



TIGER KLOOF EDUCATIONAL INSTITUTION (NPO)

"Creating new paths in learning, doing and serving"

REG NO: 92/02301/08

2017 APPLICATION FOR ADMISSION TO THE HOSTEL BY CURRENT LEARNERS

- *This form must be completed by parents/guardians and handed in at the school reception*
- *Parents will be notified, in writing whether or not your child has been accepted*

PARTICULARS OF PUPIL:

Surname : _____

Name : _____

Date of Birth : _____

Present Grade : _____

PARTICULARS OF PERSON RESPONSIBLE FOR FEES:

Relation to child : _____

Surname : _____

First Name : _____

ID number : _____

Cell number : _____

Employer : _____

Work Tel number : _____

Street Address : _____

: _____

Postal Address : _____

: _____

Work Address : _____

: _____

(PLEASE COMPLETE BACK OF PAGE)

DECLARATION OF AFFORDABILITY OF HOSTEL FEES

The parent/s and/ or legal guardian hereby acknowledge that he/she can afford the Hostel fees.

YES	NO
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All fees for the current year will be paid in full by 1 November

YES	NO
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REASON FOR APPLYING TO THE HOSTEL

FULL NAME OF PARENT (printed) _____

SIGNATURE: _____ DATE: _____

Tiger Kloof Educational Institution is a private entity under the jurisdiction of the Board of Directors. The Director reserves the right, at his discretion and on behalf of the Institution.

OFFICE USE ONLY

If approved, as from: _____ BURSARY NEEDED:

YES	NO
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DIRECTOR SIGN: _____ HOSTEL MANAGER SIGN: _____

If not approved, comment: _____

FINANCE AKNOWLEDGE: _____ *TO BE RETURNED TO SECRETARY FOR FILE*

SECRETARY AKNOWLEDGE: _____