



RIEBEEK COLLEGE GIRLS' HIGH SCHOOL

The Admissions Secretary

P.O. Box 361

Uitenhage

6230

Tel: 041 9922442

Fax: 041 9911077

E-mail: admissions@riebeekcollege.co.za

APPLICATION FOR HOSTEL ADMISSION 2024

If learner is not currently attending Riebeek College, then this application must be accompanied by an Application for Admission form for the School

Date of admission to hostel:

LEARNER'S DETAILS:

SURNAME:			
FIRST NAMES:			
ID NUMBER:		GRADE:	
IMMIGRANT:	PASSPORT NUMBER:		
	STUDY PERMIT NUMBER:		
	IF A NON SA CITIZEN PLEASE INCLUDE COPIES OF PASSPORT & STUDY PERMIT		
DATE OF BIRTH:			
AGE:		YEARS	MONTHS
NATIONALITY:			
HOME LANGUAGE:			
POPULATION GROUP: (FOR DEPARTMENT PURPOSES)			
ADDRESS WHERE LEARNER RESIDES:			
WHO DOES LEARNER RESIDE WITH:			
HOME TELEPHONE NUMBER:			
LEARNER CELL NUMBER:			
RELIGION:			

LEARNER'S MEDICAL AND PSYCHOLOGICAL HISTORY:

MEDICAL AID:	
MEDICAL AID NUMBER:	
MAIN MEMBER:	
MAIN MEMBER ID No.:	
NAME OF DOCTOR:	
TEL. NO. OF DOCTOR:	
MEDICAL CONDITIONS:	
ALLERGIES:	
NAME OF DENTIST:	
TEL. NO. OF DENTIST:	
NAME OF CHEMIST:	
TEL. NO. OF CHEMIST:	

REASON FOR APPLICATION TO HOSTEL:	

PARENT INFORMATION:

PARENT DECEASED:

FATHER

MOTHER

FATHER'S DETAILS:

SURNAME:							
FIRST NAMES:							
ID No.:							
MARITAL STATUS:	SINGLE	MARRIED	SEPARATED	DIVORCED	REMARRIED	WIDOWED	COHABIT
ADDRESS:							
TEL NO. : (H)				TEL NO. : (W)			
CELL NO.:							
EMAIL:							
PRINT CLEARLY - WILL BE USED FOR ALL CORRESPONDENCE							

MOTHER'S DETAILS:

SURNAME:							
FIRST NAMES:							
ID No.:							
MARITAL STATUS:	SINGLE	MARRIED	SEPARATED	DIVORCED	REMARIED	WIDOWED	COHABIT
ADDRESS:							
TEL No. : (H)				TEL No. : (W)			
CELL No.:							
EMAIL:							
	PRINT CLEARLY - WILL BE USED FOR ALL CORRESPONDENCE						

GUARDIAN'S DETAILS: (IF APPLICABLE)

SURNAME:							
FIRST NAMES:							
ID No.:							
MARITAL STATUS:	SINGLE	MARRIED	SEPARATED	DIVORCED	REMARIED	WIDOWED	COHABIT
ADDRESS:							
TEL No. : (H)				TEL No. : (W)			
CELL No.:							
EMAIL:							
	PRINT CLEARLY - WILL BE USED FOR ALL CORRESPONDENCE						

EMERGENCY CONTACT'S DETAILS:

SURNAME:							
FIRST NAMES:							
ID No.:							
MARITAL STATUS:	SINGLE	MARRIED	SEPARATED	DIVORCED	REMARIED	WIDOWED	COHABIT
ADDRESS:							
TEL No. : (H)				TEL No. : (W)			
CELL No.:							
EMAIL:							
	PRINT CLEARLY - WILL BE USED FOR ALL CORRESPONDENCE						

PAYMENT OF HOSTEL FEES:

Sholto McIntyre Hostel fees not paid timeously will automatically exclude the learner from being admitted to the Hostel

WHO WILL BE RESPONSIBLE FOR PAYMENT OF HOSTEL FEES?

