



IMHOFF WALDORF SCHOOL

Bringing Learning to Life

Imhoff Farm, Kommetjie Rd, Kommetjie
P O Box 1206, Sun Valley, 7985
General Enquiries: Tel: (021) 783-4237
Admissions: Tel: (021) 783-3056
Admissions Email: admissions@imhoffwaldorf.org
Financial Matters: Tel: (021) 783-0090
www.imhoffwaldorf.org

THE APPLICATION PROCESS

If you would like your child to attend Imhoff Waldorf School, these are our application requirements:

- A** Complete both sides of the application form, answer all the questions and make sure that the form is signed.
- B** Complete the conditions of entry form, retaining your copy.
- C** An application fee of R300. Please note that this is not refundable.
- D** For applications for **primary and high school**, a copy of your child's most recent report is required.
- E** A certified copy of your child's birth certificate must accompany the application.
- F** Copies of any medical, psychological or therapist's reports and assessments, if relevant, must accompany your application.
- G** Complete the confidential interview for all faculties.

The next steps are:

1. When there is the possibility of a place in the class, the teacher will take the application from the waiting list to the faculty meeting to authorise an interview with your child and you.
Please note: We do not interview if the class is full, but keep your application on our waiting list.
2. A screening by our remedial teacher may be requested for primary school children.
3. Acceptance is not guaranteed. Subsequent to the interview, the application will be reviewed by the faculty meeting and the needs of the class as a whole taken into account before acceptance.
4. There will be a short interview with the Bursar.
5. You will be notified in writing if your child has been accepted.
6. On acceptance, a non-refundable deposit of R4000 is payable and you will need to sign an Acceptance of Place Agreement.



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Reg. fee paid _____

Date of appl. _____

RIGHT OF ADMISSION RESERVED

Please ensure that the following accompany this form:

- A non-refundable registration fee of R300.
- A copy of the most recent school report (**for Primary & High School applicants**).
- Copies of any relevant assessments
- A certified copy of your child's birth certificate
- Please complete & return the attached Confidential Information Form.

Information supplied will be treated as confidential for use in school records. Abridged contact details will appear in the parent directory.

CHILD'S DETAILS:

First name & Surname: _____ Date of birth: _____ Gender: _____

Identity no: _____ Class applied for: _____ Year to start: _____ Present class: _____

Present school & tel. no.: _____

CEMIS NO (National Student Registration No) _____ Are any monies owed to this school? _____

Learning/adjustment problems / requirements: _____

General health: _____

Relevant medical history & current medication/treatment/therapy: _____

Allergies: _____

Doctor's name & tel. no.: _____

BROTHERS & SISTERS:

Name: _____ Age: _____ Gender: _____ Class: _____ School: _____

Name: _____ Age: _____ Gender: _____ Class: _____ School: _____

Name: _____ Age: _____ Gender: _____ Class: _____ School: _____

What are your reasons for wanting your child to attend this school? _____

Which skills can you offer the school? eg. Artistic, business, craft, artisan: _____

Is there any further information you would like to know? _____

How did you hear of Imhoff Waldorf School? Open Day _____ Newspaper advert: _____ Word of mouth: _____

Other: _____

PARENTS' PARTICULARS

FATHER

MOTHER

Surname: _____ Surname: _____

First Name: _____ First Name: _____

Title: _____ Title: _____

Marital Status: _____ Marital Status: _____

Identity No.: _____ Identity No.: _____

Passport no. & Country of issue: _____ Passport no. & Country of issue: _____

Home Address: _____ Home Address: _____

Home phone no.: _____ Home phone no.: _____

Cell no.: _____ Cell no.: _____

E-mail address: _____ E-mail address: _____

E-mail address for school fees: _____ E-mail address for school fees: _____

Postal Address: _____ Postal Address: _____

_____ Code: _____ Code: _____

Occupation/profession: _____ Occupation/profession: _____

Business name: _____ Business name: _____

Business address: _____ Business address: _____

_____ Code _____ Code _____

Business phone: _____ Business phone: _____

WHO IS RESPONSIBLE FOR PAYMENT OF SCHOOL FEES? _____

To whom should ACCOUNTS be sent? (Mother/Father/Other) _____

To whom should CORRESPONDENCE be sent? (Mother/Father/Other) _____

AGREEMENT

- I/We, the legal guardian/s of the above named child, understand that the completion of this form does NOT guarantee this child a place at the school.
- On acceptance of the child, payment of a non-refundable acceptance fee of R4000 secures your child's place.
- I/We understand that if my child is accepted, I/we undertake to give not less than three (3) calendar months' notice in writing to the school before withdrawing the child from the school, or, alternatively to pay three (3) calendar months' school fees in lieu of such notice.
- I/We understand that by signing this form I/we give consent for a credit check to be carried out if required.
- I/We accept that there will be an additional charge if a remedial assessment of any nature is needed.

