



# HARVEST CHRISTIAN SCHOOL

## APPLICATION FORM

[PLEASE ENSURE THE PAGES ARE COMPLETE BEFORE SUBMITTING]

### A CHRISTIAN SCHOOL FOR CHRISTIAN FAMILIES

#### LEARNER INFORMATION

Surname						Gender						
Name/s												
Identity number					D.O.B.							
Residential address												
Current school and grade												
Application for grade			Passport No. if immigrant:									
Family structure:	Married		Separated		Divorced		Single		Widowed		Living together	
Applicant is		out of		children in the family.								
Are any siblings enrolled at Harvest?												
Name current Sport / Culture involvement:												
Has your child any learning difficulties/ disabilities? <i>Please state them</i>												
Should any learning difficulties be identified by our school, would you agree to your child being referred to an educational psychologist at our request?						Enter parent's ID as consent.						
Has your child repeated any grade?					State the grade:							
Religion												
Name of Church:												
<b>To be completed by children 12 years and older</b>												
<p><b>Harvest Christian School is part of Harvest Christian Fellowship. Our goal is that every learner in our school will be confident and enthusiastic in their relationship with Jesus Christ. It is important that our teachings at school are supported at home. Please answer the following questions:</b></p>												
Are you confident now in your own heart that you have eternal life?												
What did you do to have this confidence?												
Citizenship	RSA		Other:									
Race and home language												
<b>PARENT (1)</b>	<i>(Please indicate)</i>		<b>FATHER</b>		<b>MOTHER</b>		<b>GUARDIAN</b>					
Surname												
Name/s												
Identity Number					D.O.B.							
Residential address												
Postal address												
Occupation												
Name of employer												
Address												

Contact numbers	H		W		Cell	
	email					
Religion						
Name of Church:						
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Are you confident now in your own heart that you have eternal life?						
What did you do to have this confidence?						
Name of your pastor/spiritual leader.						
Are you involved in your church?			How?			
Do you as an intermediate family take part in cultural sacrifices to the ancestors, during weddings and funerals?						
Will you support us in requesting your children to learn Bible verses every week?						
Have you read our Statement of Faith?						
Do you fully accept our Statement of Faith?						
Please note that it is compulsory for every student to attend assembly every Monday, as well as Bible Education and discipleship periods. I accept that Assembly, Bible Education and Discipleship will be compulsory for every child and that they will be taught according to our Charismatic Evangelical ethos (refer to Statement of Faith).						
Citizenship		RSA		Other:		
Race and home language						
Signature						
<b>PARENT (2)</b>	<i>(Please indicate)</i>		<b>MOTHER</b>	<b>STEP-PARENT</b>	<b>GUARDIAN</b>	
Surname						
Name/s						
Identity Number					D.O.B	
Residential address						
Postal address						
Occupation						
Name of employer						
Address						
Contact numbers	H		W		Cell	
	email					
Religion						
Name of Church:						

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Signature			
Citizenship	RSA		Other: <input type="text"/>
Race and home language			

**EMERGENCY CONTACT**

Name			
Relationship to learner			
Contact numbers	H <input type="text"/>	W <input type="text"/>	Cell <input type="text"/>

**MEDICAL DETAILS**

Medical Fund	<input type="text"/>	Fund No.	<input type="text"/>
Principal Member	<input type="text"/>		
Family Doctor	<input type="text"/>	Tel. No.	<input type="text"/>
Illnesses/allergies	<input type="text"/>		

**INCOME DETAILS**

Father	<input type="text"/>	Mother	<input type="text"/>
Combined	<input type="text"/>		

**FINANCIAL DETAILS**

Bank	<input type="text"/>		
Branch name	<input type="text"/>		
Branch code	<input type="text"/>		
Account Number	<input type="text"/>		
Person liable for school fees	Mr/Mrs	<input type="text"/>	
	ID nr.	<input type="text"/>	<input type="text"/>
Have you ever been declared financially insolvent?	<input type="text"/>	<input type="text"/>	
Have you been summonsed for bad debt in the last 6 years?	<input type="text"/>	<input type="text"/>	

## ACADEMIC RECORD OF THE LEARNER

	Excellent		Good		Average		Failed	
Comments:								
GENERAL INFORMATION								
Has the learner ever been asked to leave a school?								
If yes, please supply details								
How did you hear about Harvest Christian School?								
Your reasons for selecting Harvest Christian School:								
1								
2								
3								

(Right of Admission Reserved)

### **AGREEMENT** - *Please read this clause before signing*

1. I/We, the parents, have read the school information and materials furnished and agree to our child submitting to the academic programme, disciplinary regulations and all other requirements for his/her education and development, instituted by the Administration and carried out by the Principal and staff at Harvest Christian School.
2. I/We, the parents, agree with the Statement of Faith and agree to allow our child to be instructed in it. We will ensure that our child abides by the principles upheld in the Statement of Faith at all times.
3. My child will abide by the Pupil's Code of Conduct and the School Rules and Dress Code Policies.

### **DECLARATION**

We declare that the contents of the Application form are true and accurate

***Please enter your ID/Passport number if you cannot create a digital signature. This will serve as binding consent.***

Signature  
Father/Guardian

ID/Passport number

Signature  
Mother/Guardian

ID/Passport number

Date