



14 Farraday Road, Queendustria, Komani, 5320 045 858 8044 colsec@getaheadproject.org

CLOSING DATE:  REGISTRATION FEE:				this a	Please note: this application is not a guarantee of acceptance.							
APPLICATION FORM GRADE 8 AND 9  A non-refundable administration fee of R50 is required for each application received between 01 May and 30 September 2023. After that, the administration fee for applications is R250. This fee is waived for students currently enrolled at QGAP and WGAP.  FOR OFFICE USE ONLY												
				TOK OF	TICL OSE ONLY							
Date of Admission: Deposit (amount particle) Receipt No: Account No: Rep Code: Recurring Charges:					Accept	Applying F ed: ional Head	)	/ES	NO	_		
1. STUDENT INFORI	MATION											
Surname:					Date of Birth:							
First Names:					Home Languag	ge:						
Gender:					Cell Number:							
Home Tel Number:					D Number:							
Physical Address (whe	ere the stud	ient s	tays duri	ng the	school term):							
Emergency Number:												
Email Address:												
Student Resides with	 (please tick	:):	Mother		Father		Both		Guardian			
Number of Children in Family: Position of C			n of Ch	nild in Family:		Do you re	eceive a ch	nild grant?	YES	NO		
			Both	Mode of Tra	ansport:							

Religion:			
Details of siblings at QGAP or WGA	AP:		
Name:	Surname:		Grade:
	<u>,                                     </u>		<u>,                                      </u>
2. PARENT INFORMATION			
DETAIL	FATHER	MOTHER	GUARDIAN
Title:			
Surname:			
Full Name:			
ID Number:			
Dhysical Address:			
Physical Address:			
Call the sea New York			
Cellphone Number:			
Work Telephone Number: Email Address:			
Occupation:			
Name of Employer: Name of Medical Aid:			
Member Number:			
Main Member of Medical Aid:			
Is the child covered on this plan:			
Marital Status:			
3. HOSTEL (if the child stays in a	a hostel during the school t	term nlease complete the fo	llowina)
3. <u>HOSTEE</u> (I) the clina stays in t	inoster during the sensor t	erm, preuse comprete the jo	
Name of Hostel:			
Name and Surname of Hostel Owr	ner:		
Dhysical Address of Hestal			
Physical Address of Hostel:			
Telephone Number:		Cellphone Number:	
· · ·	1	•	

## 4. EMERGENCY CONTACT NUMBERS (an adult who can be contacted during school hours)

(The emergency contact should not be the father, mother or guardian. It should be a friend or relative who works in or around Queenstown, Ezibeleni or Mlungisi.)

Surname:					First Na	imes:					
Physical Address:											
,											
Cellphone Number:											
5. STUDENT TRANS	<u>PORT</u>										
How will the child get t	o and from	the schoo	ol (mark	with an	<b>X</b> ):						
	ather		rdian		Bus		Taxi		ther		
Name of bus/taxi driv		Guu	Talan			e Number			tire:		
	···				- Соприон		<u> </u>				
6. SCHOOLS PREVIO	DUSLY ATT	ENDED									
Most recent school atte	ended:										
Address of school:					Date Enrolled:						
					Date Left:						
					Tel N	umber:					
		Principal's Name:									
Other schools attended	l:						•				
NAME OF SCHOOL					DATE EN	NROLLED		DATE LEFT			
7. STUDENT MEDIC	CAL INFORM	MATION									
Medical Aid Number:											
Medical Aid Name:					Doctor's	Name:					
Main Member:					Doctor's Address:						
Any Medical Condition	ns:						I				
Special Problems Regu	uiring Cour	selling.									
Special Problems Requiring Counselling:					Doctor's Tel Number:						
Dexterity of Student:	Left Ha	nded		Righ	t Handed			Ambidextrous			

## THE FOLLOWING DOCUMENTS TO ACCOMPANY THE APPLICATION.

(Please ensure documents are attached in correct sequence order from 1 to 6.)