I/We enclose:

- A non-refundable administration fee of R300.
- A copy of the child's latest school report (if applicable) & any other relevant assessments (if applicable)
- A certified copy of the birth certificate

Signed: (Parent) Date:

Signed: (Parent) Date:

ACCOUNT DETAILS

Account name: Imhoff Waldorf School
Account type: Current Account
Account number: 07 209 1401

Bank: Standard Bank
Branch: 036009 Fish Hoek
Swift code: SB ZAZA JJ

Beneficiary reference: Your child's full name



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High School Application: Confidential Information Form

TO BE COMPLETED IN FULL

1. STUDENT DETAILS:

Surname of child: _____ Male: Female:

Full names: _____ Nationality: _____

Date of birth: _____ Home language: _____ Religion: _____

Current school: _____ Province: _____ Grade: _____

CEMIS no. (compulsory): _____ Grade applying for: _____ Year to start: _____

Marital status of parents: single: married: divorced: separated: remarried: deceased:

Is the child from: this marriage: previous: adopted: other:

If other, please specify: _____

With whom does the child live: _____

Siblings	Age	Gender	School
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

2. PARENT / LEGAL GUARDIAN DETAILS:

FATHER / LEGAL GUARDIAN A: If legal guardian, please specify relationship: _____

Surname: _____ First names: _____

Residential address: _____ Code: _____

Postal address (if different): _____ Code: _____

ID No: _____ Home Tel: _____ Cell no: _____

Details of profession: _____

Employed by / own business: _____ Tel: _____

Email address: _____

MOTHER / LEGAL GUARDIAN B: If legal guardian, please specify relationship: _____

Surname: _____ First names: _____

Residential address: _____ Code: _____

Postal address (if different): _____ Code: _____

ID No: _____ Home Tel: _____ Cell No: _____

Details of profession: _____

Employed by / own business: _____ Tel: _____

Email address: _____

3. RELATIONSHIP WITH WALDORF EDUCATION:

Where did you hear about Waldorf education? _____

Do you know anything about Waldorf education? Please specify:

Imhoff is a community based school, do you have any talents and/or skill sets you can offer to the school?

4. SCHOOL HISTORY:

Has the child been to: crèche: nursery school: day mother: home:

At what age? _____ for how long? _____

Present school: _____

Address: _____

Date and grade of entry: _____ Responsible teacher: _____

Previous schools attended:

School	Year	Grade on leaving
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Has the child ever been asked to leave a school: YES NO

If yes, state reason: _____

Has the child been held back in class: YES NO

If yes, describe the child's specific problems: _____

5. ABSENCE FROM SCHOOL

a. Is the child regularly absent from school? YES NO

If yes, give the approximate frequency, and reasons for absence: _____

b. Are you always aware of absences? YES NO

If not, state reason: _____

6. HOMEWORK SURVEY

- a. Does child have his/her own desk or work space? YES NO
- b. Is this space separate from the rest of the household? YES NO
- c. Is this space quiet and free from disruption? YES NO
- d. Is your child self-motivated to do homework? YES NO
- e. Does any adult supervise a set homework session? YES NO
- f. Is anyone available at home to help with homework if necessary? YES NO
 If so, who? _____
- g. Is your child generally able to do the homework without help? YES NO
- h. Do you have access to: i. a library YES NO ii. internet information YES NO
- i. Are there any areas in which there is no help for homework (e.g. Math's)? YES NO
 If so, please specify: _____
- j. Adult presence at home; give names and times:

COMMENTS:

7. HISTORY RELATING TO OTHER INTERVENTIONS:

- a. Has the child had an educational or therapeutic assessment? YES NO Date: _____
 By whom: _____ Why: _____

 Recommendations: _____
- b. Has the child had remedial lessons or therapeutic interventions with any other person(s)? YES NO
 With whom: _____ Grade: _____ How long: _____
 Why: _____

- c. Describe the child's difficulties as you see them: _____

- d. What do you feel lies behind them: _____

- e. What is the child's attitude towards them: _____
- f. Would you continue with remedial lessons / therapy if still appropriate? YES NO

8. EXTRA MURAL ACTIVITIES

List extra-mural activities with approximate number of hours spent on each activity per week:

Activity	Number of hours
_____	_____
_____	_____
_____	_____
_____	_____

9. ELECTRONIC ACCESS AND USAGE:

a. Does the child watch TV? YES NO How many hours during the week? _____
 How many hours over the weekend? _____ List the programmes: _____

b. Does the child watch video's/DVD's? YES NO How often? _____
 List type of video's/DVD's: _____

c. Does the child listen to music? YES NO List type of music: _____

Does he/she have his/her own music centre? YES NO How many hours used per day? _____

Does the child have an iPod or MP3/MP4 player? YES NO How many hours used per day? _____

d. Does the child have any gaming devices &/or play video/network games? YES NO
 How many hours per week? _____ List which games: _____

e. Does the child have a cell phone? YES NO It is internet enabled? YES NO
 How many hours per day does the child spend on his/her cell phone? _____

f. Does the child use a cell phone social chat network/s (e.g. MXIT/WASSAP etc.)? YES NO

g. Does the child have access to have to an internet line (other than the cell phone)? YES NO

h. Does the child use internet social network/s (e.g. Facebook etc.)? YES NO

i. Does the child watch YouTube? YES NO

j. How many hours per day does the child spend on the internet? _____

k. Do you have access to his/her internet &/or social networking profile/s? YES NO

l. Is the computer used for any other reason? YES NO

If so, please list: _____

m. Does the child use any other electronic devices on a regular basis? YES NO

If so, please list: _____

COMMENTS:

