



**SELBORNE  
COLLEGE**

# Welcome to Selborne College

**2024**

Dear Sir / Madam

Thank you for your enquiry to continue your son's High School education at Selborne College.

Selborne College is a traditional boys' school with a proud history. Selborne College offers a holistic education with various opportunities for our boys. We pride ourselves in being a Value Driven School, as we prepare our young men for significant roles in our society.

Please note that there are vacancies for Grade 8 learners and **limited** vacancies for Grades 9, 10 and 11 learners. Accordingly, please ensure that you apply at more than one school for your son.

It is imperative that you are informed that Selborne College is an **English medium school** (Grade 8 – 12). All subjects are taught in English except for the first additional languages (Afrikaans and IsiXhosa). proficiency in English therefore, is a pre-requisite for Admission to Selborne College.

All Applications to be hand delivered for the attention Admission Office, Mrs Hodgkinson. Applications will **ONLY** be accepted with submission of **ALL** the relevant certified documentation (as per the list attached). Applications will close on the 8th April 2024. (NO LATE applications will be considered.) Interviews may be conducted during the months of April, May and June.

Kindly note that anyone applying from outside of South Africa must be in possession of a valid Passport and Study Permit, before any application may be considered. Failure to comply with these regulations may lead to fines being enforced by South African Law.

Yours faithfully

**HEADMASTER**  
Mr A C Dewar



# School fees structure 2024

The school fee table below is in respect of our 2024 fee structure.  
Fees for 2025 will only be available in November 2024, once the SGB Budget Meeting has been held.

	Monthly (Months x 11)	Termly (Paid termly, in advance)	Annually (Paid annually, in advance)
School fees only (Day scholar only)	R4 680	R12 870	R51 480
			<i>No discount for school fees</i>
Boarding fees (Full time boarding - R62 700)	n/a	R15 675	R 62 700
			<i>Discounted fee - R59 000 If settled by 1 February 2024</i>
Boarding fees (Weekly boarding - R44 660)	n/a	R11 165	R 44 660
			<i>Discounted fee - R42 500 If settled by 1 February 2024</i>
Boarding ADHOC night fee	R250,00 per night (invoiced monthly)		
Day scholar deposit	R5 000 <i>(The deposit covers the first monthly instalment of school fees and the balance is raised as your refundable deposit)</i>		
Boarders deposit	R5 000 <i>(The full deposit is held to cover breakages and is held in a suspense account until your son completes grade 12 or withdraws from hostel.)</i>		

**Please note the following :**

1. Fees are payable in South African Rand ONLY
2. A full term's written notice of withdrawal of a pupil is required. If this is not supplied, a term's fees will be charged in lieu of written notice not received
3. A full term's notice is required should a pupil change from being a boarder to a day scholar.

Should you have any further queries regarding the Financial Structure of our school, kindly contact our Bursar via telephone or email ([bursar@selborne.co.za](mailto:bursar@selborne.co.za)).



**SELBORNE  
COLLEGE**

# Banking details

**2024**

## Banking details for Selborne College

Account name	Selborne College
Bank	Standard Bank
Branch code	0 510 01
Account number	2415 670 09
Your reference	Son's <i>name &amp; surname</i> 2025

## Banking details for Norton House

Account name	Selborne College
Bank	Standard Bank
Branch code	0 510 01
Account number	2415 670 41
Your reference	Son's <i>name &amp; surname</i> 2025



**SELBORNE  
COLLEGE**

# Application form 2024

**CLOSING DATE FOR GRADE 8 APPLICATIONS: 8 APRIL 2024 (12H00)**

**GRADE 9-11 APPLICATIONS WILL BE CONSIDERED SHOULD A VACANCY EXIST IN THE GRADE.**

**ADMINISTRATION FEE of R100.00 is payable with application. ALL admin fees due on submission by EFT (ONLY)**

Grade applying for (please indicate with an X)	8	9	10	11	12
Admission as a (please indicate with an X)	Day scholar		Boarder	Full time	
				Weekly	
Current school					
Year (admission req.)	<b>2025</b>				

## 01

### Required documents

**No application will be accepted / processed without all the relevant documentation attached. Please use this form to ensure you have collected all the necessary information and attached it to your application form before submitting your Admission pack to the school.**

Documents to be attached to this application:

