



DOWERGLADES

nursery school

Application Form

The following documents must accompany this application:

- A copy of the applicant's birth certificate
- Copies of both parents' or guardians' identity documents

Year of Entry		Age of Entry	
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Details of Learner			
Surname		Religion	
Name		Current Age	
ID/Passport Number		Resides with	Parents ☐ Guardians ☐
Date of Birth		Gender	Male ☐ Female ☐
Nationality		Home Language	
Sibling in school		Half Day	☐
Position in family		Full Day	☐

Medical Details of Learner			
Medical Aid		Medical Aid Number	
Principal Member			
Is your child on any medication ?			

Please list any known allergies.	
Has your child ever had any significant medical treatments or health issues that we should be aware of? Please share any details.	
Are there any physical, developmental, or learning needs your child has that we should know about to provide the right support? Please describe.	
Is there any additional medical or health information that could help us better support your child?	

Details of Parents/Guardians		
	1st Parent/Guardian (person responsible for account)	2nd Parent/Guardian
First Name		
Surname		
ID Number		
Relationship to child		
Nationality		
Occupation		
Employer		
Tel. W		
Tel. C		

Email		
Residential Address		
Child lives with		

Emergency Contact Details		
Details	Next of Kin	Friend
Name & Surname		
Relationship		
Residential Address		
Tel. W		
Tel. C		