

**ROBERT HICKS PRIMARY SCHOOL**  
**ENROLMENT FOR GRADE R 2025**

**NB!!!**

**PLEASE NOTE ONLY BIOLOGICAL PARENTS CAN APPLY. GUARDIANS WHO WANT TO APPLY, MUST PROVIDE LEGAL DOCUMENTATION OF GUARDIANSHIP!**

**NON SOUTH AFRICAN CITIZENS MUST SUBMIT: valid Passports, Permanent Residence Permits, Study Permits, Visa's or Refugee & Asylum Seeker documents. Documents which have expired, or which will be expiring within 3 months of the GRd R applicaton, will NOT be accepted. If documents have expired, proof of re-application MUST be provided. Applications without these correct documents will be sent back, and will NOT be added to the admission list.**

**APPLICATIONS MUST BE MAILED BACK TO THE EMAIL ADDRESS ON TOP OF THE APPLICATION FORM. NO HARD COPIES ARE TO BE BROUGHT TO THE SCHOOL!!!**

**COPIES OF THE FOLLOWING DOCUMENTS:**

- **Copy** of Learner's birth certificate.
- **Copy** of both parents / guardians ID's
- **COPY OF PROOF OF RESIDENTIAL ADDRESS:**
  1. **LATEST** (not older than 3 months) Light's & Water account which must be in either the **mother's** or **father's** name.
  2. **LATEST** proof of rental of the property. Rental agreement must be in either the **mother's** or **father's** name. If older than 3 months, bring proof from the rental company that you are still renting this property.  
N.B.: **Offer to purchase and affidavits are not regarded as bona fide proof of residence.** We will not accept letters from owners of the property.
- **Copy** of the child's immunization card.
- **Copy** of both parents' pay slips. (If you are self-employed and not receiving a pay slip, then please provide us with 3 months Bank Statements).
- **Copy** of most recent school report from current Crèche / Nursery School.



# ROBERT HICKS PRIMARY SCHOOL

588 ADCOCK STREET  
 GEZINA, PRETORIA, 0084  
 TEL.: 012 329 3533 EXT 10  
 FAX: 012 329 6507  
 debtors@roberthicksschool.co.za

## GRADE R 2025

**NB: ENROLEMENT IN GRADE R FOR 2025 DOES NOT GUARANTEE A GRADE 1 SPACE FOR 2026 (CIRCULAR 5/2016 – GDE’S NOTICE OF ADMISSIONS. ALSO SEE AMENDED REGULATIONS RELATING TO THE ADMISSIONS OF LEARNERS TO PUBLIC SCHOOLS, 2019)**

### LEARNER’S DETAILS:

SURNAME			
FIRST NAME/S			
NAME BY WHICH THE CHILD IS KNOWN			
BOY / GIRL			
HOME LANGUAGE			
IMMIGRANT	YES: <input type="checkbox"/>	NO: <input type="checkbox"/>	
REFUGEE/ASYLUM SEEKER	YES: <input type="checkbox"/>	NO: <input type="checkbox"/>	
COUNTRY OF BIRTH			
CHILD’S DATE OF BIRTH			
CHILD’S ID OR PASSPORT NUMBER			
NAME/S OF BROTHER / SISTER AT THIS SCHOOL	1.	2.	
RELIGION			
PRESENT SCHOOL			
ADDRESS OF SCHOOL			
NAME OF MEDICAL AID			
MEDICAL AID NUMBER			
MAIN MEMBER			
WHO DOES THE CHILD LIVE WITH?			
PHYSICAL ADDRESS			
WHO IS LEGALLY RESPONSIBLE TO PAY SCHOOL FEES?			
THEIR ADDRESS: (IF DIFFERENT FROM ABOVE)			
ARE YOU CURRENTLY UNDER ADMINISTRATION?			
REMARKS: eg., Epilepsy, Diabetic, allergies, special medication etc.			
Names of other child / children and Grade applied for at Robert Hicks for 2024.			

**PARENT/S OR LEGAL GUARDIAN/S DETAILS:** (PLEASE DELETE FATHER OR MOTHER IF YOU ARE A GUARDIAN)

<b>FATHER / GUARDIAN:</b>	<b>INFORMATION REQUIRED:</b>	<b>MOTHER / GUARDIAN:</b>
	SURNAME	
	FIRST NAME/S	
	ID NUMBER (RSA CITIZEN)	
	PASSPORT NUMBER (FOREIGN CITIZEN)	
	HOME LANGUAGE	
	OCCUPATION	
	COMPANY'S NAME	
	WORK ADDRESS	
	WORK TEL NUMBER	
	WORK E-MAIL ADDRESS	
	HOME ADDRESS	
	P O BOX ADDRESS	
	HOME TEL. NUMBER	
	CELL NUMBER	
	PERSONAL E-MAIL ADDRESS	
	SINGLE/MARRIED/DIVORCED /WIDOW/ER	
	DOCTOR'S NAME	
	DOCTOR'S TEL. NUMBER	
	DOCTOR'S ADDRESS	
<b>ALTERNATIVE EMERGENCY CONTACT DETAILS: NOT PARENTS</b>		
<b>NAME AND SURNAME</b>	<b>RELATIONSHIP TO CHILD?</b>	<b>CELL NUMBER</b>
1.		
2.		

I, ....., parent/guardian of ..... hereby declare that all the information I have supplied in this document is true and correct and the latest information available. I agree to inform the school as soon as this information changes.

**I understand that supplying this school with fraudulent information or forged documents could result in my child not being enrolled.**

.....  
PARENT'S/GUARDIAN'S SIGNATURE

.....  
DATE