ALA ACADES
SEMPER PRORSUM

NO.183 JAN JONKER, AUSSPANPLATZ, WINDHOEK, NAMIBIA, 9000

APPLICATION FORM

YEAR OF INTAKE: 2023

NAME _____

GRADE_____

READ CAREFULLY

Should any of the requirements as stated in the Conditions of Entry (page 2) are not adhered to, this application will not be processed.

This Application Pack must be returned to the Admissions's Secretary <u>enroll@waka.academy</u> and be accompanied by a non-refundable registration fee of N\$900. N\$200 Entrance Test Fee. Should you wish to do an EFT, proof of payment must be attached to this document.

Please use the check list to ensure that all the relevant documents accompany this application.

Conditions	of Entry-Signed
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Application Form

Certified copies of child's two most recent school reports

Certified copies of his/her FULL birth certificate

Certified copies of both parents' identity documents/passports

Non-refundable Registration of N\$900. (or proof of payment EFT)

1x Passport Photo

FOR OFFICE USE ONLY

`Date of application received:	Assessment date:	Reg Free Paid
Received by: ———————————————————————————————————	by:	
DATE		REJECTED
ENTRANCE TEST DATE:		//20

CONDITIONS OF ENTRY

- 1. Recommendation from the previous school will be requested. The Recommendation Form must be handed to the principal/head of your child's current school. The completed form is sent directly to Waka Academy via e-mail <u>enroll@waka.academy</u>. This information remains confidential.
- 2. The School's physical environment, facilities and resources limit its ability to provide high quality education to children with special educational needs, whether due to neurological barriers, hearing impairments, visual barriers, physical barriers, behavioural or emotional barriers or any other medically assessed special need. The parent/guardian is required to inform the school in writing, prior to the enrolment, of any specialeducational needs of the applicant known to them.
- 3. Enrolment into Grades 1-7 depends on a successful intake entrance test; school readiness tests for the specific age group of enrolment into Grade 1 and Pre-Primary classes.
- 4. Should the child be enrolled at the discretion of the school, the parent undertakes to work closely and co- operatively with the school to provide any and all support required. Should the school, in its sole discretion, NOT be able to continue to support the special educational needs of the child, it will have the power to cancelthis contract of enrolment with due notice.
- 5. On receipt of this form, your child's name will be placed on file. Acceptance of this application form does NOT guarantee nor imply final acceptance of the applicant.
- 6. Acceptance of an offer of place will render the applicant liable for the following:
 - a. School registration Fee of N\$900 payable for the academic year 2023.
 - b. Signing of a Contractual Agreement.
- 7. No student will be admitted to the School until the Registration Fee has been paid in full and the Contractual Agreement has been signed.
- 8. The Right of Admission is reserved.
- 9. School fees are payable in advance. See Annexure A for the detailed Fee Schedule and payment options.
- 10. Written notice of two months is required should the parent/guardian wish to withdraw a student from the school.
- 11. Should no notice be received accordingly, two months fees will be due in lieu of notice.
- 12. By signing the Conditions of Entry form, the parent/guardian gives consent for a credit check to be carried out.
- 13. I, the undersigned, accept that all reasonable precautions will be taken to ensure the safety and welfare of my child. Should however, any damage or injury be suffered or sustained by my child, Ishall be liable for the payment of all medical and/or hospital and/or ambulance accounts in connection therewith. I hereby expressly waive any claim and /or indemnify WAKA Academy against any claims whatsoever in respect of any such damage and/or injury.
- 14. LEGAL FEES: In the event where WAKA Academy takes legal action against the Account Holder, he/she will be liable for all legal fees on an attorney client scale, collection cost and commission, interest and tracing fees. All outstanding invoices after 30 days will result in the child being prohibited to attend classes. 60 dyas outstanding invoices will be handed over to debt collectors/ICT (E & OE).
- 15. The applicant undertakes to comply with the requirements set out in the Parent Contractual Agreement.

I/we, the legal guardian/s of_____(name of applicant), understand that this application will be registered once all relevant documents are submitted to the School.

SIGNATURE (PARENT/GUARDIAN) SIGNATURE

(PARENT/GUARDIAN)

DATE

BANKING DETAILS

WAKA EDUCATIONAL GROUP FNB NAMIBIA, ACCOUNT NUMBER: 62268036764, BRANCH CODE: 281174 STD BANK NAMIBIA, ACCOUNT NUMBER: 60003922323, BRANCH CODE: 08277200 FEE PAYMENT REFERENCE: Reg fees/ Tuition + Student Name.

AGREEMENT OF PAYMENT OF SCHOOL FEES BETWEEN WAKA ACADEMY (thereinafter referred to as the School) and

Please print your name in full here (hereinafter referred to as the Parent/Guardian)

- 1. This document serves as a memorandum of Agreement between the above parties in that the said parent/guardian acknowledges his/her indebtedness to the School in respect of fees payable until notice is given.
- The Parent/Guardian who enrols his/her child/children undertakes to pay the sum of N\$900,00 (Nine hundred Namibian Dollars) as non-refundable registration fee. Once the N\$900 is paid, this contract is legal and binding.
- The following fees are compulsory for 2023:
 3.1 Monthly contracts:

School Fees of _____ per month. Aftercare (Optional)

The Parent/Guardian undertakes to pay the school fees as follows: By bank or internet transfer on the 1st day of the month. Parents must let the office have the confirmation ofpayment, as our bank statements do not always reflect the name of the child/children:

Bank Details:

