ROOSEVELT HIGH SCHOOL LEARNER INFORMATION FORM

2024



Thank you for your interest in Roosevelt High School!

Before completing this form, please take note of the following:

Grade 8 Applicants <u>must</u> register on the GDE platform: <u>www.gdeadmissions.go.za</u> and provide the GDE reference number at the bottom of this page.

This form must be completed by the Biological Parent or Legal Guardian who wishes to enroll their child into RHS.

Please scan this form and the required supporting documents and email to Ms. Moalosi in the Admissions Department (admissions@roosevelthighschool.co.za); alternatively submit in person to the school.

Certain documents must be certified by a Commissioner of Oaths.

Enquiries: Ms Moalosi, Admissions Secretary admissions@roosevelthighschool.co.za or 0117824937 ext. 1

IN ORDER TO ENSURE THE CORRECT SUPPORTING DOCUMENTATION IS APPROVED:

- 1. Biological Parent: Self-explanatory. Proof required = UNABRIDGED BIRTH CERTIFICATE
- 2. Legal Guardian: Common Law concept of day-to-day control and care of a child, assigned by the High Court in accordance with the Children's Act 38 of 2005. Proof required = Court Order granting legal guardianship
- 3. Stepparent: Married to a Biological Parent. Proof required = Marriage Certificate

Should any of the documentation submitted be found fraudulent, RHS reserves the right to cancel the application.

INCOMPLETE APPLICATIONS WILL NOT BE ACCEPTED!

SCHOOL STAMP	
	ADMISSIONS NUMBER

		Provided
1	Learner: Recent head and shoulders photograph	11011404
2	Learner: Unabridged birth certificate (certified copy) - See page 3 for more details	
3	Learner: Copy of latest school report	
4	Parent Identification Documents:	
4a	Certified copy of Father's ID	
4b	Certified copy of Mother's ID	
4c	Certified copy of Legal Guardian's ID	
5	Death Certificate if a parent(s) is/are deceased (certified copy)	
6	Divorced/Separated Parents: A Copy of the divorce and maintenance agreement	
7	Proof of Home Address (Permanent residential address):	
7a	If you OWN the property: City of Johannesburg Municipality / utility bill (not older than 3 months)	
7b	If RENTING from an individual/private person: A copy of the valid lease agreement, plus a copy of the landlord's ID, & the property municipality bill (not older than 3 months)	
7c	If RENTING through an agent: a copy of the valid lease agreement, a letter of confirmation from the agent and a rental statement (not older than 3 months)	
8	Proof of Work Address for BOTH Parents/Guardians:	
8a	Business owners/ sole proprietors/self-employed: Sworn Affidavit	
8b	Letter from employer on an official company letterhead confirming employment - the physical address must be specified. <i>Alternatively,</i> a copy of the parent's latest payslip	
9	Legal Guardian - Provide the abovementioned documents PLUS:	
9a	Court Order granting legal guardianship	
10	Non-SA Citizens	
10a	Copy of Learner's Passport	
10b	Copy of Father's Passport	
10c	Copy of Mother's Passport	
10d	Current Study Permit	
10e	Visa	
10f	Parent's Work Permit	
11	Asylum Seeker / Refugee -Provide the above-mentioned documents PLUS:	
11a	A copy of the DHA's Asylum Seeker temporary permit or application for Permanent Residency	
11b	A Copy of a valid study permit	
12	Bank statement or Salary slip for the Debi Check App	

IMPORTANT NOTICE: A first instalment of R4 000.00 will be due and payable on receipt of your child's acceptance to Roosevelt High School. This amount will be credited to your child's school fee account.

SUPPORTING DOCUMENTATION

REQUIREMENTS FOR SOUTH AFRICAN CITIZENS & IMMIGRANTS

A. SOUTH AFRICAN CITIZENS (Applicants should be inpossession of a valid South African ID)

LEARNER

1. A certified copy of the learner's UNABRIDGED BIRTH CERTIFICATE.

OR

If you are in the process of applying for the unabridged birth certificate, the following may be provided in the interim: A certified copy of the learner's BIRTH CERTIFICATE in the case where both biological parents have completed the application form and submitted certified copies of their ID documents.

- 2. The learner's LATEST SCHOOL REPORT.
- 3. One recent IDsized PHOTO of the learner.