No applications will be considered unless accompanying documents are attached!

Get Ahead will not make any photocopies. Incomplete applications will not be considered.

		Х
		when attached
1.	Copy of Child's <b>Unabridged Birth Certificate</b> (this should reflect parent's details).*	
2.	Copy of latest <b>School Report.</b>	
3.	Copy of Mother's/Guardian's ID.	
4.	Copy of Father's/Guardian's ID.	
5.	Copy of both parents'/guardian's most recent <b>Pay Slips</b> (salary advices).	
6.	Copy of both sides of <b>Medical Aid</b> card.	
7.	Proof of Residence	

I hereby declare that to the best of my knowledge, the above information supplied is accurate and correct.									
Signature of Parent/Guardian: Date:									
I read the attachment (Fee Collection Process) and understand the consequences for non-fee payment.									
Signature of Parent/Guardian:		Date:							
I request that the debit order be actioned for January 2024.									
If no, I understand that should I fail to meet my school fee commitment, I am then obligated to action the debit order, or risk contract suspension or termination.									
Signature of Parent/Guardian:		Date:				•	•		

SUBJECT CHOICES  GRADE 8 AND 9							
The following subjects are compulsory:							
1. English 2. Xhosa or Afrikaans* 3. Mathematics							
4. Natural Sciences							
5. Technology							
<ul><li>6. Social Sciences</li><li>7. Economic Management Sciences</li><li>8. Life Orientation</li></ul>							
* There are only 35 spaces available for Afrikaans per grade in the GET phase.							

<sup>\*(</sup>Please attach a copy of receipt from Home Affairs to your child's present birth certificate, should your child not have an Unabridged Birth Certificate.)

## GET AHEAD COLLEGE Where every child feels worthy and validated.



**OPERATIONAL HEAD** 

TREVOR HARBOTTLE | 045 585 8044 | tharbottle@getaheadproject.org Farraday Road, Queendustria, Komani, 5320

Dear Parents/Guardians

## **FEE COLLECTION PROCESS**

Thank you for your ongoing support of Get Ahead College. We appreciate you choosing our school and invite you to be a part of your child's educational journey.

An increasing problem for independent schools around the country is bad debt from unpaid school fees; Get Ahead is no different in this regard. We are always grateful to the parents who do pay punctually, understanding the commitment that requires. However, in order to try and reduce this burden of non-payment of fees on the school and to maintain the quality service we provide we are instituting the process outlined below which will be in effect from 01 January 2022.

Please may I urge all parents to communicate with the bursar on a regular basis should they experience a problem paying their fees. We would rather work with you to make arrangements than be forced to follow legal proceedings.

Should a debit order bounce or fees not be received upon the due date, the following will occur:

- A Whatsapp/SMS/Email and/or telephonic reminder will be sent notifying you of what is owing.
- After 1 month: a further whatsapp/sms/email and/or telephonic reminder.
- After 2 months (or two bounced debit orders): you may be given notice that you will be handed over if your fees are not settled.
- After 3 months: you may be handed over to lawyers for the legal collection of any monies still owing.
- After 3 months: you may receive notice to provide representation on why your contract should not be terminated at the next appropriate date if your fees are not settled.
- After 4 months: should payment not be received by the date indicated on the letter above, and no mitigating circumstances presented, your contract may be terminated with a month's notice or a month and part thereof, depending where the end of term falls.

Further, the preferred method of payment is by electronic transfer (EFT). Kindly note that fees deposited by cash, which attract a bank deposit fee, which fee will be recoverable from you by Get Ahead.

We now have a convenient debit order system in place. We request that each parent complete the debit order form and indicate whether we must action it for January, or keep it on file, in case it is required at a later date.

If all parents honour their agreement to pay their school fees on time, or contact the bursar to make arrangements should an unforeseen circumstance arise, then the consequences of not paying can be avoided.

We look forward to your support in partnering with us to educate your child by paying us promptly.

Kind regards

Trevor Harbottle **GAC Operational Head**