



THE JOY OF LEARNING

**THIS APPLICATION MUST BE ACCOMPANIED
BY A R550 APPLICATION FEE:**
Oakhill School | FNB, Knysna 210214 | Account Number:
62002099605 Please use **FIRSTNAME SURNAME** as your reference

PROVISIONAL APPLICATION FORM

PUPIL INFORMATION		<i>(Please tick where appropriate)</i>									
Surname											
Preferred First Name											
Full First Names											
Date of Birth	Y	Y	Y	Y	/	M	M	/	D	D	
ID Number or Passport if a foreign pupil											
Nationality						Requires Study Permit?			Yes	No	
Date Study Permit Issued	Y	Y	Y	Y	/	M	M	/	D	D	
Date Study Permit Expires	Y	Y	Y	Y	/	M	M	/	D	D	
Population Group (for census purposes)	Black African		Coloured		Indian		White		Other		
Pupil's E-mail											
Pupil's Cell phone Number							Gender:	M	F		
Home Language											
Other Home Language											

ENROLMENT INFORMATION										
Current Grade					Grade when entering at Oakhill					
Intended Start Date at Oakhill	Y	Y	Y	Y	/	M	M	/	D	D
Will your child be catching to the school bus from Plettenberg Bay?								Yes / No		

IMPORTANT - Please check that the following is attached to this provisional application:

Copy of pupil's birth certificate	Yes	No	Copy of both parent's IDs	Yes	No
Copy of pupil's last school report	Yes	No	R550 Application fee paid	Yes	No



PREVIOUS SCHOOLING

At School Prior to Enrolling	Yes / No	Formal Grade R	Yes / No	First Registration in Province	Yes / No
Previous School(s)					
Province of Previous School			Country of School		
Primary barrier to learning that teachers should be aware of?				<i>Please attached any relevant reports (e.g. Educational psychologist / OT's etc)</i>	

FAMILY INFORMATION

Is either parent an Old Oak?	Yes	No	Year matriculated	
Siblings currently at Oakhill?	Yes		No	
Sibling House at Oakhill	Bendigo	Jubilee	Millwood	
Sibling Names and Date of Birth			DOB:	
			DOB:	

SUBJECT CHOICES - to be completed ONLY by those entering Grade 10, 11 & 12

Please choose from a minimum of three lines and the option of taking a fourth elective subject is encouraged.

If families come from overseas and a child qualifies for exemption from Afrikaans, a fourth elective subject is compulsory.

Compulsory Subjects		To matriculate 2024	To matriculate 2023	To matriculate 2022
English	Line 1	Accounting / History / IT Life Sciences	History / Life Sciences	Accounting / Life Sciences / Visual Arts
Afrikaans	Line 2	Business Studies / Geography Visual Arts / Life Sciences / CAT	CAT / History / Physical Sciences	Business Studies / History / IT
Life Orientation	Line 3	Business Studies / Dramatic Arts History / Physical Sciences	Visual Arts / Dramatic Arts / IT / Geography	CAT / Geography / Life Sciences / Physical Sciences
Mathematics / Mathematical Literacy	Line 4	-	Accounting / Geography / Business Studies	Dramatic Arts / History / Physical Sciences

AP Maths / AP English are options as additional subjects.

These bands are available if qualifying requirements are met and there are sufficient numbers. Oakhill reserves the right to amend subject packages.

MEDICAL INFORMATION

Medical Aid Scheme		Medical Aid Number	
Medical Aid Principal Member		Principal Member's ID	
Local Doctor's Name		Doctor's Contact Number	



Allergies	
Medical Notes	

MOTHER / GUARDIAN INFORMATION (for more than one family per pupil please complete this section twice)

Surname										
First Names										
Title and Initials										
ID/ Passport Number										
Date of Birth	Y	Y	Y	Y	/	M	M	/	D	D
Parent Status	Married	Divorced		Widowed		Live in Partner		Separated		Single
Occupation										
Employer										
Cell phone Number							Can we send sms messages?	Yes	No	
Email Address							Can we send email messages?	Yes	No	
Work Telephone Number										
Home Telephone										
Residential Address										
Postal Address										

Please note that you are obliged to contact us promptly of any changes of contact details.

FATHER / GUARDIAN INFORMATION

Surname										
First Names										
Title and Initials										
ID/ Passport Number										
Date of Birth	Y	Y	Y	Y	/	M	M	/	D	D
Parent Status	Married	Divorced		Widowed		Live in Partner		Separated		Single
Occupation										



Employer				
Cell phone Number		Can we send sms messages?	Yes	No
Email Address		Can we send email messages?	Yes	No
Work Telephone Number				
Home Telephone				
Residential Address				
Postal Address				
<i>Please note that you are obliged to contact us promptly of any changes of contact details.</i>				

SHARED INFORMATION

Person to Contact in Emergency		Emergency Contact's Number	
General Notes			

CONSENT TO PERFORM CREDIT CHECK

I/We (the undersigned debtor/s) hereby consent to, and authorize OAKHILL SCHOOL, as the case may be, to:-

- a. contact, request and obtain information at any time from any supplier, service, or credit provider (or potential credit provider) or registered credit bureau in order to assess the behaviour, profile, payment patterns, indebtedness, whereabouts, and creditworthiness of the debtor/s; and
- b. provide information about the behaviour, profile, payment patterns, indebtedness, whereabouts, and creditworthiness of the debtor/s to any registered credit bureau or to any supplier, service, or credit provider (or potential credit provider) seeking a trade reference regarding the debtor/s dealings with the supplier, service and/or credit provider.

I/we hereby record that I/we am/are aware of and agree to be bound by the terms applicable to Provisional Application as set in the Conditions of Enrolment of Pupils at Oakhill School, and in particular that neither I/we nor Oakhill School are obliged to enrol the Prospective Pupil at the School on the basis of the Provisional Application Form.

ALL ENROLMENTS ARE SUBJECT TO THE CONDITIONS OF ENROLMENT FORMING PART HEREOF.

The undersigned, in my/our capacity/ies as Parent(s)/ Guardians(s)/ Custodian(s) of the above Pupil do hereby make Provisional Application in terms of Clause 3 of the Conditions of Enrolment of Pupils at Oakhill School, (a copy of which conditions are available on our website) for the enrolment of the said Pupil at Oakhill School:

Signed at _____ on this _____ day of _____ 20 ____.	
Name: _____	Name: _____
ID/Passport No: _____	ID/Passport No: _____
Signature: _____	Signature: _____
<i>Parents: both Mother and Father/Guardians/Custodians to sign) whose liability in terms of hereof shall be joint and several</i>	