



PLG SCHOOLS APPLICATION

PLG Springs Academy, 4 Lang Laagte Road, Strubenvale Ext 2, Springs
 Tel: 010 443 0817
 Email: springs@plgschools.co.za

PLEASE PRINT CLEARLY IN BLOCK LETTERS, USING A BLACK PEN

The following documents MUST accompany this application:

NB

- Study visa /permanent residence permit (if pupil not born in SA)
- Applicant's birth certificate
- Applicant's latest year-end report
- Applicant's most recent term report
- Copy of vaccination card
- Copies of ID documents of both parents
- Consent form to do Credit Check
- Proof of Residence
- Proof of Payment Administration Fee

Name of Academy applying for:

Date of Proposed Entry _____

Year _____

Grade: _____

Age upon Entry: _____

Personal Details of Prospective Pupil:

Surname: _____ First Names: _____
(UNDERLINE NAME USED AT HOME)

Date of Birth: _____ Place of Birth: _____ Male / Female: _____ Day Scholar/Boarder: _____
(DD,MM,YYYY)

Nationality: _____ Home Language: _____ Present School: _____ Tel: _____

ID No on Birth Certificate: _____ Religious Affiliation & Denomination: _____

Siblings at the school Yes / No

1. _____ Grade _____

2. _____ Grade _____

Personal Details of Father/Mother/Guardian(s):

Name: _____
(FATHER / GUARDIAN)

ID No: _____

Home Address: _____

Home Phone No: _____

Home Fax No: _____

Cell No: _____

E-Mail: _____

Postal Address: _____

Send correspondence to: Postal E-Mail

Occupation: _____

Company Name: _____

Work Address: _____

Work Phone No: _____

Work Fax No: _____

Name: _____
(MOTHER / GUARDIAN)

ID No: _____

Home Address: _____

Home Phone No: _____

Home Fax No: _____

Cell No: _____

E-Mail: _____

Postal Address: _____

Send correspondence to: Postal E-Mail

Occupation: _____

Company Name: _____

Work Address: _____

Work Phone No: _____

Work Fax No: _____

Parents Marital Status: Married Divorced
 Widowed Single

With whom does the applicant live? _____

Is there any family or other association with PLG Schools? _____

Parent's Remarks (Special requests or information):

How and where did you find out about PLG Schools? Please circle:

- 1. Friends/family/colleague
- 2. Internet/website/face book
- 3. Newspaper
- 4. Child magazine
- 5. Outdoor signage
- 6. Other

Details of Person(s) To Be Responsible for Paying School Fees and Supplemental Costs:

I/We have no principle objection to the School contacting our applicant's current school and/or the bank and/or a credit bureau for the purposes of obtaining a financial reference during the admissions process.

Father's Details:	Mother's Details:
Name: _____	Name: _____
Nationality: _____	Nationality: _____
ID No: _____	ID No: _____
Bank: _____	Bank: _____
Bank Acc No: _____	Bank Acc No: _____
Signed: _____	Signed: _____
Date: _____	Date: _____

- Please take careful note of payment and cancellation terms and conditions on all applicable forms.
 - Debit-order payment monthly in advance on or before the 1st day of each month X 12 months.
 - Internet payment monthly in advance on or before the 1st day of each month X 12 months.
 - DEBIT-ORDER FORM COMPLETION
- Please complete a debit-order form and deliver it by hand to the school admin office, this is our preferred method of payment.
- PLEASE USE YOUR PUPIL CODE AS REFERENCE FOR ALL PAYMENTS.

Please ensure that copies of the applicant's most recent year-end report, their latest interim report, their birth certificate, copy of immunisation card and copies of parents ID documents are attached.

BANKING DETAILS

Account Name PLG Springs Academy
Bank Absa Bank
Branch Code 632005
Account Number 409-343-8581

Emergency Contact Details / Medical Aid Details

Name of Person _____
Contact Number _____
Medical Aid _____
Medical Aid # _____

For Office Use Only

Admission Checks	DATA CAPTURED:
Admission Form _____	
Academic Acceptance _____	
Finance Check _____	

Notes
