COLIN MANN SCHOOL
Sixth Avenue Lambton PHONE : 011 827 5580
Germiston 1401
PO Box, 5167 Liz@colinmannschool.co.za
Delmenville 1403

Date Applied _____

Grade _____

APPLICATION FOR ENROLMENT 2027

Please complete the application form in block letters and return together with **CERTIFIED COPIES** of the following documents to the school. Please note **WE DO NOT MAKE COPIES!!! Please write clearly.**

- *** Unabridged Birth Certificate of Learner**
- *** Most Recent School Report**
- *** Study permit for foreign nationals**
- *** One recent ID photo of learner**
- *** Copy of both parents Identity document.**
- *** Clinic/ IMMUNISATION card (we require the page that shows all INJECTIONS have been administered.)**
- *** If a legal guardian, a legal document as proof to be provided (NON NEGOTIABLE)**
- *** Proof of residence must be a recent Rates/ Water & lights or Legal Lease agreement or Rental statement.**

A LETTER FROM THE OWNER / DOWNLOADED / BOUGHT LEASE OR AFFIDAVIT WILL NOT BE ACCEPTED.

LEARNER INFORMATION

Learner's surname: _____ **Learners Identity number:** _____

First Names: _____ **Date of birth:** _____

Gender: _____ **Medication**: _____

Learners home language: _____

Last School OR Nursery school: _____

Ethnic Group: Asian / Black / Coloured / White **Biological Brothers/sisters at Colin Mann & Grade** _____ **(NOT COUSINS)**

(**Department of Education requirement)**

	PARENT / GUARDIAN A Please indicate: **Dr / Mr / Mrs / Ms / Miss**	**PARENT / GUARDIAN B** Please indicate: **Dr / Mr / Mrs / Ms / Miss**
SURNAME		
FIRST NAMES		
PARENTS ID NUMBERS		
PHYSICAL ADDRESS		
HOME TELEPHONE NUMBERS AND CELL PHONE NUMBERS		
E-MAIL ADDRESS:		
OCCUPATION:		
EMPLOYER:		
WORK TELEPHONE NUMBERS:		
LEGAL GUARDIAN OF LEARNER:		
ADDRESS OF LEARNER AND WHO HE/SHE USUALLY LIVES WITH:		
CORRESPONDENCE and ACCOUNTS for attention		
EMERGENCY CONTACT PERSON / NOT PARENT/ and the RELATIONSHIPCELL NO OF CONTACT PERSON		

MARITAL STATUS:	**MARRIED**		**UNMARRIED**		**DIVORCED**		**WIDOW/ER**	

IF MARRIED PLEASE INDICATE:	Ante-nuptial	Community of Property	Customary marriage	Hindu/Moslem	Other

ARE YOU AWARE THAT COLIN MANN SCHOOL IS A FEE PAYING SCHOOL: Yes / No (please circle)

I, the undersigned_____

(Parents full name and surname)

Hereby apply to the Principal of Colin Mann School for admission of my child,

_____ *(Name and surname of Learner)*

to Colin Mann School, with effect from

_____

(date)

PLEASE NOTE:

1. Please complete the Application and return it to the General Office with ALL supporting documents. For Grade R and grade 2-7 from the 21nd July 2026 ongoing until the end of the year. Gr 1 admissions' date will be given by the Gauteng Department of Education. Any application received thereafter will be considered as a **LATE** application and **the chances of enrolment is highly unlikely.**
2. No application will be accepted without all the required documentation.
3. In the event of fraudulent documentation or information being submitted, the school reserves the right to lay criminal charges of fraud against any of the parties involved in the application,
4. **Please note that the submission of "An application for Admission form" DOES NOT guarantee admission to Colin Mann School. Please do not purchase any uniform until written confirmation from the school indicating that you were successful, has been received!!!!!**
5. A payment of R3000,00 is payable only on **ACCEPTANCE**, which includes the Stationery fee and the remainder will be deducted from your school fee account in 2027.

DECLARATION: FAMILY

I _____ hereby declare that the information (Name and Surname of both parents) which I have recorded in this form is true and correct and by my signature below, I give the Chairman of the Colin Mann Primary School Governing Body, or his designate, permission to check and confirm any of the details listed by me. I understand that should any of the information supplied by me is found to be false, action may be taken against me.

Signed this_____ day of _____ 2026

_____ SIGNATURE – PARENT 1/ GUARDIAN

ID NUMBER: _____

_____ SIGNATURE – PARENT 2 / GUARDIAN

ID NUMBER: _____

PARENTS AGREEMENT RE PAYMENT OF SCHOOL FEES

Parents are liable to pay compulsory school fees in terms of section 39 of the South African Schools Act. In terms of Section 40 and 41 of the South African Schools Act, the school may enforce the payment of compulsory fees.

PARENT 1: _____ PARENT 2: _____

SIGNED: _____ **SIGNED:** _____

DATE: _____ **DATE:** _____