

Raisethorpe Secondary School

635 Dr Chota Motala Road • Raisethorpe • Pietermaritzburg • 3201

203 387 4201 • Email: rss.school@gmail.com

APPLICATION FOR ADMISSION TO GRADE 8 (2026)

FOR OFFICIAL USE ONLY REF. NO.

OFFICIAL'S SIGNATURE

PLEASE COMPLETE ALL THE INFORMATION REQUESTED BELOW IN BLOCK PRINT.

| 1. DETAILS OF APPLICANT | | | | |
|-------------------------------------|--|--|--|--|
| CURRENT PRIMARY SCHOOL OF LEARNER | | | | |
| FULL NAME OF LEARNER | | | | |
| FULL NAME OF PARENT/GUARDIAN MAKING | | | | |
| THE APPLICATION | | | | |

2. PLEASE TAKE NOTE OF THE FOLLOWING:

- 2.1 This is only an **Application For Admission** to Raisethorpe Secondary School for Grade 8 in 2026.
- 2.2 YOU ARE ADVISED TO ALSO APPLY FOR ADMISSION TO OTHER SCHOOLS.
- 2.3 You are advised to keep a photocopy of this entire document before handing in the original to the school.
- 2.4 Incorrect information/Incomplete forms will render this application invalid.
- 2.5 THE CLOSING DATE FOR THE RETURN OF COMPLETED APPLICATION FORMS IS WEDNESDAY, 14 MAY 2025 AT 10H15. LATE APPLICATIONS WILL NOT BE CONSIDERED.

3. ESSENTIAL INFORMATION / REQUIREMENTS FOR ALL APPLICANTS

- 3.1 Please attach the following documents:
- CERTIFIED COPY of the IDENTITY DOCUMENT or BIRTH CERTIFICATE of learner.
- CERTIFIED COPY of the IDENTITY DOCUMENT of BOTH PARENTS/GUARDIANS.
- PROOF OF RESIDENCE. This must specify the full name of parent and residential address (e.g. ELECTRICITY/RATES BILL). Proof of RESIDENCE must be in the form of an <u>ORIGINAL DOCUMENT</u> (no photocopies).
- Original School Fees Statement as at 30 April 2025, from the current Primary School.
- CERTIFIED COPY of the 2025 Term 1 Report.
- Proof of employment of both parents or guardians.
- Certified copy of the latest salary advice of both parents or guardians.
- Proof of SASSA (If applicable)
- Certified copies must not be older than 3 months.
- 3.2 If **ANY** of the above documents are not submitted, your application will be **INCOMPLETE** and WILL NOT be considered.

- 3.3 THE COMPLETED FORMS AND DOCUMENTS MUST BE **RETURNED TO THE SCHOOL PERSONALLY**, FROM **MONDAY**, **12 MAY 2025 TO WEDNESDAY**, **14 MAY 2025 BETWEEN 08H15 AND 10H15**. THE RETURN OF FORMS WILL
 TAKE PLACE VIA THE **DR CHOTA MOTALA ROAD ENTRANCE** TO THE SCHOOL **DURING THE STIPULATED DATES AND TIMES INDICATED ABOVE**.
- 3.4 When you return the completed form, you will be given a **REFERENCE NUMBER.** Please quote this reference number in any query.
- 3.5 EMAILED APPLICATIONS WILL NOT BE ACCEPTED.

4. SELECTION PROCESS

4.1 Selection of learners will be based on the Admission Policy of the School.

5. NOTIFICATION OF SUCCESSFUL APPLICANTS

- 5.1 Only the parents of **SUCCESSFUL APPLICANTS** will be informed on Thursday, 19 June 2025 and Friday, 20 June 2025.
- 5.2 The parent of such applicants will have to call at school **PERSONALLY** to collect the **CONFIRMATION OF ACCEPTANCE FORM** from **Monday, 23 June 2025 to Wednesday, 25 June 2025 between 08h15 and 10h15.** The collection of forms will take place via the **DR CHOTA MOTALA ROAD** entrance to the school.
- 5.3. The confirmation of acceptance form must be completed and returned from Wednesday, 30 July 2025 to Friday, 01 August 2025 between 08h15 and 10h15. THE CLOSING DATE FOR THE RETURN OF THE CONFIRMATION OF ACCEPTANCE FORM IS FRIDAY, 01 AUGUST 2025.
- 5.4. FAILURE to COMPLY WITH ANY OF 5.2 and 5.3 OF THE ABOVE WILL RESULT IN THE CANCELLATION OF THE ADMISSION.
- 5.5. IF THE SCHOOL DOES NOT CONTACT YOU BY MONDAY, 23 JUNE 2025, THEN CONSIDER YOUR APPLICATION UNSUCCESSFUL. IN THIS REGARD YOU ARE STRONGLY ADVISED TO SEEK ADMISSION AT ANOTHER SCHOOL.

