



PRESTIGE COLLEGE HAMMANSKRAAL

APPLICATION FOR:

PO Box 1455, Hammanskraal, 0400
Tel: + 27 (0) 12 711 8600 Fax: +27 (0) 12 711 8645/6
E-mail: admin@prestigecol.co.za / admission@prestigecol.co.za

School ☐

Residence ☐

Grade in 2026 ☐

Year ☐

ID PHOTO X2
(Hard Copies)

DATE

ADMISSION NUMBER

LEARNER INFORMATION

Full names: _____

Surname: _____

Preferred name: _____

Date of birth: _____

ID Number:

Nationality: RSA ☐ Other ☐

Religious denomination: _____

Gender: Male ☐ Female ☐

Ethnic group: _____

Home Language: _____

Learner's language preference: _____

Learner mobile number: _____

Learner e-mail address: _____

Admission date:

Grade in 2026: _____

Years in Grade for 2026: _____

Years in phase for 2026: _____

Pre-primary education attended: _____

Method of transport: Private ☐ Taxi ☐ Bus ☐

Taxi / Bus registration number: _____

Name of driver: _____

Contact number: _____

SIBLING INFORMATION

Do you have any learners currently/previously in this school? ☐ YES ☐ NO

Name of other learners(s): _____

BROTHERS AND SISTERS

| Name | Grade | Name of school |
|------|-------|----------------|
| 1. | | |
| 2. | | |
| 3. | | |

FAMILY INFORMATION

Family Status : Both parents ☐ Childrens home ☐
Single parent - ☐ Re-composed ☐
unmarried ☐ Widow/Widower ☐
Single parent - ☐ Other ☐
divorced ☐
Foster care ☐

Parents deceased : Mother ☐ Father ☐ None ☐

LEARNER MEDICAL INFORMATION

Chronic diseases: _____

Allergies: _____

Medication: _____

Previous operation: _____

MEDICAL AID INFORMATION

Medical aid name: _____

Telephone number: _____

Member number: _____

Primary member: _____

FAMILY DOCTOR INFORMATION

Name: _____

Telephone number: _____

Business address: _____

Have you had any of the following diseases/been treated for:

German measles ☐ Measles ☐ TB ☐ Diabetes ☐
Chicken pox ☐ Mumps ☐ Asthma ☐ Epilepsy ☐
Diphtheria ☐ Ulcer ☐ Migraine ☐
Tonsils ☐ Heart Disease ☐

NEXT OF KIN INFORMATION

Name: _____

Contact Number: _____

Alternative contact number: _____

Relation: _____

INFORMATION OF PREVIOUS SCHOOL/NURSERY

First registration of learner in Gauteng: ☐ YES ☐ NO

Learner attended school last year: ☐ YES ☐ NO

If yes, in which Province/Country: _____

Previous School: _____

Telephone number: _____

Address: _____

Highest grade in previous school: _____

Reason for leaving the school: _____

BIOLOGICAL PARENT / LEGAL GUARDIAN 1 INFORMATION

| | | | | | | | | |
|-----------------|-------------|---|--|----------|--|--|--|--|
| Full names: | | Title: | | Initials | | | | |
| Surname: | | ID/Passport no: | | | | | | |
| Preferred name: | | Communication preference: | <input type="checkbox"/> SMS <input type="checkbox"/> E-mail | | | | | |
| Home language: | | Home Address: | | | | | | |
| Postal address: | | | | | | | | |
| | Postal code | | | | | | | |
| Employer: | | | | | | | | |
| Occupation: | | Phone Home: | | | | | | |
| Work Address: | | Work: | | | | | | |
| | | Mobile: | | | | | | |
| | Postal code | E-mail Address: | | | | | | |
| | | | | | | | | |
| Signature: | | Is the learner living with this parent? | <input type="checkbox"/> YES <input type="checkbox"/> NO | | | | | |

