



ST MARTIN'S SCHOOL

Application Form

PLEASE COMPLETE ALL SECTIONS

Please give full details as at today's date

TODAY'S DATE
___/___/___/ (dd/mm/yy)

CHILD'S SURNAME	CHILD'S FORENAMES

CHILD'S DATE OF BIRTH
___/___/___/ (dd/mm/yy)
GENDER: MALE <input type="checkbox"/> FEMALE <input type="checkbox"/>

DIVISION FOR WHICH APPLICATION IS BEING MADE Mark with a cross (X) where appropriate		
DAY STUDENT	BOARDER	
PRE-PRIMARY	PREPARATORY	HIGH SCHOOL

FOR OFFICE USE ONLY
ADMISSION DECISION

1.0 CHILD'S BIOGRAPHICAL INFORMATION

- 1.1 Place of birth: _____
- 1.2 Identity document/passport number: _____
- 1.3 Citizenship: _____
- 1.4 Home Language(s): _____
- 1.5 Religion/denomination: _____
- 1.6 Year in which child first attended school: _____
- 1.7 Total number of years spent at school: _____
- 1.8 Current school:
 - 1.8.1 name of school: _____
 - 1.8.2 address of school: _____
 - 1.8.3 class/grade/form: _____
 - 1.8.4 commenced: _____

2.0 FATHER'S BIOGRAPHICAL INFORMATION

- 2.1 Surname: _____
- 2.2 Forenames: _____
- 2.3 Identity document number: _____
- 2.4 Marital status: _____
- 2.5 Occupation (state nature of work): _____
- 2.6 Employer (if self-employed, state name of company): _____
- 2.7 Employer's address: _____
- 2.8 Home address (not post box number): _____
- 2.9 Postal address (if different from 2.8): _____
Postal Code: _____
- 2.10 Telephone numbers:
 - Home: _____ Cell: _____
 - Business: _____ Fax: _____
 - Email: _____

3.0 MOTHER'S BIOGRAPHICAL INFORMATION

- 3.1 Surname: _____
- 3.2 Forenames: _____
- 3.3 Identity document/passport number: _____
- 3.4 Marital status: _____
- 3.5 Occupation (state nature of work): _____
- 3.6 Employer (if self-employed, state name of company): _____
- 3.7 Employer's address: _____
- 3.8 Home address (not post box number): _____
- 3.9 Postal address (if different from 3.8): _____
Postal Code: _____
- 3.10 Telephone numbers:
 - Home: _____ Cell: _____
 - Business: _____ Fax: _____
 - Email: _____

4.0 I/WE HEARD ABOUT *ST MARTIN'S SCHOOL* FROM: _____

5.0 THIS SECTION MUST BE COMPLETED BY THE PERSON(S) RESPONSIBLE FOR PAYING THE CHILD'S FEES

I/we _____ / _____ hereby apply for a place at St Martin's School for my/our above mentioned son/daughter/ward, as a _____

(state: boarder day-student) commencing with: Term 1 Term 2 Term 3 in 20____ and I/we hereby acknowledge and agree:

5.1 to pay in advance at the commencement of each term all fees as laid down and as amended by the school from time to time;

“provided that:

5.1.1 where the year's tuition fees (ie for all three terms in the calendar year) are paid in full by the 31 January, and where there are no arrears, a discount of 4.5% on the full year's tuition will be awarded.

5.1.2 where two terms' tuition fees are paid in full by the first Friday of the Easter Term or Trinity Term and there are no arrears, a discount of 2.0% will be awarded.

Parents who wish to make use of options 1 or 2 need to have the full year's fees calculated accurately by the Credit Controller before making payment.

5.2 to pay as soon as accounts are rendered in respect of all charges incurred on behalf of my child;

5.3 that invoices for fees not paid promptly on the stipulated date of payment will attract interest on such invoice at the maximum permissible rate in terms of the National Credit Act, 2005 (and as amended), and I shall be liable for all default charges and collection costs, which are permitted to be recovered in terms of the National Credit Act, 2005, (and as amended).

5.4 to give **one full term's notice in writing** before withdrawing my child, and before any change from boarder to day-student status, or to pay a full term's fees in lieu of such notice;

5.5 that, being the person(s) responsible for the payment of fees to *St Martin's School* in respect of the child named above, hereby authorise the Headmaster or his designated representative to refer at any time to my/our banker(s) and/or a credit-rating agency for the purpose of obtaining a reference.

My/our banker(s) is/are: _____ Branch: _____

Account Number: _____ Account in the name of: _____

Signed at _____ (place), this _____ day of _____ (month)

of _____ (year).

Signature (father/guardian)

Signature (mother/guardian)

THANK YOU FOR YOUR CO-OPERATION

6.0 THE FOLLOWING MUST ACCOMPANY THIS APPLICATION FORM WHICH SHOULD BE FORWARDED TO THE SCHOOL

6.1 Non-refundable registration fee of **R100.00** High School and **R300.00** Prep School

6.2 Certified copy of child's birth certificate/identity document

6.3 Certified copies of school reports:

6.3.1 latest end-of-year report

6.3.2 latest end-of-term report

6.4 Certified copy of divorce order if child's parents are divorced.

6.5 Reference letter from previous school, if applicable

PHYSICAL ADDRESSES

St Martin's High School
114 Victoria Street
Rosettenville 2190
JOHANNESBURG

St Martin's Preparatory School
East Road
The Hill Extension 2197
JOHANNESBURG

POSTAL ADDRESSES

St Martin's High School
114 Victoria Street
Rosettenville 2190
JOHANNESBURG

St Martin's Preparatory School
Private Bag X05
Rosettenville 2130
JOHANNESBURG

CONTACT NUMBERS

St Martin's High School
Tel: (011) 435-0735/6
Fax: (011) 435-7303
E-mail: secretary@stmartin.co.za

St Martin's Preparatory School
Tel: (011) 435-0380/1
Fax: (011) 435-7398
E-mail: theprep@stmartinprep.co.za

Website: www.stmartin.co.za