



# LAERSKOOL BERGLAND

Posbus / P.O Box 40050 • Nelspruit • 1218

✉ info@laerskoolbergland.co.za

☎ (013) 744 1959 📠 (013) 744 1961

Date received		Doc no	
---------------	--	--------	--

## APPLICATION FOR SCHOOL FEE EXCEMPTION 2024

### A. LEARNERS APPLIED FOR

I/we hereby apply for exemption for the following learners:

Account number/ Family code: _____	
Learner 1: _____	Grade _____
Learner 2: _____	Grade _____
Learner 3: _____	Grade _____
Learner 4: _____	Grade _____

### OFFICE USE

Date all information was received: \_\_\_\_\_

Reviewed by: \_\_\_\_\_ Capacity on Governing Body \_\_\_\_\_

Comments \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Exemption approved	Ja	Nee		Full	Partial
--------------------	----	-----	--	------	---------

Signature \_\_\_\_\_ Date \_\_\_\_\_ Percentage \_\_\_\_\_

Correspondence reference number \_\_\_\_\_ Date processed on account \_\_\_\_\_

## B. GENERAL

To ensure that the application is processed efficiently and effectively the following documents should be attached:

No	Documentation required	Father/ Guardian 1		Mother/ Guardian 2		Check list (Office use only)
a.	A certified copy of applicants ID					
b.	A certified copy of the following relevant document:					
	<ul style="list-style-type: none"> <li>• A certified copy of your Marriage certificate if applicable;</li> </ul>					
	<ul style="list-style-type: none"> <li>• A certified copy of your divorce agreement and maintenance agreement;</li> </ul>					
	<ul style="list-style-type: none"> <li>• Death certificate;</li> </ul>					
	<ul style="list-style-type: none"> <li>• If the applicant is a guardian, include a certified copy of the court ruling; or</li> </ul>					
	<ul style="list-style-type: none"> <li>• Include an Affidavit to explain status.</li> </ul>					
c.	Certified copy of the birth certificate of each child in this school, for whom you are applying for:					
	<ul style="list-style-type: none"> <li>• Learner 1:</li> </ul>					
	<ul style="list-style-type: none"> <li>• Learner 2:</li> </ul>					
	<ul style="list-style-type: none"> <li>• Learner 3:</li> </ul>					
	<ul style="list-style-type: none"> <li>• Learner 4:</li> </ul>					
		<b>Birth Certificate</b>		<b>Proof of school attendance</b>		
d.	Certified birth certificates of your children attending another state school and proof of attendance of:					
	<ul style="list-style-type: none"> <li>• Learner 1:</li> </ul>					
	<ul style="list-style-type: none"> <li>• Learner 2:</li> </ul>					
	<ul style="list-style-type: none"> <li>• Learner 3:</li> </ul>					
	<ul style="list-style-type: none"> <li>• Learner 4:</li> </ul>					
		<b>Father/ Guardian 1</b>		<b>Mother/ Guardian 2</b>		
a.	Do you earn a salary?	Yes	No	Yes	No	
	<ul style="list-style-type: none"> <li>• Certified copy of your last <u>three</u> salary slips</li> </ul>					
	<ul style="list-style-type: none"> <li>• Certified copy of your last tax return submitted to SARS</li> </ul>					
b.	Are you unemployed?	Yes	No	Yes	No	
	<ul style="list-style-type: none"> <li>• A letter from the Department of Labour indicating your last date of employment and that you are presently unemployed</li> </ul>					
c.	Are you a Pensioner?	Yes	No	Yes	No	
	Certified copy verifying your status a pensioner and the amount of pension you receive monthly					

No	Documentation required	Father/ Guardian		Mother/ Guardian		Check list (Office use only)
d.	The following documentation must accompany this application:					
	<ul style="list-style-type: none"> <li>• Three months bank statements. A certified copy of the original bank monthly bank statements received from your bank. Internet bank statements will not be accepted</li> </ul>					
	<ul style="list-style-type: none"> <li>• A certified copy of all Investments statements held.</li> </ul>					
	<ul style="list-style-type: none"> <li>• If you have a bond on property copy of your latest bond statement</li> </ul>					
	<ul style="list-style-type: none"> <li>• If you make use of credit cards, then a certified copy of your latest Credit card statements</li> </ul>					
	<ul style="list-style-type: none"> <li>• A certified copy of a Utility bill, preferable an Electricity bill</li> </ul>					
	<ul style="list-style-type: none"> <li>• If you are renting, a certified copy of the lease</li> </ul>					
	<ul style="list-style-type: none"> <li>• If you have entered into lease agreements or Hire purchase agreements for any assets like vehicles, furniture etc, we require a certified copy of this agreement</li> </ul>					
	<ul style="list-style-type: none"> <li>• Latest Tax assessment received from SARS</li> </ul>					
e.	Are you a business owners	Yes	No	Yes	No	
	<ul style="list-style-type: none"> <li>• Management accounts for the past 12 months.</li> </ul>					

