

**APPLICATIONS WILL ONLY BE CONSIDERED IF THE APPLICATION FORM IS COMPLETED FULLY  
AND ALL SUPPORTING DOCUMENTS ARE ATTACHED.**



**RIEBEEK COLLEGE GIRLS' HIGH SCHOOL**

46-58 North Street

Janssandal

Kariega

6229

Tel: 041 9922442

E-mail: [admissions@riebeekcollege.co.za](mailto:admissions@riebeekcollege.co.za)

**APPLICATIONS WILL OPEN ON THE 8<sup>TH</sup> OF APRIL 2024 AND CLOSE ON THE 6<sup>TH</sup> OF MAY 2024**

**APPLICATION FOR ADMISSION 2025**

**PLEASE NOTE THE FOLLOWING:**

1. Completion of this application form does not automatically guarantee acceptance of your daughter at Riebeek College Girls' High School.
2. It must be appreciated that by virtue of the number of applications received, not all applicants can be accepted, and some fair process of selection is inevitable.
3. The number of learners accepted each year will be dependent on the capacity of the school.
4. No vacancies currently exist for Grades 5-7 and Grades 9-12.
5. Space is limited - Please do apply to other schools.
6. Learners with biological siblings (not cousins or friends) who are currently at Riebeek College and learners who live within 5km of the school will be considered first.
7. If you have not received correspondence regarding your child's acceptance from the school by 1 August 2024, kindly contact the school.
8. You will be informed of the school's decision by either email or sms.
9. The decision of the Admission Panel is FINAL, and no appointments will be granted once the outcome has been communicated. All enquiries regarding the outcome of the application should be directed to:  
[admissions@riebeekcollege.co.za](mailto:admissions@riebeekcollege.co.za)
10. No documents will be returned once submitted. Please ensure that certified copies are submitted to the school.

Office Use:  
Sibling:  
Feeder zone

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<b>LEARNER'S FULL NAME &amp; SURNAME:</b>	
<b>GRADE APPLIED FOR:</b>	

<b>PLEASE SUPPLY THE FOLLOWING DOCUMENTS:</b>		
Learner's 2023 end of year report		OFFICE USE
Learner's most recent 2024 report		OFFICE USE
<ul style="list-style-type: none"> <li>Learner's <b>Unabridged</b> Birth Certificate</li> <li>Alternatively: Abridged Birth Certificate Passport accompanied by an Affidavit.</li> </ul>		OFFICE USE
Learner's ID Photo		OFFICE USE
Learner's Immunization Card (clinic card)		OFFICE USE
ID of Payee (if not a parent)		OFFICE USE
ID of Biological/Legal Father		OFFICE USE
ID of Biological/Legal Mother		OFFICE USE
<b>Proof of Residence:</b>  1) Bank Statement 2) Lease Agreement (signed by both parties) 3) Municipal account in name of account payer. 4) <b>If in name of a secondary person include an affidavit for both parties from (SAPD) with a copy of his/her ID.</b>  <i>*The secondary person should be willing to give more information regarding the affidavit should the school need one.</i>  <i>* Should false information be given regarding residential address, the application will be discarded, as this proves to be fraudulent.</i>		OFFICE USE
Certificate of Conduct (completed by current principal)		OFFICE USE
Transfer Form ( <u>only required once learner has been accepted</u> )		OFFICE USE

*Please attach the learner's ID photo here*

- If a parent is deceased**, please attach a certified copy of the death certificate.
- If a parent is unemployed**, please attach letter from SARS or an affidavit from SAPS (NOT FROM A WARD COUNCILLOR)

*(Parent as defined by the SA Schools Act 84 of 1996)*  
 (A legal guardian **MUST** be appointed by the Court. If you are the legal guardian, a certified copy of the official court order of appointment to be included with this application.  
 NB: A family member is **NOT** a legal guardian unless appointed by the court).  
*In terms of the Regulation for Admission of learners to Public Schools (General Notice 4138 of 2001) parents are requested to supply the principal with the above documentation*

