

**WEBSITE/EMAIL APPLICATION FORM**



**WESTVILLE**  
BOYS' HIGH SCHOOL

Please staple  
2x Passport  
Photos here

**APPLICATION FOR ADMISSION IN GRADE \_\_\_\_\_ YEAR \_\_\_\_\_**

**PUPIL:**

SURNAME: \_\_\_\_\_ FIRST NAMES: \_\_\_\_\_ KNOWN AS \_\_\_\_\_

**NB: CERTIFIED COPIES OF THE FOLLOWING DOCUMENTS TO BE SUBMITTED WITH THIS FORM:**

**Originals to be presented at School for verification. *No Application will be accepted without these.***

- 2x copies of unabridged birth certificate**
- Year end report from last grade passed and latest termly report**
- Your latest rates, telephone and electricity accounts (Affidavit NOT accepted)**
- 2x passport size photographs of son (ensure his name is on the back)**
- Proof of immunisations**
- Identity documents of both parents -Should either parent be deceased, a copy of the death certificate is required**

**APPLICATION FOR ADMISSION  
(TO BE COMPLETED BY BOTH PARENTS/LEGAL GUARDIANS)**

- 1 For a pupil to be eligible for admission to this school he must comply with the admissions criteria as determined by the South African Schools Act and regulations.
- 2 Admission will not be finalised until all the relevant documentation has been received by the School.
- 3 Use of fraudulent documents and information pertinent to this application, such as age, identity, place of residence, guardianship, and previous academic achievement is a **CRIMINAL OFFENCE**. The School reserves the right to lay criminal charges and reject the application, whether or not the application has been accepted.
- 4 By making this application for admission to the School, the pupil and his parents accept that on such admission, the pupil will be bound by the Code of Conduct and Rules of the School throughout the pupil's stay at the School.
- 5 Scholarship Application Forms are available on request
- 6 **BOARDING:** Please tick to indicate if you wish to be considered for private boarding. Limited space available.

B Cert	
Report	
Area	
Acc Fee	
T Card	
M Card	
A102 Form	

**OFFICE USE ONLY**

**Kindly return this form directly to Westville Boys' High School.  
Should you have any queries, please contact the  
Admission's Secretary.**

TEL 031 267 1330  
FAX 031 266 7950  
admissions@wbhs.co.za  
P O BOX 1019  
WANDSBECK 3631  
www.wbhs.co.za

## 1. PARTICULARS OF PUPIL

FULL NAME: \_\_\_\_\_

DATE OF BIRTH: \_\_\_\_\_ PLACE OF BIRTH: \_\_\_\_\_ IDENTITY NUMBER: \_\_\_\_\_

CITIZENSHIP: \_\_\_\_\_ RELIGION: \_\_\_\_\_ MOTHER TONGUE: \_\_\_\_\_

IF NOT A SOUTH AFRICAN RESIDENT, PERMIT NUMBER: \_\_\_\_\_ DATE OF ENTRY INTO SOUTH AFRICA: \_\_\_\_\_

HAS PUPIL EVER BEEN EXPELLED FROM/REFUSED ADMISSION TO ANY SCHOOL? \_\_\_\_\_ IF YES, GIVE DETAILS SEPARATELY \_\_\_\_\_

HAS PUPIL EVER REPEATED A GRADE AT ANY STAGE? IF SO WHICH YEAR? \_\_\_\_\_

**Please indicate other Schools you have applied to:** \_\_\_\_\_

PUPIL'S PRESENT SCHOOL: \_\_\_\_\_ GRADE: \_\_\_\_\_

REQUESTED DATE OF ADMISSION: \_\_\_\_\_ TO GRADE: \_\_\_\_\_

## 2. FAMILY INFORMATION

Is father an old boy of the School? Yes/No Years attended \_\_\_\_\_ to \_\_\_\_\_

If brothers attend/attended the School please give names and dates: \_\_\_\_\_ to \_\_\_\_\_  
 \_\_\_\_\_ to \_\_\_\_\_

BROTHERS CURRENTLY ATTENDING PRIMARY SCHOOL:

