

Wartburg Kirchdorf Schülerheim

Tel: 033 5031412
Fax: 033 5031419
Cell: 083 3009895
Email: info@wkhostel.co.za



PO Box 129
Wartburg
3233

BOARDING APPLICATION

Thank you for your interest in our Boarding Establishment.

Enclosed please find a copy of our Application Form which should be completed and returned to the Admissions Officer at:

P.O. Box 129
Wartburg
3233

Please include the following documents with the application form:

- AD 1 Form
- Confidential Report from the Principal
- Latest Scholastic Report
- A copy of the learners' Book of Life or Birth Certificate.
- A non-refundable administrative fee of R200.00 per learner.
(EFT payments to be made to Wartburg Kirchdorf Schulerheim, FNB Account number: 51994009525, Branch code: 220231 (Dalton). Please use your child's name as reference). Kindly bring proof of payment to the Interview.

Failure to comply with the above requirements will result in a delay of consideration of this application.

We have a fee structure which caters for both weekly & monthly boarders. Please find attached a schedule of the Hostel Fees.

Yours faithfully

P.S.

THE HOSTEL & SCHOOL INTERVIEWS ARE SEPARATE. PLEASE CONTACT US AS SOON AS YOU HAVE AN APPOINTMENT AT THE SCHOOL SO THAT WE CAN ARRANGE FOR AN INTERVIEW STRAIGHT AFTER YOUR APPOINTMENT AT THE SCHOOL.

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ADMISSION FORM (AD1)

ID PHOTO

A. PERSONAL INFORMATION

- 1.1 Surname of Child _____
1.2 Christian Names _____
1.3 Date of Birth _____
1.4 Home Language _____
1.5 Male/Female _____

- 2.1 Date from which admission is sought _____
2.2 Probable grade of child _____
3. Nationality _____
4.1 Of which church is your child a member _____
4.2 Has your child been confirmed _____
4.3 If there is no church of this denomination in Wartburg, your child must attend one of the following:
English Lutheran _____ Roman Catholic _____ Methodist _____ Pentecostal _____
5. May your child participate in purely recreational games on Sunday? _____
6.1 Has application been made for your child to be admitted to any other hostel?

6.2 If so, state particulars _____
6.3 Has your child ever been in a hostel before? _____
6.4 If so, please state which hostel? _____
7. Do you have any other children at Wartburg? _____
8. Reason for hostel application _____

B Medical Information.

1.a. Has your child had any of the following (YES or NO)

Measles _____ German Measles _____ Diptheria _____ Mumps _____
Typhoid _____ Asthma _____ Chicken Pocks _____ Whooping Cough _____
Scarlet Fever _____ Amoebic Dysentry _____ Rheumatic Fever _____
Heart Disease _____ Cholera _____ Bilharzia _____ Malaria _____ Fits _____
Diabetes _____ Any other _____

1.b. Has your child been immunized against ----- (YES or NO)

Polio _____ Diptheria _____ Whooping cough _____ Tetanus _____ Typhoid _____

2. In the event of serious illness, which Doctor should be called in?

- a. One chosen by the hostel superintendent? _____
- b. Your own Doctor? State name and contact no. _____

3.a. Is your child a bleeder? _____ b. Does he/she wet the bed _____

c. Is your child allergic to any of the following?

Penicillin _____ Aspirin _____ Bee-stings _____ Serum _____

d. Any other allergies? _____

e. (i) Has he/she any decayed teeth _____

(ii) Does he/she get toothache? _____

(iii) When did he/she last visit a dentist? _____

(iv) Who is your dentist? (Name & address) _____

f. Does your child take tablets or other medication regularly? _____

g. Is your child on medication for fits? _____

h. Has your child any disabilities? _____ If yes, state nature and extent _____

CONFIDENTIAL:

Principal's Report to be returned to:

**The Admissions Officer
Wartburg Kirchorf Schülerheim/Hostel
P.O. Box 129
WARTBURG
3233
FAX: (033) 5031 419
TEL: (033) 5031 412
EMAIL: info@wkhostel.co.za**

NAME: _____

GRADE: _____

SUBJECTS TAKEN AND LATEST RESULTS

	GRADE	%		GRADE	%
ENGLISH			NATURAL SCIENCE		
AFRIKAANS / ZULU			HISTORY		
MATHS/MATHS LIT.			GEOGRAPHY		
PHYSICAL SCIENCE			EMS		
LIFE SCIENCE			SOCIAL SCIENCE		
GERMAN			ARTS & CULTURE		
BUSINESS STUDIES			TECHNOLOGY		
CONSUMER STUD.					
LIFE ORIENTATION					

ATTENDANCE: Good/Average/Poor

CONDUCT IN CLASS: _____

SPORTING ACTIVITIES: _____

LOYALTY TO SCHOOL: _____

ATTITUDE TO FELLOW PUPILS: _____

DO YOU HAVE ANY PROBLEMS WITH THIS CHILD? _____

HAS CHILD HAD REMEDIAL TEACHING? _____

IS CHILD SUITED FOR HOSTEL LIFE? _____

ARE SCHOOL/HOSTEL FEES PAID REGULARLY (YES/NO) _____

IF SO KINDLY ELABORATE: _____

PRINCIPAL

SCHOOL STAMP