

SOUTH AFRICAN SCHOOLS ACT, NO. 84 OF 1996

REGULATIONS FOR THE EXEMPTION OF PARENTS FROM PAYMENT
OF SCHOOL FEES

APPLICATION FOR EXEMPTION

1. PARTICULARS OF SCHOOL

Name: RHENISH PRIMARY SCHOOL

Postal Address: DOORNBOSCH STREET
KRIGEVILLE
STELLENBOSCH
7600Residential Address: RHENISH PRIMARY SCHOOL
DOORNBOSCH STREET
KRIGEVILLE
STELLENBOSCH

Tel : (021) 883-3166

Fax : (021) 887-1750

2. PERSONAL PARTICULARS OF PARENT

+ Name of parent : _____

Residential address : _____

Tel : _____

Fax : _____

+ **"Parent"** means (a) a natural parent or guardian of a learner; (b) a person legally entitled to custody of a learner; or (c) a person who undertakes to fulfil the obligations of a person referred to in paragraphs (a) and (b) towards a learner's education at school.

Name of learner for whom application is made:

Name(s) of learner(s) at the same public school or at another public school that has not been declared a no-fee school.

Name	Identity No	Grade	Amount of school fees	Additional monetary contribution	Name of school	Tel. no. of school
(1)						
(2)						
(3)						
(4)						
(5)						
(6)						
(7)						
(8)						
(9)						
(10)						

3. FINANCIAL PARTICULARS OF PARENT

Parent must, where applicable, supply the following:

3.1 Combined annual gross income:

R _____

(Attach salary advice, if applicable)

3.2 Money received from investment:

R _____

(Please provide documentary proof)

5. MANNER OF DELIVERY OF THE APPLICATION FORM

The application form and accompanying documents must be sealed in an envelope addressed to the chairperson of the governing body and must be delivered to the school concerned by hand or by registered post.

Name of Parent

LEON POTGIETER (MR)

Name of Chairperson

Signature of Parent

Signature of Chairperson

Date: _____

Date: _____

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CHECKLIST FORM *

(Mark with a cross in applicable box)

- | | | | |
|----|--|-----|----|
| 1. | Has the principal informed you about the amount of the annual school fees to be paid? | YES | NO |
| 2. | Has the principal informed you that you are liable for the payment of school fees unless you are totally exempted from paying school fees? | YES | NO |
| 3. | Has the principal informed you about your right to apply for exemption from paying school fees? | YES | NO |
| 4. | Do you wish to apply for such exemption? | YES | NO |
| 5. | Do you wish to be assisted in making such application? | YES | NO |
| 6. | Has the principal provided you with the form (Annexure B) for application for exemption? | YES | NO |

BRUCE W. NILAND

Name of Principal

Name of Parent

Signature of Principal

Signature of Parent

Date: _____

Date: _____

School stamp:

* *One copy of the signed form will be handed over to the parent, another will be submitted to the Head of Department or his or her delegate, and the original will be filed at the school.*