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<b>LEARNER'S DETAILS:</b>															
<b>SURNAME:</b>															
<b>FIRST NAMES:</b>															
<b>ID NUMBER:</b>															
<b>IMMIGRANT:</b> (IF A NON SA CITIZEN PLEASE INCLUDE COPIES OF PASSPORT & STUDY PERMIT)		<b>PASSPORT NUMBER:</b>													
		<b>STUDY PERMIT NUMBER:</b>													
<b>DATE OF BIRTH:</b>															
<b>AGE:</b>						<b>YEARS</b>								<b>MONTHS</b>	
<b>NATIONALITY:</b>															
<b>HOME LANGUAGE:</b>															
<b>POPULATION GROUP:</b> (REQUIRED FOR DEPARTMENT PURPOSES)															
<b>ADDRESS WHERE LEARNER RESIDES:</b>															
<b>WITH WHOM DOES LEARNER LIVE:</b>															
<b>HOME TELEPHONE NUMBER:</b>															
<b>CELL NUMBER(S):</b>															
<b>RELIGION:</b>															
<b>DOES LEARNER HAVE A SISTER AT RIEBEEK COLLEGE:</b>					<b>YES</b>				<b>NO</b>						
<b>IF YES, PLEASE SUPPLY NAME &amp; GRADE:</b>															
<b>IF FAMILY MEMBER WAS A RIEBEEK GIRL, PLEASE INDICATE BELOW HOUSE PREFERENCE:</b>															
<b>ELTON</b>				<b>ELIZABETH</b>				<b>ELEANOR</b>							
<b>SECOND LANGUAGE CHOICE:</b> (ONLY APPLICABLE TO SENIOR GRADES)				<b>ISIXHOSA (HOME)</b>				<b>AFRIKAANS (FIRST ADDITIONAL)</b>							
<b>DO YOU WISH LEARNER TO BE A BOARDER?</b>								<b>YES</b>		<b>NO</b>					
<b>WE HEREBY GRANT RIEBEEK COLLEGE PERMISSION TO PUBLISH PHOTOS OF OUR DAUGHTER ON ITS SOCIAL MEDIA PLATFORMS</b>								<b>YES</b>		<b>NO</b>					

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**CURRENT SCHOOL DETAILS:**

NAME OF SCHOOL:			
ADDRESS:			
TELEPHONE NUMBER:			
HAVE REMEDIAL CLASSES BEEN REQUIRED:			
SPECIFY DETAILS OF REMEDIATION:			

**LEARNER EXTRAMURAL INVOLVEMENT AND ACHIEVEMENTS:**

**SPORT:**

**DOES LEARNER PARTICIPATE ACTIVELY IN THE SCHOOL PROGRAMME?**

**IF ANSWER IS "NO" PLEASE SPECIFY THE REASON:**

.....

**PLEASE SPECIFY THE SPORT(S) IN WHICH SHE PARTICIPATES AND TEAM:**

.....

.....

**CULTURAL:**

**SPECIFY SOCIETIES IN OR OUT OF SCHOOL:**

.....

.....

**LEADERSHIP:**

**LEADERSHIP AT SCHOOL, SPORT, SOCIETIES (GIVE DETAILS):**

.....

.....

**AWARDS:**

**DETAILS OF PRIZES, MEDALS, ETC. IN OR OUT OF SCHOOL:**

.....

.....

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**LEARNER MEDICAL AND PSYCHOLOGICAL HISTORY:**

<b>MEDICAL AID:</b>			
<b>MEDICAL AID NUMBER:</b>			
<b>MAIN MEMBER:</b>			
<b>NAME OF DOCTOR:</b>			
<b>TEL. NO. OF DOCTOR:</b>			
<b>MEDICAL CONDITIONS (INCLUDING ALLERGIES):</b>			
<b>SPECIAL CONDITIONS REQUIRING COUNSELLING:</b>			
<b>DOES THE LEARNER HAVE ANY CLINICALLY DIAGNOSED BARRIERS TO LEARNING? (IF YES, KINDLY INCLUDE COPIES OF THE NECESSARY CLINICAL REPORTS.)</b>	<b>YES</b>	<b>NO</b>	
<b>DEXTERITY OF LEARNER:</b>	<b>RIGHT-HANDED</b>	<b>LEFT-HANDED</b>	<b>AMBIDEXTROUS</b>

**GENERAL INFORMATION:**  
(ANY OTHER INFORMATION YOU WOULD LIKE THE SCHOOL TO BE AWARE OF)


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**PERSONAL DETAILS:**

**PARENT INFORMATION: TICK THE APPROPRIATE BOX**

(PLEASE SEE ANNEXURE A BEFORE COMPLETING THIS SECTION)

