

Little Marbles Montessori



Dedicated to Excellence

Attach photo of
child here

SCHOOL APPLICATION FORM

Date of Application:		Registration fee R250 Paid:	yes	no
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CHILD'S PARTICULARS								
First name(s):		Surname:						
Date of Birth:		Age		Gender				
Name child is known by:		Position in family:		Total children in family:				
Is there a sibling at our school:		Name of sibling:						
Home Language:		Religion:						
If home language is not English please rank English language ability: (1 being poor & 5 excellent)				1	2	3	4	5
Nationality:		Who does the child live with:						

DOCUMENTS TO BE SUBMITTED WITH APPLICATION FORM		
Document	Parent attached	Office Use Only
1. Signed & Completed Application form		
2. Copy of your Child's inoculation certificate (clinic card)		
3. Copy of your child's birth certificate		
4. Professional reports where applicable (Speech/ play therapy etc)		
5. Copy of ID of person responsible for paying fees & parents/ guardians		
6. Proof of residence		

MOTHER/ LEGAL GUARDIAN PARTICULARS*Please notify the school immediately of any changes to your personal details.*

First Name(s):		Surname:	
ID No:		Marital Status:	Nationality:
Home Address:			
Postal Address:			
Occupation		Company Name:	
Work Address:			
Tel (H):		Tel(W):	Cell:
E-mail		Car Reg:	

FATHER/ LEGAL GUARDIAN PARTICULARS*Please notify the school immediately of any changes to your personal details.*

First Name(s):		Surname:	
ID No:		Marital Status:	Nationality:
Home Address:			
Postal Address:			
Occupation		Company Name:	
Work Address:			
Tel (H):		Tel(W):	Cell:
E-mail		Car Reg:	

I, _____, state that the information provided is correct to the best of my knowledge. I have read and agree with the Constitution of the School as well as agree to abide by the Code of Conduct.

Signature of parent/ guardian

Date