# ST. THERESA'S CONVENT SCHOOL

*Address: 14 Riversdale Steet Coronationville, Johannesburg*
*Contact No: 0114777611*
*Email Address: admin@stcschool.co.za*


## St Theresa's Application for Admission- 2027

Thank you for considering St Theresa's Convent School for your child's educational journey, we look forward to discussing the admission process with you.

We require the following to accompany the admission forms to be able to successfully register your child for 2027:

1. ***Proof of Payment of R750.00 non-refundable registration fee***
2. ***Certified ID documents of both Parents***
3. ***Certified Birth certificate of the Learner***
4. ***Copy of Immunization / Clinic card***
5. ***Latest Report Card and Transfer Card***
6. ***Proof of residence (not older than 3 months)***
7. ***Proof of Employment (not older than 3 months)***
8. ***Two Colour ID-sized photos of the Learner***

Kindly take note of other important information below.

***Placement details for 2027***

***Grade 00-*** Age three turning four by 30 June 2027
***Grade R-*** Age four turning five by 30 June 2027
***Grade 1-*** Age five turning six by 30 June 2027

Please note that for Grade 1 Applications, the Learner must graduate from **Grade R** in **2026**. Upon application we require a latest report card, at the end of the 2026 academic year, a graduation certificate or final report card will be required to finalise the application process.

***Bank Details for St Theresa's Convent School:***

Bank: Standard Bank
Branch Code: 005205
Account No: 002541955
***Please use child's name and surname as reference.***

Please ensure that all sections of the Application Forms are completed accurately and kindly scan and submit them to us via email.

All information provided will be treated as confidential and processed in accordance with applicable legislation, including the Protection of Personal Information Act, 2013 (POPIA).

Should you have any further questions, please don't hesitate to contact us.

Yours sincerely,
**Admissions Team**

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AFFIX A RECENT COLOUR PHOTO OF THE LEARNER

## SECTION A: LEARNER INFORMATION

**Personal Details**

Surname: _____

First Names: _____

Date of Birth: _____/___/___ (YEAR/MM/DD)

ID Number: | | | | | | | | | | | | | |

Passport Number: | | | | | | | | | | | | | |

Ethnic Group (FOR GDE STATISTICAL PURPOSES ONLY) _____

Gender: □ Male □ Female

Citizenship: □ South African □ Other _____

If not South African, Study Permit/Visa attached: □ Yes □ No

Home Language: _____ Additional Language _____

Religious Denomination: _____

Residential Address: _____

_____Code: _____

Current Grade: _____

Current School Name: _____

Address: _____

Contact Number: _____

Email Address: _____

Reason for Transfer: _____

Are there any siblings attending St Theresa's Convent School □ Yes □ No

| **Name** | **Grade** |
|---|---|
| | |
| | |
| | |

Where did you hear about our school?

_____

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## SECTION B: MEDICAL INFORMATION

Medical Aid Name: _____

Medical Aid Number: _____

Main Member: _____

Family Doctor: _____Contact Number: _____

Does the learner suffer from any allergies? □ Yes □ No

If yes, provide details: _____

Does the learner have any chronic medical condition? □ Yes □ No

If yes, provide details: _____

Is the learner currently taking medication? □ Yes □ No

If yes, provide details: _____

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## SECTION C: PARENT / GUARDIAN DETAILS

**Parent / Guardian 1**
(Responsible for School Fees)

Title: _____Surname: _____ First Names: _____

Relationship to Learner: _____

ID Number: | | | | | | | | | | | | | |

Residential Address: _____

_____Code: _____

Employer: _____

Occupation: _____Years with Employer: _____

Work Address: _____

_____Code: _____

Cell Number: _____ Work Number: _____

Email Address (PLEASE PRINT CLEARLY) _____

Signature: _____ Date: _____/___/___ (YEAR/MM/DD)

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**Parent / Guardian 2**

Title: _____Surname: _____ First Names: _____

Relationship to Learner: _____

ID Number: | | | | | | | | | | | | | |

Residential Address:

