						Emergency Contact no.							
Tel. no. (work)						Alternative Contact No.							
Alternative Name and Surname						Alternative: Relationship							
Email address													
Address Outside Western Cape		YES			NO								
Address type: (Please tick)		Street			Flat			Farm			Plot		
House / Street Number					Street name								
Building / Complex / Block / Apartment name													
Town							Suburb						

Learner Information													
Required Grade (The Grade you are applying for)								Date of Application (YYYY / MM / DD)					
First-time registration in Western Cape				Yes				No					
First Name					Second Name				Surname				
Learner's ID Number:						Date of Birth							
Learner's CEMIS Number:													
Gender		Male			Female								
Population group		Black/African				Coloured			Indian/ Asian			White	
SA Citizen		YES			NO	Undocumented SA / Foreign learner		YES			NO		
Is the address the same as the primary parent's?					YES			NO					
Home address (where learner currently resides)													
Address type		Street			Flat			Farm			Plot		
Address no.		Street name					Building / Complex / Apartment name						
Town					Suburb								
Reason for Application		Learner Not promoted					Better prospects						
		Highest Grade Reached					New registration						
		Serious Trauma or issue at Previous School (Proof required)					Transfer from SNE to Public Ordinary school						

Name of the last school attended							Year			
Are you relocating to the Western Cape (WC) from another province?				YES			NO			
If yes, write down the name of the province.										

Are you relocating to the WC from another country?	YES		NO			
If yes, write down the name of the country.						
Language of Learning and Teaching (LOLT)	AFR	ENG	XHOSA	SESOTHO	TSWANA	

Do you wish to apply for Hostel accommodation? (Applicable to mainly rural areas)	YES		NO	
Do you wish to apply for learner transport? (Applicable to mainly rural areas at schools using the WCED learner transport schemes)	YES		NO	
a) Participation in sport	YES		NO	
If yes, please indicate which sport.				
b) Participation in cultural programme / s	YES		NO	
If yes, please indicate which cultural programme / s.				
c) Has the learner held any leadership position/s at school?	YES		NO	
If yes, please provide details.				
Name any sports award/s achieved.				
d) Does the learner play an instrument/s?	YES		NO	
If yes, please indicate which instrument/s.				
e) Level of music participation (Write down the level of participation or achievement.)				

Select Schools

Please indicate the schools you want to APPLY TO:

KINDLY RANK SCHOOLS BELOW IN THE ORDER OF YOUR PREFERENCE

No.1	NAME OF SCHOOL		Are you applying for more than 1 learner at the same school?	YES		NO	
Please indicate if the learner has a sibling attending this school.		YES		NO		CEMIS NUMBER	
No.2	NAME OF SCHOOL		Are you applying for more than 1 learner at the same school?	YES		NO	
Please indicate if the learner has a sibling attending this school.		YES		NO		CEMIS NUMBER	
No.3	NAME OF SCHOOL		Are you applying for more than 1 learner at the same school?	YES		NO	
Please indicate if the learner has a sibling attending this school.		YES		NO		CEMIS NUMBER	
No.4	NAME OF SCHOOL		Are you applying for more than 1 learner at the same school?	YES		NO	
Please indicate if the learner has a sibling attending this school.		YES		NO		CEMIS NUMBER	
No.5	NAME OF SCHOOL		Are you applying for more than 1 learner at the same school?	YES		NO	
Please indicate if the learner has a sibling attending this school.		YES		NO		CEMIS NUMBER	
No.6	NAME OF SCHOOL		Are you applying for more than 1 learner at the same school?	YES		NO	
Please indicate if the learner has a sibling attending this school.		YES		NO		CEMIS NUMBER	
No.7	NAME OF SCHOOL		Are you applying for more than 1 learner at the same school?	YES		NO	

Please indicate if the learner has a sibling attending this school.		YES		NO		CEMIS NUMBER	
No.8	NAME OF SCHOOL				Are you applying for more than 1 learner at the same school?	YES	NO
Please indicate if the learner has a sibling attending this school.		YES		NO		CEMIS NUMBER	
No.9	NAME OF SCHOOL				Are you applying for more than 1 learner at the same school?	YES	NO
Please indicate if the learner has a sibling attending this school.		YES		NO		CEMIS NUMBER	
No.10	NAME OF SCHOOL				Are you applying for more than 1 learner at the same school?	YES	NO
Please indicate if the learner has a sibling attending this school.		YES		NO		CEMIS NUMBER	

Declaration by legal parent/guardian

I, the undersigned, declare that the above information is correct.

Signed by legal parent/guardian: _____

Date: _____

REQUIRED DOCUMENTS SUBMITTED TO THE SCHOOL / WCED

<i>Please check that the following documentation is attached</i>	<i>Please tick</i>	
1. Certified copy of ID / Birth certificate (learner)	YES	NO
2. A study permit issued by the Department of Home Affairs or proof of application (If the learner is a foreign learner)	YES	NO
3. Copy of immunization card / Road to Health chart (Primary schools only)	YES	NO
4. Latest official school academic report of the learner	YES	NO
5. Proof of residence (This could be: Rates account / Lease agreement / An affidavit confirming residence)	YES	NO

Checked by (Name and surname): _____

Date: _____

Checked and signed by: _____