

The drop-off time in the mornings (6:45 -7:45), school finishes at (1:00 – 2:00)

Address: 34 Elm Road, Moseley Park, Pinetown,3610, KwaZulu-Natal

Tel: 078 679 1105

Email: taljaard@dohsamenity.co.za

Admin: admin@dohsamenity.co.za

FB: D.O.H.S. AMENITY

Student Name: _____

Tick the grade you're applying for:

| | | | | | | | | | | | | |
|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|

Grd R Grd 1 Grd 2 Grd 3 Grd 4 Grd 5 Grd 6 Grd 7 Grd 8 Grd 9 Grd 10 Grade 11&12 (GED)

How did you hear about D.O.H.S.?

- Social Media / Pamphlets
- From Family/Friend

Online Home-Schooling is a replacement for attending a mainstream school. ***Grade 1-9 must register with the Department of Education*** in their province, the forms must be sent by the parents.

Grade 10-12 students will be registered with SACAI via the Academy.

Requirements

- Laptop or tablet & Headphones
- Exam pads
- Pen, Pencil, Rubber, Ruler and Sharpener
- Glue and Scissors
- A4 Exercise book for each subject (grade R to 4)
- Diary
- Lever Arch File
- X1 ream paper

Student Details

Full Name of applicant _____ Male or Female _____

Date of birth _____ Student ID _____

Residential Address _____

Home language _____

Any Special needs _____

Parents/Guardians Information

Fathers Name _____ Mother Name _____

ID _____ ID _____

Postal address _____ Postal Address _____

Email _____ Email _____

Occupation _____ Occupation _____

Work Tel _____ Work Tel _____

Cell: _____ Cell: _____

Marital status (Married/Widowed/Single/Divorced) _____

Name of person responsible for account _____

Postal Address (if not indicated above) _____

DOHS AMENITY OPTIONS: IN HOUSE DIGITAL MONITORING

Has your Child previously attended another school? (Yes/No) _____

If yes, please give us the following details: -

Name of Previous School attended _____ Tel _____

Reason for leaving _____

Section A – Medical Information

Allergies _____ Special Needs _____

Family Doctor _____ Tel No _____

Medical Aid _____ Medical Aid Number _____

Has your child received all the necessary immunizations? Yes/No

If not, please give details _____

Has your child suffered any of the following illnesses (Please indicate with a TICK)

- Asthma
- Enteric Fever
- Measles
- Scarlet fever
- Chicken Pox
- Mumps
- Diabetes
- Whooping Cough

| Does/Is/Has your Child: | YES OR NO | Details |
|---|------------------|----------------|
| Suffer from any Illnesses or disability | | |
| Receiving medical treatment | | |
| Suffered or been treated for psychological or emotional upset | | |
| Had any operations | | |
| Specify any relevant medical data | | |

Consent

NB: in a critical situation, please bear in mind that there may not be time to refer to your Child's records. The school therefore reserves the right to utilize the quickest medical service available.

I _____ being the parent/legal guardian of _____

Hereby agrees that the appointed D.O.H.S. Amenity representative may carry out emergency treatment as may be necessary.

SIGNATURE OF PARENT/LEGAL GUARDIAN _____

Section B – Details of another contact in the case I of an Emergency

First Names _____ Surname _____

Relationship _____ Work No _____

Cell _____ Email _____

Section C – Declaration

We, the undersigned _____ hereby certify that the

Information given by us on this application is complete and accurate.

We agree to the conditions as set out below.

We accept that D.O.H.S. Amenity is based on Christian Principles and undertake not to undermine this position.

The child's application will be re-considered in the case where relevant, important information, which should be brought to our attention, is withheld during the interview.

****NB: the signatures of both parents and or guardians are required below****

Signature of Father _____ Date _____

Signature of Mother _____ Date _____

Section D – Details of Account Holder

Full name and surname _____ Relationship _____

ID number _____

Parent status (please TICK correct block below)

- Child living with parent
- Child's Legal Guardian
- Access rights to child
- Access rights in Emergency

Section E – Declaration of Account holder

I, the undersigned, _____ hereby certify that the information given by me on this application is correct and accurate. We accept liability to D.O.H.S. Amenity for the due and punctual payment of all Amenity Fees, or in respect of participation in or attendance of any extracurricular activity. (All monies paid are NON-REFUNDABLE)

I accept the financial Terms and Conditions of which I have received a copy.

