



APPLICATION FORM

Current Date:	<input type="text"/>		
Current Grade:	<input type="text"/>		
Seeking enrolment for Grade:	<input type="text"/>		
For the year:	<input type="text"/>		
Date of Birth:	<input type="text"/>		
Surname of Pupil:	<input type="text"/>		
First Names:	<input type="text"/>		
Calling Name:	<input type="text"/>	Male/Female:	<input type="text"/>
Home Language:	<input type="text"/>	Nationality:	<input type="text"/>

For office use only

Date handed in:	<input type="text"/>	Date of enrolment:	<input type="text"/>
Date interviewed:	<input type="text"/>	Deposit Receipt Nr.	<input type="text"/>
Date tested:	<input type="text"/>	Performance Level:	<input type="text"/>

"Train a child in the way he should go and when he is old he will not turn from it."

Proverbs 22:6

STUDENT INFORMATION

Siblings currently attending ANCS:		Yes:		No:	
Surname:		Name:		Grade:	
Surname:		Name:		Grade:	
Siblings or family members who attended ANCS:		Yes:		No:	
Surname:		Name:		Grade:	
Surname:		Name:		Grade:	

Name of Family Doctor:		Telephone:	
Medical Aid:		Med. Aid No.:	
Main Member:			
How is the general health of student?	Good:		Poor:
Does the student suffer from any allergies or any physical or mental disabilities that will hamper participation in sport or any other activities?			
	Yes:		No:
If YES, please elaborate:			

Does the student understand English?	Yes:		No:
Does the student speak English?	Yes:		No:
What is the student's home language (if not English)?			

Details of current school or of last school attended:			
Name:			
Address:			
Code:	Telephone:	Fax:	
Email:			
Contact person:			

Church Affiliation:	
Name of church:	
Pastor:	
Tel. / Cell phone:	

Other:
Any other information (medical or otherwise) that you would like to bring to the attention of the school:

PARENT / GUARDIAN INFORMATION

Father	Title:		First names:		Surname:	
Nationality:						
Postal Address:						
Home Address:						
Tel. (H):		Tel. (W):				
Fax:		Cell phone:				
E-mail:						
Occupation:						
Employer:						

If less than 5 years, please supply details of previous employer:

Mother	Title:		First names:		Surname:	
Nationality:						
Postal Address:						
Home Address:						
Tel. (H):		Tel. (W):				
Fax:		Cell phone:				
E-mail:						
Occupation:						
Employer:						
If less than 5 years, please supply details of previous employer:						

Marital status of the parents:	Married	Separated	Divorced	Single	Other
Please explain other:					
With whom does the student reside?	Parents	Father	Mother	Guardian	Other
Please explain if other:					

PAYMENT OF SCHOOL FEES

Who is responsible for payment of school fees?	Father:	Mother:	Neither:		
If neither of the parents, please complete the following:					
Title:		First names:		Surname:	
Nationality:					
Postal Address:					
Home Address:					
Tel. (H):		Tel. (W):			
Fax:		Cell phone:			
E-mail:					
Employer:					

School fees are payable monthly in advance by debit order only.

BANK DETAILS

Bank:		
Branch:		
Account Number:		
How long have you been with above-mentioned bank?		

We, the undersigned, declare that this application form has been filled in correctly. We also herewith undertake to:

- 1. Honour and submit to all school rules.**
- 2. Pay school fees faithfully and timeously on or before the first of each month.**

Father's signature: _____

Mother's signature: _____

P.T.O

PLEASE INCLUDE THE FOLLOWING WITH YOUR APPLICATION:

1. A copy of the most recent progress report
2. A copy of the student's birth certificate and parent's I.D. or passport.
3. 2 x Student I.D. Photos
4. Most recent Municipal Account
5. The completed and signed Financial Agreement, Debit Order and Student Information Forms
6. If applying for Grade 1, an official school readiness test from one of the following psychologists **MUST** be included:
 - Magda Swanepoel - (061) 255 367
 - Marlize Calitz - (061) 413 350
 - Windhoek Occupational Therapy - (061) 223 380

NB!

NON- NAMIBIANS TO APPLY FOR STUDY PERMIT WITH MINISTRY OF HOME AFFAIRS



FINANCIAL AGREEMENT BETWEEN
ALL NATIONS CHRISTIAN SCHOOL
AND

PARENTS / GUARDIANS DETAILS:

FULL NAME:		ID NO:	
FULL NAME:		ID NO:	

parents of _____ for 2023

ENROLMENT FEE FOR NEW STUDENTS:

1. Enrolment Fee (non-refundable): N\$ 1 800-00 per student.
2. Diagnostic Test Fee: N\$ 400-00 per child per subject (Grade 2 & up).