1. NAME: \_\_\_\_\_ GRADE: \_\_\_\_\_ SCHOOL: \_\_\_\_\_

2. NAME: \_\_\_\_\_ GRADE: \_\_\_\_\_ SCHOOL: \_\_\_\_\_

## 3. MEDICAL AID DETAILS OF PUPIL

FAMILY DOCTOR: \_\_\_\_\_ TELEPHONE NO: \_\_\_\_\_

MEDICAL AID: \_\_\_\_\_ MEMBERSHIP NO: \_\_\_\_\_

EMERGENCY CONTACT : \_\_\_\_\_ (Other than parent/guardian)

EMERGENCY CONTACT NUMBER : \_\_\_\_\_ RELATIONSHIP : \_\_\_\_\_

DETAILS OF DISABILITIES, ALLERGIES OR OTHER MEDICAL CONDITIONS/PREVIOUS ILLNESSES:

\_\_\_\_\_

\_\_\_\_\_

## 4. SUBJECT INFORMATION—APPLICABLE TO GRADE 10-12 ONLY

### GRADE 10-12

#### SUBJECT CHOICES FOR GRADE 10-12:

CHOOSE BETWEEN AFRIKAANS AND ISIZULU AS A SECOND LANGUAGE— INDICATE YOUR CHOICE WITH A TICK  
 CHOOSE AN ADDITIONAL TWO SUBJECTS FOR YOUR OPTIONAL SUBJECTS

✓	ENGLISH		AFRIKAANS OR		LIFE SCIENCES (BIOLOGY)		DRAMATIC ARTS (SPEECH AND DRAMA)
✓	PHYSICAL SCIENCE		ISIZULU		ENGINEERING GRAPHICS AND DESIGN		
✓	MATHEMATICS		ACCOUNTING		GEOGRAPHY		
✓	LIFE ORIENTATION		VISUAL ARTS (ART)		HISTORY		

## 5. SCHOOL FEE ACCOUNT DATA

DETAILS OF PARENT/GUARDIAN TO WHOM THE SCHOOL FEE ACCOUNTS WILL BE SENT. ACCORDING TO THE SA SCHOOLS' ACT OF 1996, BOTH PARENTS ARE RESPONSIBLE FOR THE SCHOOL FEES. A SCHOOL FEE COMMITMENT FORM IS TO BE COMPLETED ANNUALLY.

NAME: \_\_\_\_\_ ID NUMBER: \_\_\_\_\_

POSTAL ADDRESS: \_\_\_\_\_

POSTAL CODE: \_\_\_\_\_

TELEPHONE NUMBER: \_\_\_\_\_ RELATIONSHIP TO PUPIL: \_\_\_\_\_

ACKNOWLEDGEMENT: Signed at \_\_\_\_\_ on this the \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_\_\_

SIGNATURE: \_\_\_\_\_

## 6. PERSONAL DETAILS OF BIOLOGICAL PARENTS OR LEGAL GUARDIANS

**MOTHER:** BIOLOGICAL PARENT  LEGAL GUARDIAN  MARITAL STATUS : \_\_\_\_\_

FIRST NAMES: \_\_\_\_\_ SURNAME: \_\_\_\_\_

IDENTITY NUMBER: \_\_\_\_\_

CONTACT INFORMATION: HOME NUMBER: \_\_\_\_\_

CELLPHONE NUMBER: \_\_\_\_\_

EMAIL ADDRESS: \_\_\_\_\_

WORK NUMBER: \_\_\_\_\_

RESIDENTIAL ADDRESS: \_\_\_\_\_

CODE: \_\_\_\_\_

POSTAL ADDRESS: \_\_\_\_\_

CODE: \_\_\_\_\_

NAME OF EMPLOYER AND BUSINESS ADDRESS: \_\_\_\_\_

OCCUPATION AND POSITION HELD: \_\_\_\_\_

**FATHER:** BIOLOGICAL PARENT  LEGAL GUARDIAN  MARITAL STATUS : \_\_\_\_\_

FIRST NAMES : \_\_\_\_\_ SURNAME: \_\_\_\_\_

IDENTITY NUMBER: \_\_\_\_\_

CONTACT INFORMATION: HOME NUMBER: \_\_\_\_\_

CELLPHONE NUMBER: \_\_\_\_\_

EMAIL ADDRESS: \_\_\_\_\_

WORK NUMBER: \_\_\_\_\_

RESIDENTIAL ADDRESS: \_\_\_\_\_

CODE: \_\_\_\_\_

POSTAL ADDRESS: \_\_\_\_\_

CODE: \_\_\_\_\_

NAME OF EMPLOYER AND BUSINESS ADDRESS: \_\_\_\_\_

OCCUPATION AND POSITION HELD: \_\_\_\_\_

**NB: WITH WHOM DOES THE PUPIL RESIDE:** \_\_\_\_\_



## 7. UNDERTAKING—TO BE SIGNED BY BOTH PARENTS/LEGAL GUARDIANS

The details of this undertaking must be carefully considered before this application is signed and submitted to the school