BIOLOGICAL MOTHER	BIOLOGICAL FATHER	LEGAL GUARDIAN	STEPPARENTS
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<b>SURNAME:</b>															
<b>FIRST NAMES:</b>															
<b>ID No. / PASSPORT No.:</b>															
<b>POPULATION GROUP:</b> (REQUIRED FOR DEPARTMENT PURPOSES)						<b>HOME LANGUAGE:</b>									
<b>MARITAL STATUS:</b>		SINGLE	MARRIED	SEPARATED	DIVORCED	REARRIED	WIDOWED	COHABIT							
<b>ADDRESS:</b>															
<b>OCCUPATION:</b>															
<b>EMPLOYER/COMPANY:</b>															
<b>CLOCK NUMBER:</b>								<b>GROSS INCOME: (IF POSSIBLE)</b>							
<b>EMPLOYER ADDRESS:</b>															
<b>TEL NO.: (H)</b>								<b>TEL NO.: (W)</b>							
<b>CELL No.:</b>															
<b>EMAIL:</b>															
PRINT CLEARLY - WILL BE USED FOR ALL CORRESPONDENCE															
<b>RECEIVING SOCIAL GRANT:</b>				<b>YES</b>				<b>NO</b>							

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BIOLOGICAL MOTHER	BIOLOGICAL FATHER	LEGAL GUARDIAN	STEPARENTS
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<b>SURNAME:</b>																			
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<b>ID No. / PASSPORT No.:</b>																			
<b>POPULATION GROUP:</b> (REQUIRED FOR DEPARTMENT PURPOSES)						<b>HOME LANGUAGE:</b>													
<b>MARITAL STATUS:</b>		SINGLE	MARRIED	SEPARATED	DIVORCED	REARRIED	WIDOWED	COHABIT											
<b>ADDRESS:</b>																			
<b>OCCUPATION:</b>																			
<b>EMPLOYER/COMPANY:</b>																			
<b>CLOCK NUMBER:</b>								<b>GROSS INCOME: (IF POSSIBLE)</b>											
<b>EMPLOYER ADDRESS:</b>																			
<b>TEL NO.: (H)</b>								<b>TEL NO.: (W)</b>											
<b>CELL No.:</b>																			
<b>EMAIL:</b>																			
<b>PRINT CLEARLY - WILL BE USED FOR ALL CORRESPONDENCE</b>																			
<b>RECEIVING SOCIAL GRANT:</b>						<b>YES</b>						<b>NO</b>							

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**PAYMENT OF SCHOOL FEES:  
BOTH PARENTS ARE LIABLE FOR PAYMENT OF SCHOOL FEES.**

Riebeek College GHS is a proudly fee-paying school. In accordance with the provisions of Section 39 of the South African School's Act 84 of 1996, the Governing Body determines the school fees payable on an annual basis and upon successful admission, the Governing Body advises the parents of the learners of the amount payable in respect of school fees for the year of enrollment. If parents/ guardians wish their daughter(s) to attend RCGHS, they undertake to support the financial commitments of the school by paying the school fees levied on a monthly or annual basis. In terms of Section 41 of the SASA, RGHS may enforce the payment of compulsory school fees. Accordingly, failure to make payment timeously will result in the outstanding amount being handed over to attorneys for collection.

**PLEASE INDICATE BELOW WHO WILL BE RESPONSIBLE FOR PAYMENT OF SCHOOL FEES.**

<b>FATHER</b>	<b>MOTHER</b>	<b>OTHER</b>
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IF "OTHER" IS SELECTED PLEASE PROVIDE INFORMATION BELOW:

RELATIONSHIP TO LEARNER:	
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SURNAME:	
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FIRST NAMES:	
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ID No. / PASSPORT No.:																			
------------------------	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

MARITAL STATUS:	SINGLE	MARRIED	SEPARATED	DIVORCED	REMARIED	WIDOWED	COHABIT
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HOME ADDRESS:	
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OCCUPATION:	
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EMPLOYER/COMPANY:	
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CLOCK NUMBER:	GROSS INCOME: (IF POSSIBLE)	
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EMPLOYER ADDRESS:	
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TEL No. : (H)		TEL No. : (W)	
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CELL No.:	
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EMAIL:	
--------	--

PRINT CLEARLY



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**DECLARATION: PROTECTION OF PERSONAL INFORMATION ACT 4 OF 2013**

The purpose of this Act is to protect personal information, to strike a balance between the right to privacy and the need for the free flow of, and access to, information and to regulate how personal information is processed. Special rules apply to the processing of personal information of children (Section 35).

By signing this application, you agree to the information contained herein to be used in the strictest confidence as and when necessary.