_____

_____Code: _____

Employer: _____

Occupation: _____Years with Employer: _____

Work Address: _____

_____Code: _____

Cell Number: _____ Work Number: _____

Email Address (PLEASE PRINT CLEARLY) _____

Signature: _____ Date: _____/___/___ (YEAR/MM/DD)

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**SECTION D: EMERGENCY CONTACTS**

**In case of an emergency where the school is unable to contact parents, please provide the name of an additional contact person.**

Name and Surname: _____

Relationship to Learner: _____

Cell Number: _____ Alternative Number: _____

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## SECTION E: DECLARATIONS AND CONSENT

I/We declare that:

- The information provided in this application is true and correct.
- We are the lawful parent(s) / guardian(s) of the learner.
- We undertake to inform the school immediately of any changes to contact details, custody arrangements, medical information or other relevant information.
- We undertake to support the School's Code of Conduct, policies and procedures.
- We understand that admission is subject to approval by the school.

**Medical Consent**

I/We authorise the principal or authorised representative of the school to obtain emergency medical treatment for my/our child if I/we cannot be contacted.

Parent/Guardian Initials: _____

**Media Consent**

I/We grant permission for photographs and videos of my/our child to be used for:

- School Newsletter
- School Website
- School Social Media Platforms
- Marketing Material

Parent/Guardian Initials: _____

**POPIA Consent**

I/We consent to St Theresa's Convent School collecting, storing, processing and using personal information for educational, administrative, communication, legal and financial purposes related to the learner's enrolment and attendance at the school.

Parent/Guardian Initials: _____

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## SECTION F: FINANCIAL RESPONSIBILITY AGREEMENT

The undersigned parent(s)/guardian(s) agree that:

1. School fees are payable in advance and in accordance with the annual fee schedule issued by the school.
2. The registration fee is non-refundable.
3. One full school term's written notice is required when withdrawing a learner from the school. Failing such notice, one term's fees will be payable in lieu of notice.

4. Accounts not settled within the prescribed period may be handed over for collection, and all related legal and collection costs shall be for the account of the parent/guardian.
5. Annual school fees and levies are reviewed and may be adjusted by the school.
6. The parent(s)/guardian(s) remain jointly and severally liable for all fees owing to the school.
7. The school may conduct credit enquiries where necessary to assess financial obligations and recover outstanding debt in accordance with applicable legislation.

I/We acknowledge that I/we have read and understood the School's Financial Policy.

Parent/Guardian 1 Signature: _____ Date: _____/___/___ (YEAR/MM/DD)

Parent/Guardian 2 Signature: _____ Date: _____/___/___ (YEAR/MM/DD)

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**SECTION G: CATHOLIC ETHOS ACKNOWLEDGEMENT**

St Theresa's Convent School is an Independent Catholic School.

I/We understand and accept that:

- The school operates according to Catholic values and traditions.
- Learners are expected to attend Religious Education classes, liturgical celebrations, Masses, retreats and other activities forming part of the school programme.
- Respect for the Catholic ethos of the school is always required.

Parent/Guardian 1 Initials: _____ Parent/Guardian 2 Initials: _____

**SECTION H: PARENT/GUARDIAN DECLARATION**

I/We hereby certify that:

- All information contained in this application is true and complete.
- I/We have read and understood the school's admission requirements, policies, financial obligations and code of conduct.
- I/We agree to abide by all School policies and procedures.
- I/We agree to keep the school updated when there are changes to My/Our contact information, address or place of work.

Parent/Guardian 1 Name: _____

Signature: _____ Date: _____/___/___ (YEAR/MM/DD)

Parent/Guardian 2 Name: _____

Signature: _____ Date: _____/___/___ (YEAR/MM/DD)

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**OFFICE USE ONLY**

Application Received: □ **Yes** □ **No**

Study Permit/ VISA Received: □ **Yes** □ **No** □ **Not Applicable**

Registration Fee Received: □ **Yes** □ **No**

Approved: □ **Yes** □ **No** _____

Grade Placement: _____

Admission Number: _____

Admin Signature: _____ Date: _____/___/___ (YEAR/MM/DD)

Deputy Principal: _____ Date: _____/___/___ (YEAR/MM/DD)