BIOLOGICAL PARENT / LEGAL GUARDIAN 2 INFORMATION

| | | | | | | | | |
|-----------------|-------------|---|--|----------|--|--|--|--|
| Full names: | | Title: | | Initials | | | | |
| Surname: | | ID/Passport no: | | | | | | |
| Preferred name: | | Communication preference: | <input type="checkbox"/> SMS <input type="checkbox"/> E-mail | | | | | |
| Home language: | | Home Address: | | | | | | |
| Postal address: | | | | | | | | |
| | Postal code | | | | | | | |
| Employer: | | | | | | | | |
| Occupation: | | Phone Home: | | | | | | |
| Work Address: | | Work: | | | | | | |
| | | Mobile: | | | | | | |
| | Postal code | E-mail Address: | | | | | | |
| | | | | | | | | |
| Signature: | | Is the learner living with this parent? | <input type="checkbox"/> YES <input type="checkbox"/> NO | | | | | |

PERSON / COMPANY / CLOSED CORPORATION / TRUST RESPONSIBLE FOR ACCOUNT

| Fill this part in if individual person | | Fill this part in if company/corporation/trust | |
|--|--|--|--|
| Title: | | Title: | |
| Full names: | | Name: | |
| Surname: | | Registration No: | |
| Preferred name: | | Language preference: | |
| ID/Passport no: | | Contact no: | |
| Home language: | | Fax number: | |
| Language preference: | | Business address: | |
| Communication Preference: | <input type="checkbox"/> SMS <input type="checkbox"/> E-mail | | |
| Mobile no: | | | |
| Home no: | | Postal address | |
| E-mail address: | | | |
| Home address: | | | |
| | Postal Code | | |
| Postal Address: | | | |
| | Postal Code | | |

SUMMARY AGREEMENT BETWEEN PRESTIGE COLLEGE HAMMANSKRAAL AND THE UNDERSIGNED

Declaration and undertaking

I declare that the particulars furnished on this form to be true and correct, and I undertake to comply with the rules, regulations and decisions of the school, and any amendments thereto, which may be applicable to students and parents in general. I declare that I have perused the applicable school rules and policies and understand the contents thereof and accept it as binding on myself and the learner concerned.

School fees

I have read, understood and accept the financial policy of the school. I accept full responsibility for all amounts due to the school and I agree to pay the school fees strictly according to due dates. Failure which the account will be handed over to debt collectors. I understand that the school will take the necessary legal steps to recover any outstanding fees. I agree to give one calendar month's notice before removing my child from school. I undertake not to give notice later than October as November doesn't serve as a notice month.

I accept responsibility for the payment of fees for the above child before or on the seventh of each month:

- Bank payment ☐
Internet transfer ☐
D6 wallet payment ☐

No cash for school fees will be accepted on the premises.

Indemnity

1. I hereby give permission that the learner may participate in all academic, sport and cultural activities presented by the school in an organised manner.
2. I grant permission that my child may be transported by a public bus company approved by the school management. If there is only a small group of learners that need to be transported, parents/teachers with valid drivers licences may be asked to transport them.
3. I accept that all reasonable precautions will be taken for the safety and wellbeing of my child and that I will be held responsible for the payment of the medical and/or hospital fees if enforced upon, in case of an injury which cannot be ascribed to the gross negligence of the responsible staff.
4. I hereby delegate my powers as parent/guardian to the Principal of the school or representative if medical or surgical treatment may be needed for my child. As far as I know, he/she is physically able to participate in any organised activities and he/she resides in good health.
5. I confirm that all medical information supplied in the Learner Information section of this form is accurate and complete. This information may be used in case of an emergency.
6. I undertake to inform the school if any of the above information may change.
7. I undertake to support my child to obey the Code of Conduct and the disciplinary system of Prestige College as included in the Policy of the school.
8. I hereby confirm that the school is allowed to use imagery of my child in any official publication.

Prestige Values

I undertake to uphold the values of Hammanskraal Prestige College whenever I am involved in school related functions or activities. I will also be available to attend parents' meetings and functions to support the education of my child. I will respond timeously to letters, SMS's and calls made by the school.

Prestige College hereby undertakes to offer quality teaching and other services of a high standard, to the best of our ability.

Father/Legal Guardian 1:

Mother/Legal Guardian 2:

o.b.o Prestige College

Date : / /

Date : / /

Date : / /

**Please note that registration is only confirmed when the application has been authorized by the principal.
The applicant will receive a letter to confirm final admission to Prestige College Hammanskraal.**

PASTE COPY OF UNABRIDGED BIRTH CERTIFICATE AND ID IF OVER 16

PASTE COPY OF MOST RECENT REPORT HERE

PASTE CONFIDENTIAL ASSESSMENT FROM PREVIOUS SCHOOL HERE

FOREIGN STUDENTS: PASTE COPY OF STUDY PERMIT HERE



LEARNER QUESTIONNAIRE

ONLY TO BE COMPLETED BY LEARNER NOT FOR PARENTS

NAME & SURNAME: _____

BOY GIRL

AGE

Grade
in 2026

I promise to be completely honest and truthful in answering all the questions as asked. I understand that if the information given here is found to be false, my registration will immediately be canceled and no refunds will be made.

Date : / /

Signature: Applicant

PLEASE ANSWER THE FOLLOWING QUESTIONS TRUTHFULLY

| | |
|---|--|
| 1. What is the name of your present school? And the name of your Principal? | |
| 2. Why do you want to leave the school? | |
| 3. What do you like most about your present school? | |
| 4. Who is you most loved teacher and why? | |
| 5. Which teacher do you really dislike and why? | |
| 6. What do you not appreciate at all at your present school? | |
| 7. Have you ever been in trouble in your present or previous schools? What type of trouble? What was the outcome? | |
| 8. Have you ever been suspended or expelled from a previous school? | |
| 9. Where did you hear about Prestige College? | |
| 10. Why did you apply at Prestige College? | |
| 11. What do you expect to experience at Prestige College? | |
| 12. Which other schools have you applied to? | |
| 13. What is your favourite subject? What was your last % achieved? | |
| 14. Are you acquainted in using the Internet? What do you use it for? | |
| 15. What have you done extra at your previous school; what other activities were you involved in? | |
| 16. Do you participate in sport? Which codes? Any special achievements? | |
| 17. Can you sing, play a musical instrument? | |

PLEASE ANSWER THE FOLLOWING QUESTIONS TRUTHFULLY

Do you think you have any musical or art talent that is just not developed yet?

18. Who do you live with?

19. If you do not live with your parents, why not?

20. Who is the person closest to you that you really trust?

21. Do you know anything about the values of Prestige College? What?

22. What values do you have? Why are they important to you?

Write a paragraph about: "The day that I was in big trouble..."

Write a paragraph about something you are very proud of.

Write a few sentences to convince the authorities at Prestige College why you should be allowed or given a chance to register at Prestige College.



SUBJECT CHOICE FORM

GRADE 7 - 9

LEARNER'S DETAILS

| | | | |
|-----------|--|-----------------|--|
| Name : | | Grade in 2026 : | |
| Surname : | | | |

SECTION A: COMPULSARY SUBJECTS

1. English Home Language
2. Mathematics
3. Natural Science
4. Human Social Science
5. Economic and Management Science
6. Life Orientation
7. Technology
8. Creative Arts

SECTION B: ELECTIVES

INDICATE YOUR SUBJECT CHOICE FOR 2026 BY MAKING A CROSS IN THE BOXES PROVIDED

CHOOSE ONE FIRST ADDITIONAL LANGUAGE :

AFRIKAANS

☐

SETSWANA

☐

Learners who have not had any of the above languages in their previous school, may have to write a language proficiency test to determine the best subject. A recommendation will be made by the admissions office.