PARENT(S)/LEGAL GUARDIAN(S)/CAREGIVER(S)

- 1. Certified copies of the ID document of BOTH parents/legal guardians/caregivers.
- 2. In the case of a deceased parent/s, a certified copy of the DEATH certificate/s.
- 3. A certified copy of the COURT ORDER granting LEGAL GUARDIANSHIP/FOSTERSHIP to the parties of this application.
- 4. In the case of a CAREGIVER, a court order accompanied by copies of the biological parents' ID documents confirming this arrangement. (Should the applicant not be in possession of a court order; same MUST be obtained from the xxxx Magistrate Court.)
- 5. In the case of divorced or separated parents, a certified copy of the DIVORCE and MAINTENANCE AGREEMENT. (A maintenance agreement or divorce order cannot be enforced on a third party, being the school.)
- 6. Proof of PERMANENT RESIDENTIAL STREET ADDRESS (the most recent Rates and Taxes account not older than 3 months reflecting the PHYSICAL address, or the Deed of Sale complete with revenue stamp).
- 7. In the case of RENTING, a certified copy of the current Lease Agreement (valid for a period of 8 months from date of this application), a letter from the Landlord together with their ID document and the Rates and Taxes account of the rented property which is not older than 3 months.
- 8. In the case of divorce or separation, BOTH parents need to provide a certified copy of proof of their respective PERMANENT RESIDENTIAL STREET ADDRESSES.
- 9. Proof of PERMANENT WORK ADDRESS (both Parents/Legal Guardians/Caregivers). For example: letter of confirmation on company letterhead, letter of appointment, or a salary slip which contains the company's physical address. Business owners who cannot provide evidence of a physical address for their place of employment must complete the SWORN AFFIDAVIT provided on page 15 of this form.
- 10. SA CITIZENS who have been out of SA for more than *one* (1) year must provide the Learner's and BOTH Parents' passports showing all border entries and exits.

B. NON-SOUTH AFRICAN CITIZENS (Applicants without a valid South African ID)

NB: Please provide ALL the original documentation and valid passports.

No expired documentation will be accepted.

Admission of non-South African citizens to Roosevelt High School will be governed by the terms of the Immigration Act No. 13 of 2002, Immigration Regulation dated 22 May 2014 Section 12(1)(h):

- No learner will be admitted to Roosevelt High School, unless he/she is in possession of a valid study visa issued bythe Department
 of Home Affairs for the duration of the learner's studies at Roosevelt High School.
- Interms of the condition of a study visa, parents must pay the compulsory annual school fees, annually and in full, <u>in a</u>dvance. Neither exemption nor any payment dispensations may be considered, as this contravenes the conditions ofthe study visa.

LEARNER

- 1. A certified copy of the learner's BIRTH CERTIFICATE.
- 2. Valid PASSPORT.
- 3. Valid STUDYVISA.
- 4. The learner's LATEST SCHOOL REPORT.
- 5. One recent IDsized PHOTO of the learner.

PARENT(S)/LEGAL GUARDIAN(S)/CAREGIVER(S)

- 1. Certified copies of the Valid Passport of BOTH Parents/Legal Guardians/Caregivers.
- 2. In the case of a deceased parent/s, a certified copy of the **DEATH** certificate/s.
- 3. A certified copy of the COURT ORDER granting LEGAL GUARDIANSHIP/FOSTERSHIP to the parties of this application.
- 4. In the case of a **CAREGIVER**, a court order accompanied by copies of the biological parents' valid passports confirming this arrangement. (Should the applicant not be in possession of a court order; same MUST be obtained from the **Randburg Magistrate Court.**)
- 5. In the case of divorced or separated parents, a certified copy of the **DIVORCE and MAINTENANCE AGREEMENT.** (A maintenance agreement or divorce order cannot be enforced on a third part, being the school.)
- 6. Certified copies of the Valid Work Visa of BOTH Parents/Legal Guardians/Caregivers.
- 7. Proof of **PERMANENT WORK ADDRESS** (both Parents/Legal Guardians/Caregivers). For example: letter of confirmation on company letterhead, letter of appointment, or a salary slip which contains the company 's physical address. Business owners who cannot provide evidence of a physical address for their place of employment must complete the SWORN AFFIDAVIT provided on page 16 ofthis form.
- 8. Proof of **PERMANENT RESIDENTIAL STREET ADDRESS** (the most recent Rates and Taxes account not older than 3 months reflecting the PHYSICAL address, orthe Deed of Sale complete with revenue stamp).
- 9. In the case of **RENTING**, a certified copy of the current Lease Agreement (valid for a period of 8 months from date of this application), a letter from the Landlord together with their ID document and the Rates and Taxes account of the rented property which is not older than 3 months.
- 10. In the case of divorce or separation, BOTH parents need to provide a certified copy of proof of their respective **PERMANENT RESIDENTIAL STREETADDRESSES.**
- 11. Asylum seeker: Documentation from Home Affairs -temporary/permanent permit.