FATHER

MOTHER

OTHER

IF "OTHER" IS SELECTED PLEASE PROVIDE INFORMATION BELOW:

SURNAME:							
FIRST NAMES:							
ID No.:							
MARITAL STATUS:	SINGLE	MARRIED	SEPARATED	DIVORCED	REMARRIED	WIDOWED	COHABIT
ADDRESS:							
OCCUPATION:							
EMPLOYER/COMPANY:							
CLOCK NUMBER:				GROSS INCOME: (IF POSSIBLE)			
EMPLOYER ADDRESS:							
TEL NO. :(H)				TEL NO. :(W)			
CELL No.:							
EMAIL:							
	PRINT CLEARLY - WILL BE USED FOR ALL CORRESPONDENCE						

PLEASE SUBMIT A COPY OF MEDICAL AID CARD WITH APPLICATION

DECLARATION AND UNDERTAKING BY PARENT/GUARDIAN:

I, THE UNDERSIGNED PARENT/GUARDIAN OF THE ABOVEMENTIONED CHILD HEREBY DECLARE THAT THE PARTICULARS AS FURNISHED, ARE TO THE BEST OF MY KNOWLEDGE CORRECT, AND UNDERTAKE:-

- i. IN THE EVENT OF THIS APPLICATION BEING SUCCESSFUL AND MY CHILD NOT MAKING USE OF THE ACCOMMODATION, TO ACCEPT LIABILITY FOR THE FULL BOARDING FEES FOR ONE SCHOOL TERM, UNLESS THE COMMITTEE HAVING GENERAL SUPERVISION OF THE HOSTEL DECIDES OTHERWISE;**
- ii. IN THE EVENT OF THIS APPLICATION BEING SUCCESSFUL AND MY CHILD MAKING USE OF THE ACCOMMODATION FROM A DATE LATER THAN THAT MENTIONED, TO ACCEPT LIABILITY FOR THE FULL BOARDING FEES FROM THE DATE STATED, UNLESS THE SAID COMMITTEE DECIDES OTHERWISE;**
- iii. TO GIVE WRITTEN NOTICE NOT LESS THAN ONE SCHOOL TERM IN ADVANCE OF MY INTENTION TO REMOVE MY CHILD, EXCEPT IN CASES WHERE THE COMMITTEE HAS ACCEPTED SHORTER NOTICE AND, IF I FAIL TO COMPLY HERewith, TO ACCEPT LIABILITY FOR THE FULL BOARDING FEES FOR THE CHILD UNTIL THE END OF THE SCHOOL TERM IN RESPECT OF WHICH NOTICE SHOULD HAVE BEEN GIVEN;**

- iv. TO PAY BOARDING FEES DUE, AS DETERMINED BY THE GOVERNING BODY, MONTHLY IN ADVANCE;
- v. AND TO ABIDE BY THE INTERNAL RULES OF THE HOSTEL

SIGNATURE: MOTHER / GUARDIAN

SIGNATURE: FATHER / GUARDIAN

DATE: _____

NB

1. IN TERMS OF THE RULES RELATING TO HOSTELS, A BOARDER WHOSE FEES HAVE NOT BEEN PAID, SHALL BE EXCLUDED FROM THE HOSTEL AND MAY NOT BE READMITTED UNTIL THE ARREAR BOARDING FEES HAVE BEEN PAID.
2. RIEBEEK COLLEGE GIRLS' HIGH SCHOOL DOES NOT ACCEPT LIABILITY FOR ANY LOSS OF OR DAMAGE TO THE PERSONAL EFFECTS OF BOARDERS, IRRESPECTIVE OF HOW SUCH LOSS OR DAMAGE IS CAUSED.
3. PARENTS ARE VERY STRONGLY ADVISED TO INSURE THEIR CHILDREN'S POSSESSIONS AGAINST FIRE, THEFT, ETC.

ON ACCEPTANCE A DEPOSIT OF R8000 IS PAYABLE (HOSTEL FEES FOR 2022 ARE NOT YET AVAILABLE)

INSERT ID SIZE PHOTOGRAPH HERE:

