

APPLICATION FOR BOARDING**MOTSWEDI HIGH SCHOOL EMIS NO: 600101458**

Stand No: 10362 Sekgwakgwe Section

MOTSWEDI

2870

Telephone: +27(0) 18 365 1675**FAX:****YEAR:** _____

NOTE: Application forms for Boarding must be accompanied by a Non-Refundable R 50.00. Completion of this form does not guarantee admission.

Full name(s) and Surname of the learner (Block Capitals)

Date Of Birth

Grade

Term no

Tell us why you want to come to the hostel

Contact Details

Home Address

Code

Province

Country

Postal Address (If applicable)

Code

Province

Country

Contact Details In Emergency

Mother's Full Names

Mother's E-mail

Mother's Phone Number

(Home) :
(Work) :
(Cell) :

Father's Full Names

Father's E-mail

Father's Phone Number

(Home) :
(Work) :
(Cell) :**Medical History**

Allergies

Medical Aid Fund

Membership Number

Please Note: When a place is offered to the applicant such offer is conditional upon signature by the parent(s)/guardian(s) of the conditions of admission which are current at the time of acceptance.

Signature (Father / Mother / Guardian) : _____ Date : _____