**INCOMPLETE APPLICATIONS WILL NOT BE CONSIDERED**

**Should an incomplete application be received it would be regarded as unsuccessful**

**Documents received & reviewed by:**

**Name:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**Documents completed: Yes / NO**

**If incompleted returned on \_\_\_\_\_.**

## C. PARTICULARS OF PARENT 1

First name \_\_\_\_\_ Surname \_\_\_\_\_  
 Place of birth Town \_\_\_\_\_ Country \_\_\_\_\_ Nationality \_\_\_\_\_  
 Date of birth \_\_\_\_/\_\_\_\_/\_\_\_\_ Arrival date in SA  
 (if applicable) \_\_\_\_\_  
 ID no \_\_\_\_\_ Passport no \_\_\_\_\_  
 Income Tax No \_\_\_\_\_ Gender: Male  Female

Residential address  
 Street \_\_\_\_\_  
 Suburb \_\_\_\_\_  
 Town \_\_\_\_\_ Postal code \_\_\_\_\_

How long have you being at this address? \_\_\_\_\_

Owner:  Yes  No Outstanding bond  Yes  No Account number \_\_\_\_\_  
 Owner of bond \_\_\_\_\_ Financial institution \_\_\_\_\_

Rental property  Yes  No Name of owner or rental agent \_\_\_\_\_

How many people live with you at your home address?  
 Adults  Relationship \_\_\_\_\_ Children  Relationship \_\_\_\_\_

Postal address (if different form residential address)  
 PO Box \_\_\_\_\_  
 Suburb \_\_\_\_\_  
 Town \_\_\_\_\_ Postal code \_\_\_\_\_

Telephone no \_\_\_\_\_ Fax no \_\_\_\_\_

Cell no \_\_\_\_\_ E mail address \_\_\_\_\_

**Bank details:**

Bank \_\_\_\_\_ Branch code \_\_\_\_\_  
 Account holder \_\_\_\_\_ Account no \_\_\_\_\_  
 Account type (tick applicable) Current/ cheque  Savings  Credit Card

**Vehicle ownership:**

Registration <i>no</i>	<i>Make</i>	<i>Model</i>	<i>Year</i>	<i>Debt (Yes/No)</i>	<i>Bank</i>	<i>Account no</i>

**Marital status:**

Married  Living together  Engaged  Divorced  Single   
 Separated  Other

Age of dependent children?  
 ...../...../...../...../...../.....

Employment status (tick applicable)	Employed	Own business	Unemployed	Retired
<b>1. Name Employer</b>				
Name of Employer _____				
Address of Employer				
Street _____				
Suburb _____				
Town _____ Postal code _____				
Postal address				
PO Box _____				
Town _____ Postal code _____				
Telephone no (work) _____ Fax no _____ Cell No _____				
E-Postal address (work) _____				
Current gross salary per annum _____				
Date of employment From / /				
<b>2. Name of own business</b>				
Name of Business _____				
Business Address				
Street _____				
Suburb _____				
Town _____ Postal code _____				
Postal address				
PO Box _____				
Town _____ Postal code _____				
Telephone no (work) _____ Fax no _____ Cell No _____				
E-Mail address _____				
Annual turnover _____ Type of business _____				
Commencement date From / /				
Type of ownership	Sole owner	Partnership	CC	Shares in Company
<b>3. Pensioner</b>				
Name of Pension fund _____				
Pension fund number _____				
Annual earnings _____				
<b>4. Unemployed</b>				
Unemployment number _____				
Date Unemployed _____				