ANY COMBINATION OR SUBJECT MAY BE CANCELLED IF THERE ARE NOT AT LEAST 15 LEARNERS TAKING THE SUBJECT

Student's Signature :

Parent's Signature :

Date :

ANY SPECIAL REMARK / ARRANGEMENT MUST BE SIGNED BY THE PRINCIPAL



SUBJECT CHOICE FORM

GRADE 10

LEARNER'S DETAILS

| | | | |
|-----------|--|----------------|--|
| Name : | | Grade in 2026: | |
| Surname : | | | |

SECTION A: LINE 1 AND 2 ARE COMPULSORY SUBJECTS

CHOOSE 1 SUBJECT FROM LINE 3 AND 4 AND WRITE IN THE BLOCKS PROVIDED

1. English Home Language
2. Life Orientation
3. Mathematics **OR** Mathematical Literacy
4. Afrikaans **OR** Setswana as a 1st Additional Language

SECTION B: ELECTIVES

CHOOSE 3 SUBJECTS FROM THE LIST BELOW AND WRITE IN THE BLOCKS PROVIDED

1. Physical Science
2. Life Science
3. Geography
4. Accounting
5. Business Studies
6. History
7. Drama
8. Design
9. Tourism

Please see conditions for combinations as attached

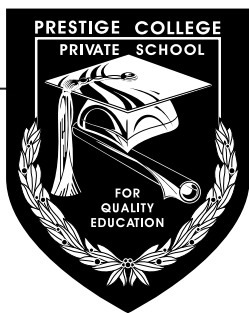
ANY COMBINATION OR SUBJECT MAY BE CANCELLED IF THERE ARE NOT AT LEAST 15 LEARNERS TAKING THE SUBJECT

Student's Signature :

Parent's Signature :

Date :

ANY SPECIAL REMARK / ARRANGEMENT MUST BE SIGNED BY THE PRINCIPAL



BACKGROUND INFORMATION

TO BE COMPLETED BY BOTH PARENTS / GUARDIANS

PLEASE ANSWER THE FOLLOWING QUESTIONS TRUTHFULLY

| | |
|---|--|
| 1. Your preferred contact number | |
| 2. Has your child ever failed a grade? If yes, which grade? | |
| 3. Which grade did he/she repeat, when? | |
| 4. How do you know about Prestige College? | |
| 5. What is your first impression of the school? | |
| 6. Why do you want to bring your child to this school? | |
| 7. Tell me about the school where you have been? | |
| 8. Why do you want to leave that school? | |
| 9. Have you ever been involved with any disciplinary action that was taken against your child? Tell us the story. | |
| 10. Give us a brief summary of the home background where your child grows up. | |
| 11. Who live together in your house? Other family members, siblings etc.? | |
| 12. Who is the disciplinarian of the child concerned? | |
| 13. Who shall be dealing with disciplinary action steps taken by the school should there be any? | |
| 14. If divorced, who has legal custody of the child? | |
| 15. Who is paying the child's school fees? | |
| 16. Any special circumstances we should be aware of? (Eg. Adopted child?) | |
| 17. Was your child ever involved in some traumatic experience? (Accident/robbery etc.) | |
| 18. How are you involved in your child's school activities and learning? | |

PASTE COPY OF BOTH PARENTS/GUARDIANS ID'S HERE

PASTE COPY OF MEDICAL AID CARD HERE (BOTH SIDES)

