



LEADERS TODAY

290 Baard Road, Raslouw, Centurion 0157

admin@leaderstoday.co.za

Section 1: Application details

Grade applying for:

R ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐ 6 ☐ 7 ☐ 8 ☐ 9 ☐

Section 2: Learner Details

Surname															
Name/s as on birth certificate															
Preferred name															
ID number															
Date of birth	Y	Y	Y	Y	M	M	D	D							
Current age					Gender:		Male			Female					
Home language							2nd language								
Number of children in family							Position of child in family								
Nationality							Country of origin								
Immigration date	Y	Y	Y	Y	M	M	D	D							

Race: Asian ☐ African ☐ Coloured ☐ White ☐ Indian ☐

Resides with:	Parents		Guardian		
Person dropping learner at school (Grades R to 7):					
Name					
Relationship					
Person collecting learner from school (Grades R to 7):					
Name					
Relationship					

Section 3: For office use

Notes:	Approved	YES/NO	Family code	
	Date approved		Credit reference	
	Commencement date		Siblings	
	Grade/Class			



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Section 4: Aftercare

Will the learner require aftercare?	Yes	No		
Aftercare option:	Half day		Full day	Day visitor
Will the learner require holiday care?	Yes	No		

Section 5: Learner's education details

Current school					
Tel no.					
Last grade passed		Year		Grade/s repeated	
Has admission to any other school/sever been refused?				Yes	No

If yes, please state the reason below:

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Section 6: Learner's medical details

Family doctor

Name		Tel no.	
Address			

Medical aid

Name		Member no.	
Main member initials and surname			
Main member ID number			
Option			

Has the learner ever been treated for the following diseases?

TB		Epilepsy	
Asthma		Migraine	
Diabetes		Tonsils	

Has the learner ever had any of the following diseases?

German measles		Diphtheria	
Measles		COVID-19	
Chicken pox		Mumps	



Is the learner on any chronic medication? Please specify.

Does the learner have any allergies? Please specify.

Has the learner ever had any operations? Please specify.

Section 7: Learner's medical details - consent

In a critical medical situation, please bear in mind that there may not be time to refer to the learner's records. The school, therefore, reserves the right to utilise the quickest medical service available.

I, _____, being the parent/legal guardian of _____, hereby agree that a medical practitioner may provide emergency treatment as may be necessary.

Signature _____

Date

Y	Y	Y	Y	M	M	D	D
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Section 8: Necessary supporting documents

Important note: This application will only be processed if all fields are completed legibly, are signed, and all necessary supporting documents are attached.

Transfer card		Learner's vaccination card	
Final report card (once available)		Parents' ID's	
Latest report card		Learner's residence/study permit (if	
Learner's birth certificate		All sections completed & signed	



Section 9: Personal details of mother/guardian

Complete only if NOT the account holder, as referred to in section 12.

Title		Surname	
Full names as on ID			
ID number			
Relationship to learner		Marital Status	
Occupation		Employer	
Residential Address			
Cellphone number		Alternate number	
Email address			

Section 10: Personal details of father/guardian

Complete only if NOT the account holder, as referred to in section 12.

Title		Surname	
Full names as on ID			
ID number			
Relationship to learner		Marital Status	
Occupation		Employer	
Residential Address			
Cellphone number		Alternate number	
Email address			

Section 11: Emergency contact detail (not parental)

Full names and surname	
Relationship	
Cellphone number	
Email address	



Section 12: Details – person responsible for account

Title		Surname	
Full names as on ID			
ID number			
Relationship to learner		Marital Status	
Occupation		Employer	
Residential Address			
Cellphone number		Alternate number	
Email address			

Section 13: Signature of parent, legal guardian, and/or account holder

We, the undersigned, _____ hereby certify that the information provided in this application for admission is complete and accurate. We acknowledge that enrolment is subject to, inter alia, signing a learner admission contract that contains the detailed terms, conditions and requirements for admission.

We hereby authorise the school and/or any of its associates to conduct any credit enquiries on us as may be necessary from time to time.

We acknowledge that we have read the school-specific policies and school rules and will accept an offer of placement for our child at the school in accordance with the terms and conditions as set out therein. These documents, as amended from time to time, are available on the official school website.

NB: The signatures of the account holder and both parents and/or legal guardians are required where applicable.

 Signature of account holder

Date

Y	Y	Y	Y	M	M	D	D
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 Signature of father/legal guardian

Date

Y	Y	Y	Y	M	M	D	D
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 Signature of mother/legal guardian

Date

Y	Y	Y	Y	M	M	D	D
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