RE-ENROLMENT FEE (NON-REFUNDABLE):

1. Re-enrolment Fee : N\$ 650-00 per student (01 June 2022 – 12 August 2021)
2. Re-enrolment Fee : N\$ 900-00 per student (13 August 2022 – 07 September 2022)

SCHOOL FEES PAYMENT:

1. Eleven monthly payments : Eleven equal payments on or before the **first** of each month (January to November) in advance, **per debit order only**.

PLEASE TAKE NOTE OF THE FOLLOWING POINTS:

1. School fees for second (and more) children per family are reduced as per the school fees schedule.
2. **Written** notification must be given at least **ONE MONTH** in advance should parents wish to withdraw their child/children from the school. Parents will be held liable for one month's school fees should they fail to comply with this policy.
3. Unpaid debit orders and late payments incur a fee of N\$ 450-00.
4. Overdue accounts will be reported to TransUnion (ITC). The student will also be suspended with immediate effect until full payment has been received. Should a student be suspended or expelled, the parents will be responsible for all outstanding fees and legal costs.
5. The school may perform a credit check on parents and/or guardians through TransUnion (ITC).

I/ We, have read, understand and herewith agree to:

1. The above terms and conditions and to honour and submit to all school rules.
2. Pay school fees faithfully and timeously on or before the first of each month.

Date

Full Name of Father/Guardian

Signature

Date

Full Name of Mother/Guardian

Signature

All Nations Christian School: Student Information

Student Name: _____

Student Surname: _____

Date of Birth: _____

Home Language: _____

Citizenship: _____

Residential Address:

Street name: _____

Suburb: _____

Telephone: _____

Postal Address:

P.O. Box/Private Bag: _____

Suburb/Town: _____

Father's Name: _____

Father's Surname: _____

Occupation: _____

Employer: _____

Telephone: _____

Cell phone: _____

E-mail: _____

Mother's Name: _____

Mother's Surname: _____

Occupation: _____

Employer: _____

Telephone: _____

Cell phone: _____

E-mail: _____

Turn Page Over

Emergency Contact Persons Other than Parents:

(Complete both contact persons)

Name: _____

Name: _____

Surname: _____

Surname: _____

Relation to family: _____

Relation to family: _____

Telephone: _____

Telephone: _____

Cell phone: _____

Cell phone: _____

Medical Information:

Med Rescue/Emed Rescue 24 number: _____

Medical Aid Fund: _____

Medical Aid Membership number: _____

Medical Aid Main Member: _____

Telephone: _____

Allergies: _____

Medical Practitioner: _____

Contact number: _____

Any medical condition the school should know of _____

Father's Signature

Date

Mother's Signature



Tel: 061-251 763
 Fax: 061-230 295
 E-mail: info-ancs@iway.na
 Website: www.allnationsschool.com.na

SCHOOL FEES 2022/2023

MONTHLY PAYMENTS - 11 MONTHS	SCHOOL FEES	FAMILY DISCOUNT
PRE-PRIMARY (Gr.00)		
1st child	2,342	
2nd child (in Gr. 00)	2,164	8%
BRIDGING (Gr.0)		
1st child	3,453	
2nd child	3,186	8%
GRADE 1 - 7		
1st child	4,563	
2nd child	4,208	8%
Total - 2 children	8,771	
3rd, 4th and 5th child	3,852	16%
Total - 3 children	12,623	

5% Discount is offered for payment of the total annual school fee by 31 January 2023.

RE-ENROLMENT 2022	FAMILY DISCOUNT
Early Re-enrolment - 1st child	650
Early Re-enrolment - 2nd child	650
Early Re-enrolment - 3rd, 4th, 5th child	650
Normal Re-enrolment - 1st child	900
Normal Re-enrolment - 2nd child	900
Normal Re-enrolment - 3rd, 4th, 5th child	900

*ENROLMENT FOR NEW STUDENTS	2022/23	FAMILY DISCOUNT
Enrolment for 1st child	1800	
Enrolment for 2nd child	1656	8%
Enrolment for 3rd, 4th, 5th child	1512	16%

** Enrolment Fee for new students are payable upon acceptance of child to secure his/her place.*