## D. PARTICULARS OF PARENT 2

First name _____	Surname _____					
Place of birth	Town _____ Country _____ Nationality _____					
Date of birth	_____ / _____ / _____ Arrival date in SA (if applicable) _____					
ID no _____	Passport no _____					
Income Tax No _____	Gender: Male <input type="checkbox"/> Female <input type="checkbox"/>					
Residential address	Street _____					
	Suburb _____					
	Town _____ Postal code _____					
How long have you being at this address? _____						
Owner:	<input type="checkbox"/> Yes <input type="checkbox"/> No    Outstanding bond <input type="checkbox"/> Yes <input type="checkbox"/> No    Account number _____					
Owner of bond _____	Financial institution _____					
Rental property	<input type="checkbox"/> Yes <input type="checkbox"/> No    Name of owner or rental agent _____					
How many people live with you at your home address?						
Adults <input type="text"/>	Relationship _____ Children <input type="text"/> Relationship _____					
Postal address	PO Box _____					
(if different form residential address)	Suburb _____					
	Town _____ Postal code _____					
Telephone no _____	Fax no _____					
Cell no _____	E mail address _____					
<i>Bank details:</i>						
Bank _____	Branch code _____					
Account holder _____	Account no _____					
Account type (tick applicable)	Current/ cheque <input type="checkbox"/> Savings <input type="checkbox"/> Credit Card <input type="checkbox"/>					
<i>Vehicle ownership:</i>						
Registration no	Make	Model	Year	Debt (Yes/No)	Bank	Account no
<i>Marital status:</i>						
Married <input type="checkbox"/>	Living together <input type="checkbox"/>	Engaged <input type="checkbox"/>	Divorced <input type="checkbox"/>	Single <input type="checkbox"/>		
Separated <input type="checkbox"/>		Other <input type="checkbox"/>				
Age of dependent children? ...../...../...../...../...../...../...../						

<b>Employment status</b> (tick applicable)	Employed	Own business	Unemployed	Retired
<b>1. Name Employer</b>				
_____				
Address of Employer	Street _____			
	Suburb _____			
	Town _____		Postal code _____	
Postal address	PO Box _____			
	Town _____		Postal code _____	
Telephone no (work)	_____	Fax no _____	Cell No _____	
E-Postal address	_____			
Current gross salary per annum	_____			
Date of employment	From / /			
<b>2. Name of own business</b>				
_____				
Business Address	Street _____			
	Suburb _____			
	Town _____		Postal code _____	
Postal address	PO Box _____			
	Town _____		Postal code _____	
Telephone no (work)	_____	Fax no _____	Cell No _____	
E-Mail address (work)	_____			
Annual turnover	Type of business			
Commencement date	From / /			
Type of ownership	Sole owner	Partnership	CC	Shares in Company
<b>3. Pensioner</b>				
Name of Pension fund _____				
Pension fund number _____				
Annual earnings _____				
<b>4. Unemployed</b>				
Unemployment number _____				
Date Unemployed _____				

## E. LEARNERS ATTENDING THIS SCHOOL

Surname of Learner	Name of Learner	Grade	Relationship with learner					
			Own child	Foster child	Step child	Grand child	Other	

## F. LEARNERS ATTENDING OTHER PUBLIC SCHOOLS

Surname of Learner	Name of Learner	School attending	Grade	School Fees R	Relationship with learner					
					Own	Step	Foster	Grand	Other	

## G. MONTHLY INCOME

	Gross combined Income	
	PARENT 1	PARENT 2
Gross Salary (before Deductions UIF, PAYE)		
Income from Business		
Pension		
Interest from Investments		
Dividends		
Rental Income		
Government Grants		
Disability Grant		
Retrenchment Package		
Income from Repayment of Loan		
<b>OTHER:</b>		
<b>TOTAL</b>		

<i>Office use:</i>	
Total Annual Income	(C) _____   (D) _____
Joint annual income (C+D)=E	(E) _____
School fees of youngest learner (F)	_____
Percentage of school fees of annual income (F/E)	(F) _____ = _____ (E)
Number of learners in Public School	_____



## H. MONTHLY EXPENDITURE

	Gross combined Expenditure	
	PARENT 1	PARENT 2
Bond		
Car Insurance		
Cell Phones/ Telephone		
Clothing / Clothing Accounts		
Credit Cards		
Domestic Help		
DSTV		
Entertainment		
Extra Mural Activities		
Garden Service		
Groceries		
Gym Fees		
Hire Purchase Agreements Details:		
Household Insurance		
Income tax		
Life Insurance		
Lights and Water		
Loans including loans from an employer		
Medical Aid		
Medical - personal		
Memberships: Details:		
Pension / Provident Contribution/ Retirement Annuities		
Petrol		
Rates and Municipal Taxes		
Rent		
SABC License		
Savings		
School Fees		
Security / Armed Response		
Unit Trusts		
UIF		
<b>OTHER:</b>		
Maintenance		
<b>TOTAL EXPENDITURE</b>		
<b>TOTAL INCOME LESS TOTAL EXPENDITURE</b>		

**I. ASSETS AND LIABILITIES**

	<b>PARENT 1</b>	<b>PARENT 2</b>
<b>ASSETS</b>		
Fixed Property - cost		
All improvements to property - cost		
Shares, member's interest & debentures - cost		
Loan Accounts		
Net capital of business, profession or farming		
Equipment, machinery, implements, furniture, jewelry		
Motor vehicles, caravans, boats		
Debtors		
Stock		
Livestock		
Cash in Bank		
Cash on Hand		
Offshore investments		
Timeshares		
Second Holiday Home		
<b>OTHER:</b>		
<b>TOTAL ASSETS</b>		
<b>LIABILITIES</b>		
Bond Property 1		
Bond Property 2		
Bond Property 3		
Loan Accounts		
Creditors		
Bank Overdraft		
Hire Purchase agreements		
Lease agreements		
<b>OTHER:</b>		
<b>TOTAL LIABILITIES</b>		
<b>TOTAL ASSETS LESS TOTAL LIABILITIES</b>		

**J. OTHER FINANCIAL PARTICULARS REQUIRED**

Additional monetary contributions paid by a parent in relation to a learner's attendance of or participation in any programme of, a public school: R.....