Important Notice: In terms of the Immigration Act No. 13 of 2002 Regulation, dated 22 May 2014, Section 12(1)(a): The annual school fee amount will be due and payable on confirmation of your child's acceptance to Roosevelt High School, in order to facilitate the learner's application for a valid study visa at Roosevelt High School.



ENROLMENT FORM - 2024

PLEASE COMPLETE WITH A BLACK PEN
DO YOU HAVE ANY LEARNERS CURRENTLY/PREVIOUSLY IN THIS SCHOOL?

Yes		N
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Name of other learner(s) : _____ DATE: 31 JAN 2022

LEARNER INFORMATION	OFFICE USE ONLY	
LEARNER		
Full names:	Family code: Waiting list: Number on waiting list:	
Surname:	Register class:	
Preferred name:	Admission number: Transfer card:	
Date of birth:	Report card:	
ID number:	Birth certificate:	
Nationality: RSA Other	FAMILY INFORMATION	
Religious denomination:	Family status: Both parents Single parent - Unmarried	
Gender: Male Female	Foster care Childrens home Single parent - Divorced	
Ethnic group:	Other Re-composed Widow/Widower	
Home language:	Parents deceased: Mother Father None	
Learner's language preference:	Wouler 1 auter 1 vone	
Dexterity:	LEARNER HEALTH INFORMATION	
Learner mobile number:	Chronic diseases:	
Learner e-mail address:	Allergies:	
Admission date:	Medication:	
Grade in 2023 :	MEDICAL AID INFORMATION	
Years in grade for 2023 :	Name:	
Years in phase for 2023 :		
Pre-primary education attended: Formal Informal	Telephone number: Member number:	
Other:	Primary member:	
Degistered for easiel growth		
	FAMILY DOCTOR INFORMATION	
Receives social grant: Yes No	Name:	
Benefit from school nutrition program: Yes No Do	Telephone number:	
you want to apply for hostel residence: Yes No	Business address:	
Name of hostel:		
	INFORMATION OF PREVIOUS SCHOOL/PLAY GROUP/NURSERY	
Method of transport:	First registration of learner in Gauteng:	
Taxi/Bus registration number:		
Name of driver:	10010	
Contact number:	If yes, in which Province/Country:	
NEXT OF KIN INFORMATION	Previous school	
Name:	Telephone Number	
Contact number:	Address	
Alternative contact number:	Province	
Relation:	Highest grade in previous school	
	Reason for leaving the school	

BIOLOGICAL PARENT / LEGAL GUARDIAN 1 INFORMATION	Destal address	
Title:	Postal address:	
Full names:		
Surname:		
Initials:	Occupation status: Own Emplo	oyer Professional
Preferred name:	Own Emplo	oyer Non-Professional
ID number:	House wife	Part time
Home language:	Contract w	
Communication preference: SMS E-mail Mail	Contract w	orker Pensioner
By hand	Student	Temporary
Language preference:	Full time	Unemployed
Mobile number:	Occupation:	
Home tel:	Employer:	
Fax:	Work telephone number:	
E-mail:	Employer physical address:	
Residential address:		
	Is the learner living with this parent?	es No
BIOLOGICAL PARENT / LEGAL GUARDIAN 2 INFORMATION		
Title:	Postal address:	
Full names:		
Surname:		
Initials:	Occupation status: Own Emplo	oyer Professional
Preferred name:		
ID number:	Own Emplo	oyer Non-Professional
Home language:	House wife	Part time
Communication preference: SMS E-mail Mail	Contract w	orker Pensioner
By hand	Student	Temporary
	Full time	Unemployed
Language preference:	Occupation:	Onemployed
Mobile number:		
Home tel:	Employer:	
Fax:	Work telephone number:	
E-mail:	Employer physical address:	
Residential address:		
	Is the learner living with this parent?	es No
DECLARATION BY PARENT / GUARDIAN		
	ne of Parent / Guardian) hereby declare that the	
in this form is true and just and that I, by way of my signature hereunde representative to control and confirm any of the details supplied. I am away		
be liable to a criminal offence.	re that should any information supplied be found	not to be true, I may
		not to be true, I may

