



Erf 1366, Ondangaura, Cimbebasia | www.amazingkids.edu.na | marketing@amazingkids.edu.na +264 61 304 974 / +264 81 803 4897

# **Pre-primary Application form**

# Complete this form fully and return with the necessary documents attached to it.

# **STUDENT INFORMATION**

Surname	Middle Name(s)		
First Name	Preferred name	Preferred name	
Date of birth	Age	Grade enrolled for	Year
Home language	Other languages		
Citizenship			
Student's cell no.	Email address		
Doctor's name	Telephone		

# PLEASE ONLY TICK WHERE APPLICABLE

Does your child suffer from /attend/ receive any of the following?

Physical disabilities	Yes	No
Allergies	Yes	No
Chronic diseases	Yes	No
Occupational Therapy	Yes	No
Speech Therapy	Yes	No
Remedial Therapy	Yes	No
Any defined syndrome, e.g Dyslexia, ADHD, etc.	Yes	No
Has your child ever repeated a grade?	Yes	No

If YES to any of the above, kindly give full details: (Attach relevant reports)

Is there any other information about your child that the school/staff should be aware of?

#### NB: Non-Namibians to apply for study permit with the Ministry of Home Affairs

# **PREVIOUS SCHOOL INFORMATION**

Name of last school attended		Grade completed
City/Town	Telephone number	

#### **SUBJECTS**

English 1st language	Compulsory
Mathematics	Compulsory
Environmental Studies	Compulsory
Bible Studies	Compulsory

NON-PROMOTION SUBJECTS		
Physical Education	Compulsory	
Art & Pottery	Compulsory	
Computer studies	Compulsory	
Life Skills	Compulsory	
Music	Compulsory	

Telephone number

# FATHER/GUARDIAN INFORMATION

Father's Surname	Name		
Title ID/Passp	ID/Passport no		
Street Address			
Postal Address			
Telephone (home) (work)	(Cell)		
E-mail address			
Marital Status: Single Married	Divorced Estranged Widowed		
Employer	Designation		
Religion	Denomination		

# **MOTHER/GUARDIAN INFORMATION**

Mother's Surname	Name
Title ID/Passp	ort no
Street Address	
Postal Address	
Telephone (Home) (Work)	Cell
E-mail address	
Marital Status: Single Married	Divorced Estranged Widowed
Employer	Designation
Religion	Denomination

# **DETAILS OF PERSON RESPONSIBLE FOR FEES**

Cell

I accept the responsibility for all the financial obligations and understand that failure to pay by the end of every month will automatically result in being handed over to debt collectors/lawyers and I also accept that no refunds will be given to me on school fees paid upfront if I fail to give one month's notice should I decide to take my child to another school. I will be liable for all legal costs.

#### **IN CASE OF EMERGENCY**

Name and contact number of a family/friend to be contacted in emergencies when parents are not available:

Name		Relationship	
Telephone (Home)	(Work)		Cell

# PLEASE TAKE NOTE OF THE FOLLOWING:

- 1. Our school uniform can be purchased at Boundary Wholesalers corner of Dalton & Planck street in Southern Industry (Tel. 061-220 342) or Karseboom in Ausspanplatz, Independence Avenue (Tel. 061-226 491). Detailed information can be obtained from the School Code of Conduct.
- 2. Should I/We intend to withdraw my/our child (ren) from the school, I/we need to give at least 1 month's written notice to the school. If I/we do not comply with this agreement, I /we will be kept liable for additional charges for the final month.
- 3. NO REFUNDS ON REGISTRATION AND TUITION FEES
- 4. I/we will be obliged to sign the school oath as well as an annual indemnity form to allow my/our child/ren to go on school outings.

We/I hereby confirm that the above mentioned information is correct.

Signed at Windhoek this day of	20
Father/Guardian	
Mother/Guardian	

# **OFFICIAL USE ONLY**

- 1. Information Verification : Completed Form
- 2. Certified Documents: Three Copies Of
- BirthCertificates
- 3. Intake Test Paid & Written
- 4. English Results
- 5. Mathematics Results

6. Intake Interviews: Parent/S & Learner/S			
	6.1. Intake Test Results To Parents /		
	Guardians		
6.2. Registration Fees Paid			
6.3. Educational Contract			
7. Uploaded On Management System			
8.	Class Allocation		
9.	Parent Orientation		