**K. ADDITIONAL INFORMATION**

Any other relevant information supplied by the applicant, indicating the inability to pay school fees owing to personal circumstances, that may lead to conditional exemption:

.....  
.....  
.....  
.....  
.....  
.....  
.....  
.....  
.....  
.....

**L. DECLARATION: PARENT 1**

I .....hereby declare that the information which I have recorded in this form is true and correct and by my signature below, I give the Chairman of the 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 be found to be false, my application may be disqualified.

Signed on this ..... day of ..... 20.....

.....  
SIGNATURE

**M. DECLARATION: PARENT 2**

I .....hereby declare that the information which I have recorded in this form is true and correct and by my signature below, I give the Chairman of 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 be found to be false, my application may be disqualified.

Signed on this ..... day of ..... 20.....

.....  
SIGNATURE

## N. TERMS AND CONDITIONS

- i. Your application will be assessed in terms of the rules and regulations as stipulated in the South African Schools Act 86 of 1996 and in terms of the Norms and Standard of funding.
- ii. The applicant for this application, be as follows : if the learner's parents are:
  - Married – one application form is required and the documents of both Mother and Father are required. The applicant is both the Mother and Father. Please supply information as Parent 1: Father and Parent 2 : Mother
  - Divorced – particulars of both parents are required. Separate application forms must be completed by each parent and the required document of that applicant must be attached to the application form.
  - Widowed – one application form is required with the necessary documentation.
  - Unmarried - **separate** application forms must be completed by **each** parent and the required document of that applicant must be attached to the application form.
- iii. Application forms which do not have the above documents can not be considered.
- iv. All information on the application form must be supplied.
- v. The members of the School Governing Body reserves the right to verify any document or statement made in this application.
- vi. Members of the School Governing Body may visit the applicant at his or her residence.
- vii. In the event of an applicant making a false statement on his/her application form or if her/or her produces false documents or evidence, the School Governing Body may lay a charge of fraud against the applicant.
- viii. Should the personal conditions of the applicant change in any way following a decision of the School Governing Body, the onus is on the applicant to make the School Governing Body aware of these changes so that the application can be revisited to assess whether the decision of the School Governing Body should be altered to suit these new changes.
- ix. In the event of the School Governing Body obtaining information that the circumstances of the applicant has changed and that the School Governing Body has not been informed, the School Governing Body may, at its sole discretion then review the changes and may or may not alter their decision irrespective of how long such decision has been in force.
- x. Applications for exemption are for the current school year only. Each year a new application form must be filled out and handed to the school for consideration.
- xi. Body or a person so delegated by him, will investigate all information in the submission for the purpose of ensuring that all details, as stated, are true and correct before the application will be considered. Proof must be submitted with all declarations. Should any information be found to be false or of a questionable nature, the application will be rejected in full and no further negotiations will be entered into between the School Governing Body and the applicant.

	PA SE BRUTO	BRON DOKUMENT	MA SE BRUTO	BRON DOKUMENT	
	FATHER GROSS	SOURCE DOCUMENT	MOTHER GROSS	SOURCE DOCUMENT	
<b>Januarie</b>					<b>January</b>
Ekstra					Extra
<b>Februarie</b>					<b>February</b>
Ekstra					Extra
<b>Maart</b>					<b>March</b>
Ekstra					Extra
<b>April</b>					<b>April</b>
Ekstra					Extra
<b>Mei</b>					<b>May</b>
Ekstra					Extra
<b>Junie</b>					<b>June</b>
Ekstra					Extra
<b>Julie</b>					<b>July</b>
Ekstra					Extra
<b>Augustus</b>					<b>August</b>
Ekstra					Extra
<b>September</b>					<b>September</b>
Ekstra					Extra
<b>Oktober</b>					<b>October</b>
Ekstra					Extra
<b>November</b>					<b>November</b>
Ekstra					Extra
<b>Desember</b>					<b>December</b>
Ekstra					Extra
<b>TOTAAL</b>	<b>R</b>		<b>R</b>		<b>TOTAL</b>