ACCOUNTABLE PERSON'S INFORMATION	DATE: 31 JAN 2022
Biological Parent 1	Biological Parent 2 Other
Only if 'Other', please o	complete section A or B below:
A) INDIVIDUAL	B) COMPANY / CLOSED CORPORATION / TRUST
Title:	Title:
Full names:	Name:
Surname:	Registration number:
Initials:	Language preference:
Preferred name:	Contact number:
ID number:	Fax number:
Home language:	Business address:
Communication preference: SMS E-mail Mail	
By ha d	
Language preference:	Postal address:
Mobile number:	
Telephone number:	
Fax number:	BANKING DETAILS
E-mail:	Bank:
Residential address:	Branch:
	Branch code:
	Account type: Cheque Transmission Savings
Postal address:	Bank account number:
	Account holder:
Postal Code:	

DATE: 31 JAN 2022

CONTRACT WITH SCHOOL WITH REGARDS TO PAYMENT Agreement between Roosevelt High School and (Name of parent / guardian) with regards to the payment of school fees. 1. Roosevelt High School is a Section 21 Public School and may raise school fees in terms of the South African School Act (Act No. 84 of 1996) and the National Educating Policy Act (Act No. 27 of 1996) - National norms and standards of School Funding. 2. As a parent/guardian you are liable to pay school fees determined in terms of Section 39 of the South African Schools Act, unless or to the extent that you have been exempted from payment in terms of the said Act. 3. Even though a court has determined that another person is liable to pay the prescribed school fees, as may be included in divorce settlements orders, and / or any other appropriate court order, it remains the responsibility of all persons who meet the definition of "parent" in the South African Schools Act, to pay school fees and all "parents" are jointly and severally liable for the payment of all school fees that are charged or will be charged by the school in respect of a particular learner. 4. Payment of school fees to Roosevelt High School will be made as follows:) (Please tick the applicable block with a cross) A F II payment (Once-off) on or before the last date as determined during the annual parent meeting. Payment B over 10 months. ○ Iternative arrangements will be made with the School in writing at my own responsibility and initiative. 5. I/We are aware of the application process for exemption of school fees for 2023 and if exemption is required, we will complete the relevant application form 6. Should you wish to appeal against a decision of the Governing body regarding the exemption from payment of school fees, you can do so at the Head of Department from the Department of Education who will at all times ensure compliance to the mentioned Acts and are obliged to follow proper legal procedures to protect the rights of both you as a parent and that of the School Governing Body. 7. Should payments of school fees be in arrears, I shall be accountable for the payment of fees that may arise in the effort to collect the fees on an attorney and client scale. 8. If I am in arrears with payment of school fees, I will be responsible for paying the costs incurred to collect them on an attorney and client scale. 9. I choose the following address as my domicilium citandi et executandi for delivery or serving of any notices or pleadings. Residential address (Not a postal address): 10.1 / We the parents / guardian of undertake to honour the agreement as set out above. Date: __ Signature of Parent / Guardian: ____ PERMISSION / CONSENT TO TAKE PART IN ALL ORGANISED ACADEMIC, SPORT AND CULTURE ACTIVITIES 1. I, parent / guardian of hereby give permission that he/she may participate in all

- 1. I, parent / guardian of ______hereby give permission that he/she may participate in all academic, sport and culture activities presented by the school in an organised manner. To participate in tests conducted by the school support team with the object of improvement in school work and to identify other problems.
- 2. I grant permission that my child may be transported by a public bus company approved by the school management. If there is only a small group of learners that needs to be transported, parents / teachers with valid drivers licences may be asked to transport them.
- 3. I accept that all reasonable precautions will be taken for the safety and wellbeing of my child and that I will be held responsible for the payment of the medical and / or hospital fees if enforced upon, in case of an injury which cannot be ascribed to the responsible personnel's coarse negligence.
- 4. I hereby delegate my powers as parent / guardian to the Principal of the school or representative if medical or surgical treatment may be needed for my child. As far as I know, he/she is physically able to participate in any organised activities and resides in good health.
- 5. I confirm that all medical information supplied in the Learner Information section of this form is accurate and complete. This information may be used in case of an emergency.
- ${\bf 6.}\ \ {\bf I}\ {\bf undertake}\ {\bf to}\ {\bf inform}\ {\bf the}\ {\bf school}\ {\bf if}\ {\bf any}\ {\bf of}\ {\bf the}\ {\bf above}\ {\bf information}\ {\bf may}\ {\bf change}.$
- 7. I undertake to support my child to obey the Code of Conduct and the disciplinary system of Roosevelt High School as included in the Policy of the school.
- 8. I hereby confirm that the school is allowed to use imagery of my child in any publication, in any format.

9. I hereby grant permission that all necessary notices ma	ly be send to my email address:	
Signature of Parent / Guardian:	Date:	

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