

Date Returned: \_\_\_\_\_

Admission No. \_\_\_\_\_



DALE COLLEGE BOYS' HIGH SCHOOL

Queens Road

KING WILLIAM'S TOWN

5600

Tel: 043 6421968.

Email: admissions@dalecollege.co.za

Photos

**2023 APPLICATION FORM**

Admission as a (mark with X)	8	9	10	11
Admission as a (mark with X)	Day Scholar	X	Boarder	X
Current School				

**LEARNER DETAILS:**

Surname		Name	
Date of Birth		Identity Number	
Home Language		Race	
Citizenship			
Residential Address			
	Code:		
Cell Number			
Email			
Does this learner have a brother at Dale?	Current Grade:	<u>or</u> Year Matriculated:	Name:

**PARENT / GUARDIAN 1 DETAILS:** Title: Mr  Mrs  Ms  Other

Surname			
Name			
Identity Number			
Cell Number			
Residential Address			
	Code:		
Email			
Account Payer	Yes   X   No   X   Indicate with (X)		
Occupation			
Employer			
Signature	Date:		

**PARENT / GUARDIAN 2 DETAILS:** Title: Mr  Mrs  Ms  Other

Surname		
Name		
Identity Number		
Cell Number		
Residential Address		
		Code:
Email		
Account Payer	Yes   X   No   X   Indicate with (X)	
Occupation		
Employer		
Signature	Date:	

**LEARNER MEDICAL AID DETAILS:**

Main Member	
Medical Aid Name	
Medical Aid Number	
ID Number	
Name of Dr	
Medical Conditions	

**EMERGENCY CONTACT DETAILS:**

Emergency Contact Name	
Emergency Contact Surname	
Contact No	
Relationship to Learner	

**FEES:**

The Annual School Fees for 2022 are R29 120.00.

Hostel Fees are R50 880.00. Fees for 2023 have not been confirmed yet.

School Fees and Hostel Fees are payable annually, quarterly or monthly.

**IF NOT PARENT/S, DETAILS OF PERSON RESPONSIBLE FOR FEES/ACCOUNT**

Title:        Mr     Mrs     Ms     Other

Surname			
Name			
Identity Number			
Relation to learner			
Cell Number			
Residential Address			
		Code:	
Marital Status:	Married   X   Single   X   Divorced   X   Re-Married   X   Widowed   X		
Occupation			
Employer			
Email			
Signature:	Date:		

**Personal Motivation for acceptance:**

**(To be completed by the learner applying for place at Dale College)**

Please motivate briefly why you would like to attend Dale College:

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**Extra mural participation:**

Do you participate in a school sport or cultural programme?

 Yes No

If NO specify a reason. <hr/> <hr/> <hr/>
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Sport: (Please specify summer and winter sports:)

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Cultural:

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Leadership positions held:

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Academic Achievements:

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## 2023 APPLICATION FORMS

NO FEE CHARGE FOR APPLICATION

CLOSING DATE: 23 MAY 2022.

RETURN APPLICATION FORMS TO DALE COLLEGE

(In person or via email: [admissions@dalecollege.co.za](mailto:admissions@dalecollege.co.za))

**NB:** Please note that **ONLY** applications that have been completed **in full** and with all the required documents will be accepted and processed. Completing this form does not necessarily mean that the learner has been accepted into the school.

All applications will be considered. Applications do not work on a 1<sup>st</sup> come 1<sup>st</sup> serve basis.

### LEARNER:

- 2 current ID size photographs of your son.
- Certified copy of the learner's Birth Certificate followed by the Unabridged Birth Certificate or Identity document. (*Foreigners - Study Permit / Permanent Residence*).

### REPORTS:

- December 2021.
- March 2022.

**Please submit the June, September and December 2022 reports when they become available these may influence the application process.**

### BIOLOGICAL PARENTS/GUARDIAN:

- Certified** copies of Both parent's / Guardian Identity documents, and person responsible for fees.
- Proof of residence of Both parent's / Guardian and person responsible for fees. (*Municipal account or Affidavit*) **Must be stamped.**
- Copy of death certificate in the event of a deceased parent.
- Proof of legal guardianship if guardian takes responsibility for the learner.
- Copies of Medical Aid card. (*Both Sides*)

### PROOF OF INCOME: Please submit ONE of the following.

- If employed, a certified copy of recent salary slip of Both parents/Guardian and person responsible for fees.
- A letter from both parents'/Guardians, and person responsible for fees, employers confirming your employment and reflecting your employer's contact details, address etc.
- If unemployed/self-employed, a letter from the Department of Labour indicating your last date of employment.
- If self-employed, a copy of the last audited Income Statement or a letter from SARS indicating your income or a **Three Month Bank Statement.**

### NOTE:

### PLEASE BE SURE TO APPLY AT OTHER SCHOOLS AS WELL.

Accepted applications will be notified via email. R2 000 deposit to be paid by date stipulated on acceptance letter. Proof of R2 000 receipt to be handed into Secretary's office.

Late applications will be placed on the waiting list and will **ONLY be processed if space becomes available.**

**Please notify the school if you decide not to send your son to Dale College so that his space may be given to another learner on the waiting list.**

**Grades 10 – 11 (Limited space available).**

**Late applications will be expected to pay a full months school fees before admission.**



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Queens Road.  
KING WILLIAM'S TOWN  
5600  
Tel: 043 6421968

### CONFIDENTIAL LEARNER REPORT

THIS FORM MUST BE COMPLETED BY YOUR SON'S CURRENT SCHOOL, AND EMAILED  
DIRECTLY TO: [admissions@dalecollege.co.za](mailto:admissions@dalecollege.co.za)

**SECTION A: Must be completed by Principal or Class Teacher. (Please tick relevant box)**

ACADEMIC AVERAGE %	ACADEMIC ABILITY	Excellent	Very Good	Good	Satisfactory	Weak
80 + %	Linguistic Skill in English					
70 - 79 %	Comprehension skills					
60 - 69 %	Mathematical ability					
50 - 59 %	Insight and intuition					
40 - 49 %	Creativity					
Below 40 %	Initiative					

GENERAL	Excellent	Very Good	Good	Satisfactory	Weak
Attitude					
Respect					
Self-discipline					
Responsibility					
Social Adjustment					
Leadership Potential					
Parental Co-operation					

SPORTS PLAYED	TEAM / GROUP	CULTURAL ACTIVITIES

LEADERSHIP POSITION & ROLES

**SECTION C: FEES. Must be completed by School Bursar.**

<b>Annual School fees and Boarding fees</b>		<b>R</b>
PAID UP		
NOT PAID UP		
<b>COMMENTS:</b>		

**SECTION D: TESTIMONIAL OR RELEVANT COMMENT BY PRINCIPAL/CLASS TEACHER.**

**(Possibly include a character reference, special educational needs, comment on home circumstances, general health, any exceptional achievements, etc.).**

<b>RECOMMEND</b>		<b>PUPIL NOT RECOMMENDED</b>		

\_\_\_\_\_  
Name & Surname (Class Teacher)

\_\_\_\_\_  
Name & Surname (Principal)

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Date

SCHOOL STAMP