 All queries must be formulated in writing/email to the school by Friday,

27 June 2025. **Queries after 27 June 2025 will not be accepted.**

| 6. ACKNOWLED | GEMENT BY PARENT/GUA | RDIAN |
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| l, | , the parent/gu | |
| of | | wledge that I have read |
| the entire application form and hand conditions. | nave taken note of, and will | abide by all due dates |
| | | |
| NAME OF PARENT/GUARDIAN | SIGNATURE | DATE |

7. DETAILS OF PARENTS/GUARDIANS

PLEASE COMPLETE ALL THE INFORMATION REQUESTED BELOW IN BLOCK PRINT.

| DETAILS OF FATHER/GUARDIAN 1 | | | | | | |
|------------------------------|----------------------------------|-------------|-------------------------------------|-------------|--------------|--|
| SURNAME | | | FULL FIRST | | | |
| JOHNANIE | | | NAMES | | | |
| IDENTITY NO. | | | DATE OF BIRTH | | | |
| RELATIONSHIP | | | Note: Legal Guardians must be in | | | |
| TO LEARNER | | | possession of do | cumenta | tion stating | |
| | | | such. | | | |
| RESIDENTIAL ADDRESS | | | | | | |
| POSTAL | | | | | | |
| ADDRESS | | | | | | |
| LIONAE TEL NIO | | CELL | | WORK | | |
| HOME TEL. NO. | | NO. | | NO. | | |
| E-MAIL ADDRESS | | | | | | |
| OCCUPATION | | | EMPLOYER | | | |
| WORK ADDRESS | | | | | | |
| | DETAILS OF | МОТН | ER/GUARDIAN 2 | | | |
| CUDALANA | | | FULL FIRST | | | |
| SURNAME | | | NAMES | | | |
| IDENTITY NO. | | | DATE OF BIRTH | | | |
| | Note: Legal Guardians must be in | | | ust be in | | |
| RELATIONSHIP | | | possession of documentation stating | | | |
| TO LEARNER | such. Please attach supporting | | | orting | | |
| | | | documents. | | | |
| RESIDENTIAL | | | | | | |
| ADDRESS | | | | | | |
| POSTAL | | | | | | |
| ADDRESS | | | ı | | 1 | |
| HOME TEL. NO. | | CELL NO. | | WORK NO. | | |
| E-MAIL ADDRESS | | | | | | |
| OCCUPATION | | | EMPLOYER | | | |
| WORK ADDRESS | | | | · | | |
| DO YOU HAVE AN | Y CHILD/CHILDREN | CURR | ENTLY AT RAISETH | IORPE SE | CONDARY | |
| SCHOOL? IF YES, P | LEASE COMPLETE T | HE FO | LLOWING: | | | |
| 1 | NAME | | GRADE | AND DIV | ISION | |
| 1. | | | | | | |
| 2. | | | | | | |
| 3. | | | | | | |

| | FOR OFFICIAL PURPOSES ONLY | | | | | | |
|---|--|-----------|--|----|--|--|--|
| DOCUMENT | | | | NO | | | |
| 1. | 1. ID OF FATHER/GUARDIAN 1 | | | | | | |
| 2. | ID OF MOTHER/GUARDIAN | N 2 | | | | | |
| 3. | LEARNER'S BIRTH CERTIFIC | CATE | | | | | |
| 4. PROOF OF RESIDENCE | | | | | | | |
| 5. ORIGINAL SCHOOL FEES STATEMENT | | | | | | | |
| 6. | 2025 TERM 1 REPORT | | | | | | |
| 7. | 7. PROOF OF EMPLOYMENT OF BOTH PARENTS OR GUARDIANS. | | | | | | |
| 8. CERTIFIED COPY OF THE LATEST SALARY ADVICE OF BOTH PARENTS | | | | | | | |
| 9. PROOF OF SASSA (IF APPLICABLE) | | | | | | | |
| 10. COMPLETION OF DETAILS ON FORM | | | | | | | |
| 11. DUE DATES HAVE BEEN MET | | | | | | | |
| | 12. INCOMPLETE APPLICATION | | | | | | |
| 12. | INCOMI ELTE ALTERATION | COMMENTS | | | | | |
| | | COMMENTS | | | | | |
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| | | | | | | | |
| | | NAME | | | | | |
| | VERIFIED BY | SIGNATURE | | | | | |
| | | DATE | | | | | |
| | | NAME | | | | | |
| | CHECKED BY | SIGNATURE | | | | | |
| | | DATE | | | | | |