**ATTACH THREE (3) MONTH'S BANK STATEMENTS OF PERSON
RESPONSIBLE FOR ACCOUNT HERE**

PASTE PROOF OF RESIDENCE OF PARENTS HERE



RESIDENCE-LIFE INTERVIEW

TO BE COMPLETED BY PARENT, LEARNER AND INTERVIEWER

Date of Interview: _____ Interviewer: _____

PLEASE ANSWER THE FOLLOWING QUESTIONS TRUTHFULLY

| | |
|--|--|
| 1. Has the learner been in a boarding facility previously? Where? When? | |
| 2. Have you received and read the Residence Rules and Information Book? | |
| 3. Do you understand the correctional procedures? | |
| 4. Are you aware of the serious offenses which may lead to immediate suspension or expulsion from school? | |
| 5. Our gates lock at 17h00 and open at 6h00. Learners must be back on campus by 17h00 and all vehicles must be OFF CAMPUS by 17h30. No late-coming will be tolerated. Have you taken note of this rule? | |
| 6. Have you read the policy on Cell phone and laptops? The residence staff will accept no responsibility for lost / stolen / broken phones or computers. | |
| 7. Have you disclosed all medical information on the medical form? | |
| 8. Are there any special dietary requirements that we should be aware of? | |
| 9. Do you accept and understand that we will not cater for allergies without a proper Pathologist's report? | |
| 10. Do you understand and accept that we can't cater for individual likes and dislikes regarding food? | |
| 11. Have you received and read the list of necessities and have you taken note of the fact that you have to hand in 2 spare keys to the learner's guardian? | |
| 12. All items on the list of necessities must be marked. No clothing will be washed if the name does not appear clearly on it. Will you mark your child's clothes? | |
| 13. All requests for permission to leave the premises must be in written form (fax or e-mail) . All requests for permission must be submitted to us at least 1 day in advance . Will you be able to communicate the necessary permission to us in writing? | |
| 14. Do you understand and accept that it is your responsibility to replenish your child's basic needs and check his/her clothing during Exeat Week-ends? | |
| 15. Parents must contact us to arrange for learners to stay on the campus during Exeat Weekends. We will assume your child goes home and no food will be prepared if no arrangements are made. Do you understand | |

| | |
|---|--|
| that it is YOUR responsibility to make these arrangements with the guardian and that the school will not be held accountable if your child leaves the campus to visit friends etc. without your knowledge if you fail to make the necessary arrangements during exeat weekends? | |
| 16. Learners who leave the campus without the necessary permission may be expelled. Will you ensure that your child understands the seriousness of such an offence? | |
| 17. Do you understand and accept that Prestige College is a Christian school? We do not belong to any denomination but believe in Biblical values and expect all children to subscribe to our value system and to attend church services. | |
| 18. Will you take full responsibility to notify us of any changes in your contact details? | |
| 19. Do you accept the Residence Staff is in loco parentis with you with regards to your child and his/her disciplinary issues? | |
| 20. Do you understand and accept that your child cannot be accommodated and fed if you do not honour your financial responsibilities? | |
| 21. Do you understand and accept that NO ARRANGEMENTS will be made for outstanding boarding fees? | |
| 22. Do you accept all requirements and directives in the interview as legal and binding? | |
| 23. Do you accept that the attached Code of Conduct is a binding wa- greement between your child and Prestige College residence and staff and will you inculcate the values therein in your child? | |
| 24. Do you agree and accept that this contract is binding for the FULL DURATION of your child's stay in Prestige College Residence? | |

PLEASE READ THE CODE OF CONDUCT BELOW AND SIGN IT

It is an honour and a privilege to be a boarder at Prestige College and therefore I promise to adhere to the following code of conduct at all times:

1. To honour God and His creation.
2. To respect staff and fellow boarders.
3. To make sure that I know and obey the rules of the residences.
4. To respect the property of the school and others.
5. Not to intrude upon the basic human rights of others.
6. To be punctual.
7. To cooperate with staff, prefects/monitors and other boarders.
8. To model the school values of respect, integrity, honesty and responsibility.
9. To honour my parents and represent them well at Prestige College.

Parent/Legal Guardian:

Learner:

Interviewer

Date : / /

Date : / /

Date : / /



CONTRACT AND UNDERTAKING

TO BE COMPLETED AND SIGNED BY PARENT AND LEARNER

I, The parent/guardian of the applicant mentioned in this document, hereby agree that I have received, read and understood the relevant documents as mentioned below. I undertake to abide by the rules and regulations of Prestige College and will teach my child to do the same.

I further understand that this school is an e-learning school and I therefore have to ensure that my child has the services of an electronic device, such as a Chromebook, applicable from grade 8 to 12. I also have to ascertain that this device is in a working condition at all times and carry to school in a safe way. I also understand that it is the responsibility of my child to look after this device as the school cannot take responsibility for such devices. All reasonable measures are taken and are in place at school such as cameras, IT Policy and rules to adhere to when in use in and out of class.

