



MELKBOSSTRAND HIGH SCHOOL LEARNER PROFILE

Learner photo

Please complete the following learner profile in order for us to determine your child's needs for the following year.

Note the following:

Copies of the following documents must be handed in together with this learner profile:

1. a proof of residential address (e.g. municipality account)
2. the learner's most recent school report
3. ID documents of BOTH parents/guardians (where applicable)
4. the learner's birth certificate

- **Only online applications on the WCED website shall be accepted.**
<https://admissions.westerncape.gov.za>
- **Hand in your completed learner profile at Reception once you have completed the online application.**

A. DETAILS OF THE LEARNER

Surname: _____ Name/names: _____

Current grade: _____ to grade: _____ Gender: _____

Home language: _____ Language of instruction: _____

Birth date: (D/M/Y) _____ Religion: _____

ID number : _____

How many brothers/sisters are currently at Melkbosstrand High School? _____

Name, Surname and Grade: _____

Edupac Acc No: _____

Is this the learner's closest public school? _____

Does the learner live in the school's feeding school area, e.g. Melkbosstrand?

If not, specify area: _____

B. ADDRESS DETAILS

1. Father / Guardian Married / Divorced / Widowed _____ Initials & Surname _____ ID number _____ Street address _____ PO Box _____ Town & Code _____ Employer _____ Occupation _____ Contact numbers Work (____) _____ House (____) _____ Cellphone _____ E- mail address _____ REPORT: ADDRESS 1 OR 2?	2. Mother / Guardian Married / Divorced / Widowed _____ Initials & Surname _____ ID number _____ Street address _____ PO Box _____ Town & Code _____ Employer _____ Occupation _____ Contact numbers Work (____) _____ House (____) _____ Cellphone _____ E- mail address _____ REPORT: ADDRESS 1 OR 2?
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C. CONTACT DETAILS IN CASE OF EMERGENCY

Name, surname and address of family member or friend: _____
_____ Postal code: _____
Telephone numbers: Work: _____ Home: _____
Mobile: _____

D. MEDICAL DETAILS

Name of medical scheme: _____ Principal member: _____
Membership number: _____
Any allergies? Supply details.

Any physical disability / -ies of which we must take note? Specify.

Does your child have any concession (e.g. spelling, extra writing time, reader, scribe, etc.) If YES, specify.

Does your child use any prescription medication for attention deficit disorder, diabetes or epilepsy, etc. If YES, specify.

E. DETAILS OF PREVIOUS SCHOOL

Name of the school: _____ Period attended: _____

Postal address: _____ Contact number: _____

Any previous grade repeated? _____ If so, which grade? _____

Reason for leaving the previous school.

Extraordinary performance (s):

(Specify e.g. Colours, Provincial, National, First Team, RCL)

ACADEMIC	SPORTS	CULTURE	LEADERSHIP

F. SPORTS & CULTURE

All learners must be involved in at least ONE summer sport and ONE winter sport. Sports activities can be replaced with ONE cultural activity in summer and ONE cultural activity in winter.

Summer Sports : Choose at least one, mark with X			
Activity	Interested	Already practicing	Achievement
Athletics			
Cross country			
Cricket (boys)			
Cricket (girls)			
Swim			
Tennis			
Golf			
Chess			
Softball			
Tug of war			

Winter sports: Choose at least one, mark with X

Activity	Interested	Already practicing	Achievement
Hockey (girls)			
Hockey (boys)			
Cross country			
Netball			
Golf			
Rugby			
Chess			

Culture: Choose at least one, mark with X

Activity	Interested	Already practicing	Achievement
Choir			
Wind Orchestra			
Drama			
Debate			
Rotary Interact			
Eisteddfod			
Instagram / Journalism			
First Aid			
Cross Connection			
Eco-club			
Photography club			
Art Club			
Radio Melkies			
Rock Band			
Spirit Team			
Musical			

Other:

G. ACADEMICS

Grade 8 & 9 applicants

Creative Arts

TWO modules must be chosen:

- Visual Art **COMPULSORY**.
- The learner needs to make a choice between:✓

DRAMA	
OR	
MUSIC	

If the learner wants to take MUSIC as a second module of Creative Arts, he/she must indicate the instrument and degree of experience, e.g. UNISA, ABRSM, TRINITY and Rockschoools grade 1, 2, 3, etc. or beginner.

Underline the choice of instrument:

Piano / Recorder / Flute / Clarinet / Saxophone / Cello / Trumpet / Trombone / Guitar / Violin / Keyboard / Singing / Drum Kit / other, (specify).

A learner may be asked to do an audition.

Home language

If a learner wants to take both languages at Home Language level, he/she apply to do so. To qualify, the learner must have attained at least 80% in both Home Language and First Additional Language. The language skills shall be strictly assessed and an entrance examination may be requested.

Grade 10 to 12 applicants

The learner must complete a subject choice form on which his/her seven subjects are indicated and attach it to this application form. An eighth subject can only be taken if the learner has achieved an average of 75% or more in the subject and the subject teacher agrees. There are limited place available for practical subjects and learners will be allowed based on their academic achievement. All subject choices are approved by the Headmaster and/or the Head of Academics.

H. Please indicate to whether Melkbosstrand High School is the first, second or third choice as a high school institution.

1	
2	
3	

I. STATEMENT BY PARENT OR GUARDIAN

I declare that ...

- the details in this learner profile are true and correct;
- I take note of the fact that Melkbosstrand High School is a value-driven school and that we as learner and parent will uphold the values of RESPECT, RESPONSIBILITY, CARING, DILIGENCE, SELF-DISCIPLINE and INTEGRITY;
- I indemnify herewith the Melkbosstrand High School, its staff and the members of the School Governing Body (SGB) from any claim from any incident, injury, illness or death, regardless how it occurred during any school activity, travelling, sports, outing, visit or transportation in which the applicant participated voluntarily and the applicant accepts responsibility for any involved risks;
- I have read the contents of the Code of Conduct of Melkbosstrand High School and agree to it and that I shall keep myself and the applicant informed about any adjustments or replacements that may be made;
- I give Melkbosstrand High School the right to attain any form of appropriate medical care for urgent medical treatment that may be required for my child and accept the responsibility for the payment of any costs that may arise from this;
- I shall ensure that my son/daughter meet any obligations (exercises and matches) regarding the extramural school program (sports and culture) in which he/she is involved;
- I shall ensure that my son/daughter be a true ambassador for Melkbosstrand High School at all times;
- I shall ensure that all my child's textbooks (the school 's property) be handled with care AND everything be handed in at the end of each academic year.

Signature: _____

Date: _____

FOR OFFICE USE ONLY

Principal		D6		Treasurer		EDUPAC		CEMIS		CEMIS-no:	
Photo		Birth certificate			Report						
ID of parent (s) and school fund person pay											
Proof of residential address :											