**DECLARATION BY PARENTS/ LEGAL GUARDIANS:**

**UNDERTAKING BY PARENTS/GUARDIANS**

1. I/We hereby apply to have the child whose name appears on this form as a learner at Riebeeck College Girls' High School and confirm that she complies with the basic criteria.
2. I/We hereby certify that I/we have legal custody and/or guardianship in respect of the above-mentioned learner.
3. I/We undertake to adhere to the school rules and disciplinary code and to the various alterations in the rules and disciplinary code that may be made from time to time.
4. I/We understand that while every reasonable effort will be made to prevent losses or damage to learner's clothing and equipment, the school cannot be held liable for such.
5. I/We undertake to reimburse the school for any damage to school property that may be caused by our child.
6. In terms of family law, parents are jointly and severally liable for the payment of the school fees irrespective of their marital status.
7. In the event of non-payment of school fees, the school will institute legal action against both parents irrespective of maintenance and court orders which may exist between the parties.
8. In terms of Section 39 of the South African Schools Act, parents are liable to pay compulsory school fees.
9. In terms of Section 40 and 41 of the South African Schools Act, the school may enforce the payment of these compulsory fees.
10. The parties to this application undertake to pay all legal costs, including attorney/client fees and collection costs incurred by the school in the event of the school having to take legal action for the recovery of school fees.
11. I/We jointly and severally undertake to pay school fees and I /we understand the following:
  - a) The annual school fees will be a compulsory sum of R21 500 per annum for 2024 as adopted by the majority of parents at the AGM. **(2025) fees not yet available**
  - b) School fees are payable in advance and are due on the first day of school.
  - c) Our terms are as follows:
    - i) Fees can be paid in full at the beginning of the year.
    - ii) Fees can be paid quarterly in advance or in 10 monthly installments (Jan-Oct)
  - d) A sum of R4000 may be paid on acceptance and will be deducted from the school fees for the year. An additional R120 is payable in the first week of the term for compulsory badges.
12. The school may conduct an enquiry and/or information search about the parents with an information bureau, persons acting as their agents and/or credit grantors.
13. If parent/s fail to meet their school fee obligations the school may record the parent/s non-performance with an information bureau. Any information conveyed to a credit information bureau will be available to other credit grantors and used in making credit risk management related decisions.
14. Applications for the exemption of parents from payment of school fees can be obtained from the Principal.
15. Should there be a dispute on your statement of account please notify the Bursar in writing.

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- 16. I/We acknowledge that completion of this form does not necessarily imply confirmation of our daughter(s) acceptance at Riebeek College Girls' High School. (This will be done by letter from the principal.)
- 17. I/We undertake to give notice in writing of any intention to remove my/our child from the school and furthermore to return any books and/or equipment belonging to the school which our child may have.
- 18. I/We understand that the school reserves the right to verify all information supplied to them via this application. In the event of fraudulent documents submitted, the school reserves the right to lay a criminal charge of fraud against any of the parties to this application.

This commitment in its entirety will be valid from the day on which it is signed by the parent/guardian to the day on which the pupil officially leaves the school.

The parent/guardian declares that he/she is the legal guardian of the child and is entitled to sign this document, and shall be bound hereto both as parent/guardian, and in his/her personal capacity.

**ADDRESS:** The signatory/signatories hereto hereby choose *domicillium citandi et executandi* (official physical address) (Not Postbox number) as:

.....

**DECLARATION**

I/We .....(parents/guardians)  
hereby declare that the information which we have recorded in this form is true and correct.

Signed on this .....day of.....20.....

.....  
**SIGNATURE FATHER/LEGAL GUARDIAN**

.....  
**SIGNATURE MOTHER/LEGAL GUARDIAN**

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# RIEBEEK COLLEGE GIRLS' HIGH SCHOOL

46-58 North Street  
Janssendal  
Kariega  
6229

Tel: 041 9922442

E-mail: admissions@riebeekcollege.co.za

Please detach this page for completion by your daughter's current school

## Certificate of Conduct

We have received an application form for a pupil from your school and would appreciate it if the information below could be provided.  
**If possible, please could the completed form be e-mailed to admissions@riebeekcollege.co.za.**  
 Thank you in anticipation of your co-operation: Riebeek College School Governing Body

Surname of Pupil:					
First Names of Pupil:				Grade:	
Was a pupil at this school	from:		to:		
Her conduct was:	Exemplary	Good	Satisfactory	Not satisfactory	
School Leadership:	Prefect		Deputy HG		Head Girl
Sport:	Vice-Captain			Captain	
Cultural:	Deputy/Vice			Head/Captain	
Parent involvement:	Good	Satisfactory		Not satisfactory	
All fees are:	Paid up to date	Not paid up to date		Exemption	

Name of School:					
Address of School:					
Tel. No.:		E-mail:			
Principal's Signature:				Date:	

**SCHOOL STAMP**