FIRST NATIONAL BANK. Acc. Holder: WAKA EDUCATIONAL GROUP Acc. No: 62268036764 Branch: OLD POWER STATION BRANCH CODE: 281174 STANDARD BANK NAMIBIA Acc. Holder: WAKA EDUCATIONAL GROUP Acc No:60003922323 BRANCH CODE: 08277200

6. A fee of N\$150.00 is payable for every week of late payment.

7. The parties choose as their domicilia et executandi the addresses set out in the Application.

Fees are payable strictly **monthly in advance** on or before the **first day of each month**. Two calendar month's **written notice** is required on the first of the month for monthly contracts. During the months of October and November, no notice will be accepted for the month of December. Full school fees are payable. Failure to do so will result in liability for two month's fee. All costs incurred by failure to comply with the above will be paid by the defaulting Parent/ Guardian. The Parent/Guardian (Undersigned) certifies that he/she has read the Rules and Regulations and is familiar with the conditions laid down.

SIGNED AT	ON THIS	DAY OF	20	
SIGNED	(THE P4	ARENT/GUARDIAN)		
SIGNED	(THE SC			
Permission and Indemnity				
l, person" for		the undersigned being th	ne parent /guardian/"the	responsible
(Name of child)		permit him/her to partici	pate in and attend all	
education excursions or sport a her admission years at WAKA its staff and participating pare directly or indirectly from my c by the school.	International Pre-school and ents or students against any	l Day-care. I further inde / claims of any nature a	mnify and absolve the s and however arising, w	school, /hether

Signature: __

(Parent/guardian responsible)

_Date: __



APPLICATION FORM

STUDENT DETAILS				
SURNAME				
FIRST NAMES				
PREFERRED NAME				
DATE OF BIRTH		AGE		
GENDER				
HOME LANGUAGE		RELIGION		
CURRENT SCHOOL				
	WAKA ACADE	EMY CONNECTIONS		
SIBLINGS AT WAKA ACADEM	IY			
YES/NO	NAME	GRADE	YEAR	
	ADDITIONAL INF	ORMATION		
ALLERGIES				
PHYSICAL DISABILITIES				
CONTACT NUMBER				
ANY OTHER CONFIDENTIAL I SCHOOL?				
KINDLY NAME ACHIEVEMEN	TS IN SPORT/CULTURE	AND /OR PREFERENCE	S	

SURNAME

FATHER/GUARDIAN

		RESPONSIBLE FOR ACCOUNT (YES/NO)
SURNAME		
ID NUMBER		
CONTACT DETAILS	НОМЕ —	
	WORK —	
	EMAIL	
PHYSICAL ADDRESS		
POSTAL ADDRESS		

RELATIONSHIP OF CHILD TO PARENT/GUARDIAN: OWN FATHER/STEP FATHER/FATHER DECEASED/ OTHER (SPECIFY)

		MOTHER/GUARDIAN	
TITLE		RESPONSIBLE FOR ACCOUNT	YES/NO)
FIRST NAMES			
ID NUMBER			
CONTACT DETAILS	HOME —		
	WORK		
PHYSICAL ADDRESS	3		
POSTAL ADDRESS			
	HILD TO PARI	ENT/GUARDIAN: OWN FATHER/STEP FATHER/FATH	
SIGNITUR <u>E</u>		SIGNITURE	

FATHER/GUARDIAN



R/GUARDIAN

RECOMMENDATION FORM BY HEAD OF DEPARTMENT/PRINCIPAL

THIS IS A CONFIDENTIAL DOCUMENT WHICH IS TO BE COMPLETED BY THE HEAD OF DEPARTMENT/ PRINCIPAL OF THE STUDENTS CURRENT SCHOOL AND EMAILED TO <u>enroll@waka.academy</u>

NAME AND SURNAME OF STUDENT

CURRENT GRADE OF STUDENT

ACADEMIC AND SOCIAL DEVELOPMENT	NO BASIS FOR JUDGEMENT	BELOW AVERAGE	AVERAGE	GOOD	EXCELLENT
ACADEMIC ABILITY					
MOTIVATION					
STUDY HABITS					
ORGANISATIONAL SKILLS					
ATTITUDE AND COMMITMENT TO SCHOOL WORK					
SELF-DISCIPLINE					
ABILITY TO WORK INDEPENDENTLY					
RESPECT FOR AND ADHERENCE TO SCHOOL'S CODE OF CONDUCT					
RESPECT FOR VALUES,NORMS, AND TRADITIONS OF THE SCHOOL					
RESPECT FOR AUTHORITY (MANAGEMENT, TEACHERS, ECT)					
PERSEVERANCE					
CONSIDERATION FOR OTHERS					
SELF-CONFIDENCE					

ACADEMIC AND SOCIAL DEVELOPMENT	NO BASIS FOR JUDGEMENT	BELOW AVERAGE	AVERAGE	GOOD	EXCELLENT
LEADERSHIP					
MATURITY					
GENERAL BEHAVIOUR					

PARENT'S INVOLVEMENT WITH SCHOOL RELATED AFFAIRS

PAYMENT OF SCHOOL FEES

ANY OTHER CONFIDENTIAL INFORMATION

DISCIPLINARY RECORD

DETAILS REGARDING ANY DISCIPLINARY PROCEEDINGS CONTEMPLATED AND/OR INITIATED AGAINST THE LEARNER AND, IN THE LATTER EVENT , THE OUTCOME THEREOF:

I HEREBY DECLARE THAT THE ABOVE MENTIONED INFORMATION IS CORRECT

DATE

SIGNATURE:HEAD OF DEPARTMENT/PRINCIPAL NAME IN PRINT

SCHOOL STAMP