



Tel. Number. (013) 007 1147
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Pay point: 400714

Region: Ehlanzeni

Circuit: Sikhulile

Emis no. 024810

RE-ADMISSION FOR 2021

1. To be completed by parent / guardian

Child Surname _____ Current grade : _____

Name(s) _____ intended grade in 2021 _____

Confirm by signing option A or B

A. I confirm that, my child will be enrolled at the above institution in the academic year 2021.

Full Name & Surname	Signature	Date
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My cell number : _____

B. My child will NOT be enrolled at the above institution in the academic year 2021.

Full Name & Surname	Signature	Date
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My cell number : _____

NB: This form issued on the 10th of September 2020 and should be returned to the school not later than the 30th of November 2020.

: As per school policy the learner is expected to submit a copy of a Child Birth Certificate.

Ncube M.

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Ncube M.[Principal]

School Stamp

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