1. We hereby declare that we are aware of the Code of Conduct, Rules and Regulations of the School and we undertake to ensure that our son subscribes to these should his application be successful.
  - A To ensure that our son/ward attends school regularly
  - B To ensure that our son/ward complies with the Code of Conduct, Rules and Regulations of the School
  - C To allow our son/ward to participate in physical education classes, extra-mural activities and educational excursions
  - D To inform the School of any change of address or telephone number
  - E To inform the School of any case of infectious illness in the your household
  - F To encourage our son/ward to respect the tradition and character of the School
2. We agree that the Principal or his designates may act in loco-parentis in the event of any injury or accident in which our son/ward may be involved.
3. We undertake to pay the School fees in terms of sections 39 and 40 of the South African Schools' Act, Act no 84 of 1996, and that such fees become due and payable on the first day of the school year and that such fees, if not paid, may be recovered by legal action with costs to the debtor on the attorney/client scale.
4. We acknowledge that we have been advised of the current School fees and that the details of the fee structure and methods of payment will be forwarded to us before the start of each academic year.
5. We agree that should we default in any of the payments to the School in terms of this agreement or any subsequent agreements, that the School, may at its discretion, do a credit check on us and may list us with a credit bureau.
6. We acknowledge that to qualify for a refund/waiver of school fees upon withdrawal of our son/ward during the school year, the following is required:
  - A A full term's notice of withdrawal is required or a term's fee in lieu thereof.
  - B That no unexpired portion of a term's fees will be refunded/waived.
7. **We acknowledge that we cannot apply for exemption from school fees if we reside closer to another state high school.**
8. We declare that the information submitted in this application form is the truth.

SIGNATURE OF PARENTS/LEGAL GUARDIANS \_\_\_\_\_

**NB: Both Parents/Guardians must sign**

Interviews will be arranged where necessary. If there is any confidential information which you wish to bring to the School's attention, please contact the School's Admission Secretary for an appointment.

***You will be notified in writing as to whether or not your son/ward has been accepted.***

***A non-refundable deposit is payable to confirm enrolment.***

***This amount will be deducted from the School fees.***

OFFICE USE ONLY

RESULT OF APPLICATION:

\_\_\_\_\_

ADDITIONAL INFORMATION/COMMENT:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

DATE: \_\_\_\_\_

HEADMASTER: \_\_\_\_\_



**WESTVILLE**  
BOYS' HIGH SCHOOL

**UNDERTAKING REGARDING ADMISSIONS AND SCHOOL FEES BY PARENTS RESIDING CLOSER TO ANOTHER STATE HIGH SCHOOL**

I, \_\_\_\_\_ the under-signed parent / legal guardian ward of

\_\_\_\_\_

hereby acknowledge that I live closer to another public high school than to Westville Boys' High School (WBHS).

I understand that the primary responsibility of WBHS is to provide placement for pupils residing closer to WBHS than to any other State high school and therefore commit myself to, and undertake to meet the following conditions:

1. **That I will also make application for admission at other high schools as I am aware that my application at WBHS may not be successful.**
2. **I understand that should I require financial assistance for payment of school fees, the responsibility for such assistance falls on the high school closest to where I live. Furthermore I will not apply for such assistance at WBHS at any stage in the future should my application be successful.**

I commit myself to, and undertake to meet, the requirements of the school with regard to the timeous payment of the school fees as established by the parents at the annual budget meetings of the school. I acknowledge that, in the event of my not complying with the undertaking to timeously meet the school fee payments, I will be immediately subject to the school taking legal action for the recovery of the outstanding fees at that time.

This done and signed at \_\_\_\_\_ Date \_\_\_\_\_

Signature: \_\_\_\_\_

**THIS FORM MUST BE ATTACHED TO AND SUBMITTED WITH APPLICATION FORMS**

Queries can be directed to the Admissions Secretary:  
Tel: 031-2671330 Fax: 031-2667950 Email: admissions@wbhs.co.za

UNDERTAKING