****NB: The signature of the account holder as well as that of the 2nd Parent is required****

Signature of Account Holder _____ Date _____

Signature of 2nd Parent _____ Date _____

DOHS Amenity (PTY) LTD FEE STRUCTURE

****2025 R300 REGISTRATION FEE TO SECURE YOUR CHILDS SPACE**

2025 Home-schooling Amenity Fees

****2025 Fees Structure over 12 Months****

- Grade R: R1200 (own device)
- Grade 1-3: R1150 (own device)
- Grade 4-9: R1100 (own device)
- Grade 10: R1200 (own device)
- Grade 11-12: R1300 (own device)

FEES PAYABLE MONTHLY IN ADVANCE DIRECT TO THE HOME-SCHOOL AMENITY

Account Name: DOHS AMENITY (PTY)

Account Holder: DOHS AMENITY (PTY) LTD

Bank: Nedbank

Account Number: 129 217 2746

Branch: 198 765

Cheque/Current Account

Reference: Students FULL Name

CURRICULUM OPTIONS

| <u>Grade</u> | <u>Curriculum style</u> | <u>Details</u> | <u>Fees p/m</u> | <u>Fees Annual</u> |
|--------------|-------------------------|---|--|---------------------------------|
| R -3 | Live Classes | CAPS | R900 reg fee R130 DOE REG R950 fee | |
| 4 -10 | Pre-Recorded | American based online lessons | R600 fee | R4500 |
| 11 -12 | Pre- Recorded | American based online lessons -GED- | R130 per pre exam(x4) R1500est Per final exam(x4) | R3500 Valid for 12 months |

GRADE R – 3 CURRICULUM BANKING DETAILS

****FEES PAYABLE MONTHLY IN ADVANCE DIRECT TO GEN Z ACADEMY GRADE R - 3****

NAME: GenZCyber Academy (PTY) LTD

BANK: CAPITEC BUSINESS

Account Number: 105 230 1312

Branch Code: 450105

Reference: Please use the child's full name

(thereafter use the invoice number as seen on your statement)

Thank-you for joining Us here at our Amenity, we look forward to getting to know you all and helping your Children succeed and grow into successful Young Adults.

We are Christian based and expect good/clean conduct from all students, we are a no-nonsense Amenity. We like to keep all levels of communication honest and respectful, so we can work together well and all can go smoothly. Please feel free to add me on whatsapp and we can keep connected. Please fill in your forms and return asap. Any additional information you might need to inform me of, please fill in below.

I (Parent/Guardian) _____ acknowledge all above information provided by myself the Parent/Guardian of (Students name)

_____ is to the best of my Knowledge correct and that I will to the best of my ability follow all rules and requirements mentioned above.

Parent Sign_____

Kind Regards

Mrs T Taljaard

D.O.H.S.AMENITY

General

This agreement constitutes the whole agreement between the parties relating to the subject matter hereof. No amendment or consensual cancellation of this agreement or any provision or terms thereof or any agreement, bill of exchange or other document issued or executed pursuant to or in terms of this agreement and no settlement of any disputes arising under the agreement and no extension of time, waiver or relaxation or suspension of any of the provisions or terms of this agreement, bill of exchange or other document issued pursuant to or in terms of this agreement shall be binding unless recorded in a written document signed by the parties. Any such extension, waiver or relaxation or suspension which is so given or made shall be directly constructed as relating strictly to the matter in respect whereof it was made given

1. Toys are not to be brought to school.
2. Please mark all clothing. We will not be responsible for unmarked property. All lost property will be donated to hospice on the last day of the year.
3. If your child is sick, please phone in to inform that he/ she will not be attending school.
4. If your child is sick and is on medication (anti-biotic or flu medication), please keep them at home until the course is complete. We will not take responsibility for anything that happens to your child if you send them to school sick. If you send them to school sick they will be sent back home.
5. **Lessons start at 8am sharp so please make sure your child is here by 7:45am so that they can get settled in. The school gate will close at 8.30am and no child will be allowed to enter thereafter.**
6. School hours are from Monday to Thursday 8:00am to 2:00 pm. Fridays we close at 1.00 pm **PROMPT!** If you are running late for any reason, please phone in and let us know before 4pm.
7. If you pick up your child late, a fee will be served at R100 for every 15 minutes late which will be payable to the school the following day, if you fail to pay, the outstanding amount will be added to your school fees at the end of the month.
8. Each child is required to have appropriate stationery and toiletries.
9. We offer extracurricular activities and will keep parents updated as these will change every now and again. Currently we offer Arts & Crafts – if you are interested in this please ask your child’s teacher for the application form. Please note these are at an extra cost.
10. **WE DO NOT PROVIDE ANY FOOD.** So please if parents could pack a healthy full day’s lunch for your kids and make sure you pack enough if they are here all day. Here is the routine for food during the day so you have an idea of how much to pack –10am (snack time); 12pm (lunch time); 2:00pm (snack time). Things such as sandwiches, chips, cracker bread, health biscuits, yogurt, fruit (cut up if your child prefers), healthy left over meals etc. Breakfast may be bought in for your child to eat at school.

I have read this entire application form thoroughly and agree that I/we understand all the information pertaining to it.

Name and Signature of Parent

Date