1. Value system
2. Parent contract
3. School General Code of Conduct
 - Uniform Policy
 - Financial Policy
 - Discipline
 - Drugs and Alcohol Policy
4. IT Policy
5. Subject choice Policy
6. Promotion requirements

Detailed school policies are available at school and on the school website
(www.prestigecol.co.za)

Parent/Legal Guardian:

Learner:

PRINT NAME: _____

PRINT NAME: _____

Signature: _____

Signature: _____

Date : / /

Date : / /

Please answer the following questions as required by the GDE and School Board for research purposes. All information will be treated with the highest confidentiality.

Number of children in this household

Distance from school

COMMUNICATION WITH APPLICANT

| Date | Number called/personal | Person spoke to | Conversation/request made | Admin staff responsible |
|------|------------------------|-----------------|---------------------------|-------------------------|
| | | | | |
| Date | Number called/personal | Person spoke to | Conversation/request made | Admin staff responsible |
| | | | | |
| Date | Number called/personal | Person spoke to | Conversation/request made | Admin staff responsible |
| | | | | |
| Date | Number called/personal | Person spoke to | Conversation/request made | Admin staff responsible |
| | | | | |



PRESTIGE COLLEGE HAMMANSKRAAL

APPLICATION DOCUMENTS RECEIVED

Grade:
Year:

CHECK LIST

LEARNER'S DETAIL

Name :

Surname :

LEARNER DOCUMENTS RECEIVED

(mark with X)

REMARKS

| | | | | |
|----|--|---------------------------------|----|----------------------|
| 1 | School application form | YES | NO | All details checked? |
| 2 | Most Recent School Report | YES | NO | |
| 3 | Most Recent Conduct Report | YES | NO | Age correct? |
| 4 | Unabridged Birth Certificate or Copy of ID if over 16 | YES | NO | |
| 5 | X2 recent ID photos | YES | NO | |
| 6 | Confidential Assessment form completed by present school | YES | NO | |
| 7 | Learner questionnaire completed | YES | NO | |
| 8 | Admission test attached | Please attach test to this form | | |
| 9 | Subject Choice form completed (Grade 7 - 10) | YES | NO | |
| | English | YES | NO | |
| | Maths | YES | NO | |
| | Afrikaans / Tswana | YES | NO | |
| 10 | Study permit needed? | YES | NO | |
| 11 | Boarding Questionnaire and interview completed? | YES | NO | |

AGE IN 2026

| Grade: | Age: | Born: |
|--------|------|-------|
| Gr 000 | 4 | 2022 |
| Gr 00 | 5 | 2021 |
| Gr 0 | 6 | 2020 |
| Gr 1 | 7 | 2019 |
| Gr 2 | 8 | 2018 |
| Gr 3 | 9 | 2017 |
| Gr 4 | 10 | 2016 |
| Gr 5 | 11 | 2015 |
| Gr 6 | 12 | 2014 |
| Gr 7 | 13 | 2013 |
| Gr 8 | 14 | 2012 |
| Gr 9 | 15 | 2011 |
| Gr 10 | 16 | 2010 |
| Gr 11 | 17 | 2009 |
| Gr 12 | 18 | 2008 |

PARENTS RESPONSIBLE FOR ACCOUNT INFORMATION

(mark with X)

REMARKS

| | | | | |
|---|----------------------------------|-----|----|-----------------------------------|
| 1 | Parents ID / Passport | YES | NO | |
| 2 | Medical aid card | YES | NO | |
| 3 | Three (3) months bank statements | YES | NO | |
| 4 | Proof of residence | YES | NO | |
| 5 | Parent information questionnaire | YES | NO | Please attach completed blue form |
| 6 | Parent Contract signed | YES | NO | |

PAYMENTS MADE

(mark with X)

REMARKS

| | | | | |
|---|---|-----|----|--|
| 1 | Application fee: R330 | YES | NO | |
| 2 | Registration fee: R2800 | YES | NO | |
| 3 | Resource Fee Gr.8 - 12 R1250, Gr.000 - 7 R500 | YES | NO | |

ACCEPTED

☐

STUDENT NUMBER

AUTHORISED BY:

NOT ACCEPTED

☐

ACCEPTED FOR GRADE

Remarks to be considered for admission:

DATE :

/ /