

Email: montessori.life.primary@gmail.com P.O Box D177, The Gables, H126, Eswatini

APPLICATION FOR ADMISSION

YEAR OF ENTRY:		GRADE OF ENTRY:			PRESENT GRADE:	
PLEASE ATTACH THE FOLLOWIN	G DOCUMENTATION TO YOUR APPLICA	TION FORM.				
Most Recent School Report (i	e, Term 1/Term 2, Term 3)				For Office Use Only	
Birth Certificate (1 Copy)			Accept	ed (indicate) Yes No Review	J
Transfer Certificate from prev	vious school		Lower I	Primary 🗀	Upper Primary	
Original Colour Photograph - passport size (2 Prints)			Studen	t No:		
Parents/Guardians ID copies	for both parents/guardians		All doc	umentation	returned: Yes No	
E200.00 Administration Fee n	nust accompany this application form	Attach 1 Passport size Photo here please	_	/hat and w		
	SEC	TION A				
LEARNERS DETAILS:						
Surname:						
First Names:						
Date of Birth (dd/mm/y	ууу):	ID No				
Home Language:		Nationali	ty:			
Learner's Residential A	ddress:					
	erent to Legal Parent/Guardia					
	ol:					
School Telephone:		School Fax N	o			
Has the learner ever rep	eated a Grade:	If yes, which Grad	le?			
Reason for repeating Gr	ade:					
Have any family member	ers been at Montessori Life Pı	rimary or are curren	tly at N	Montess	ori Life Primary?	
Family Member's Name	& Surname:			Pre	esent Grade:	
Family Member's Date	of Birth:					
Any other link/connecti	on with Montessori Life Prima	ry:				••••
Has your child had prev	rious Montessori education? \	Yes/ No.				
If yes, where:	from	(date)	unt	il		
	ng at home:					
@	Inspire ● L			•••••		



Email: montessori.life.primary@gmail.com P.O Box D177, The Gables, H126, Eswatini

MEDICAL INFORMATION:					
Contact Person:					
Medical Aid Name:		Medical Aid No			
•					
Health Problems/Allergies:					
		any medical conditions? Please specify.			
Does you child have any special dieta	ry requirements/ Ple	ease specify			
You're your child have any emotiona					
Has your Child received any Profession	onal Therapy or Sup				
	SECTIO				
	PARENTS PA	RTICULARS			
(Please print clear	·ly)	(Please print clearly)			
<u>Father's Details</u>	<u>s</u> :	Mother's Details:			
Marital Status		Marital Status			
Married 🗖 Divorced 🗖 Single 🗖	Widowed \square	Married \square Divorced \square Single \square Widowed \square			
Title (Prof, Dr, Mr):		Title (Prof, Dr, Mrs):			
Surname:		Surname:			
First Names:		First Names:			
ID No		ID No			
Contact Details:		Contact Details:			
Postal Address:		Postal Address:			
Cod	e:	Code:			
Physical Address:		Physical Address:			
Home Telephone No:	•••••	Home Telephone No:			
Cell No:		Cell No:			
Email Address:		Email Address:			
Liliali Audi C33		Littuti Audi Coo.			
	•••••				







Email: montessori.life.primary@gmail.com P.O Box D177, The Gables, H126, Eswatini

Occupation:					
Name of Employer/Business: Type of Business:					
					Work Telephone:
Business Address:					
Emergency contact information (not husband): Used when father is unreachable					
Full Name:					
Home Telephone: Cell No:					
Father Other:					
ARENT/GUARDIAN THAT THE CHILD LIVES WITH) formation gives us a better understanding of your child's ing your child.					
Current Grade:					
B Enjoys school work					
D Does not like school work					
B Very keen and/or above average involvement					
D Not enthusiastic					
hip roles:					







Email: montessori.life.primary@gmail.com P.O Box D177, The Gables, H126, Eswatini

CHAI	RACTER AND PERSONALITY					
Α	Strong personality, bright, cheerful, cooperative	В	Builds strong personal relationships			
С	More reserved	D	Finds social interaction challenging			
Comr	ments:					
My C	hilds Hobbies are:					
My C	hild does not enjoy the following:					
<u>Additi</u>	onal Language					
Each student here at Montessori has a choice between taking French or Advanced SiSwati as a second language. All students do conversational / cultural SiSwati as per the Government requirements. Please fill in and tick below as to which language he/she will be doing as a <u>second language</u> .						
	VANCED SISWATI					
☐ FR	ENCH					

Thank you for your application! Our enrolment officer will be in contact with you shortly to give you an interview date for your child. Should you need any more information, please do not hesitate to contact the school office. It is our hope that our students will be responsible, caring members of society. That they will recognize they have the power and resources to effect change, as well as the self-esteem and confidence to pursue their goals.