Selborne College application form	<input type="checkbox"/>	Four identical identity size photographs of your son. <i>(Photos to be taken in year of application)</i>	<input type="checkbox"/>
Certified copy of your son's unabridged birth certificate <i>(If you need to apply for this, please supply us with an ordinary Birth Certificate together with the receipt for the unabridged one.)</i>	<input type="checkbox"/>	Certified copy of your son's final grade 6 report	<input type="checkbox"/>
Copy of medical aid membership card <i>(back and front)</i>	<input type="checkbox"/>	Copy of your son's Road to Health/Immunisation card	<input type="checkbox"/>
Certified copy of mother's Identity Document or Passport	<input type="checkbox"/>	Certified copy of father's Identity Document or Passport	<input type="checkbox"/>
Certified copy of Identity Document of person responsible for the school fee account of the pupil <i>(if not the parent or guardian).</i>	<input type="checkbox"/>	Copy of proof of employment or payslips for both parents/guardian. <i>(Not more than three months old.) (If Self Employed a letter from Bookkeeper/Accountant.)</i>	<input type="checkbox"/>
Proof of residence - A municipal utility accountant in the name of the Parent/Guardian. <i>(Not more than three months old.) (Proof of Residence is required for both parents if not living at the same address)</i>	<input type="checkbox"/>	Certified copy of Court Ruling for Guardianship <i>(if applicable) (Non-South African Residents to provide certified copies of Passport/ Study Permit/Refugee Status issued by the Department of Home Affairs.)</i>	<input type="checkbox"/>
A certified copy of the death certificate <i>(if applicable) (for single parents)</i>	<input type="checkbox"/>	A certified copy of the Identity Document/Passport and contact details of the other parent if never married. <i>(for single parents)</i>	<input type="checkbox"/>
A certified copy of the final divorce agreement <i>(if applicable) (for single parents)</i>	<input type="checkbox"/>	Certified copy of Court Ruling for Guardianship <i>(if applicable)</i>	<input type="checkbox"/>
Non-South African Residents to provide certified copies of Passport/ Study Permit/Refugee Status issued by the Department of Home Affairs.	<input type="checkbox"/>		

# 02

## Applicant information

### Details of applicant

Surname		Preferred name			
First name(s)		Learner cell number			
Birth date	YYYY/MM/DD	Learner email address			
Citizenship of learner	SA Citizen	Identity number	<i>Pupils 16 yrs or older please attach copy of Identity Doc.</i>		
	Non SA Citizen	Passport number	<i>Copy of Passport/Study Permit is required if not South African</i>		
	Asylum seeker	Refugee status	<i>Copy of Passport/Study Permit is required if not South African</i>		
Population group (please indicate with an X)	African /Black	Asian /Indian	White	Coloured	Other
Home language		Preferred language of instruction			
Religion/Church		Mode of transport			
Physical address	Home telephone number				
City/Suburb			Code		
Province of residence		Country of residence			
Emergency contact name	<i>Of the person your son LIVES with</i>	Emergency contact surname	<i>Of the person your son LIVES with</i>		
Relationship	<i>Of the person your son LIVES with</i>	Emergency number	<i>Of the person your son LIVES with</i>		
Deceased parent (please indicate with an X) <i>Provide a copy of death certificate</i>		Mother	Father	Both	

(Continued on next page)

## Achievements

Applicant's activities and involvement in current school. Please list any noteworthy achievements (Provincial representation, Captaincy, etc)

<b>Academic</b>	
<b>Cultural</b>	
<b>Sport</b>	<i>Summer sport</i>
	<i>Winter sport</i>
<b>Leadership positions</b>	

## Extra-mural participation

All learners are expected to participate in sport at school during the afternoons (at least one in summer and one in winter). Please indicate those sports in which you would like your son to participate.

Does your son participate actively in a School Sport & Cultural Programme?		YES	NO	If NO, specify reason:			
Indicate those sports in which you would like your son to participate.							
Summer	Athletics	Cricket	Rowing	Swimming	Water Polo	Tennis	Squash
Winter	Rugby		Hockey	Squash	Tennis		Cross Country

## Dexterity of learner

Right handed

Left handed

Ambidextrous

(Continued on next page)

## Previous school information

Name of previous school					
Name of pre-primary school					
Province			Country		Code
Has applicant previously repeated a Grade?	YES	NO	If YES, which grade?		
Has applicant previously applied at Selborne?	YES	NO	If YES, which year?		

## Medical information (Please attach copy of medical aid card)

Medical aid name		Plan	
Membership number		Principal member	
Family name of Doctor		Doctor's number	
Doctor's address			
Medical conditions	<p><i>Special Health Problems or any important information (e.g. Asthma, Epilepsy, Allergies etc.) including medication requirements</i></p>		

*(Continued on next page)*

# LSEN questionnaire (Please provide supporting documentation)

Do you have any special educational needs?	NO	YES
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If YES, please attach Educational Report.

If your son has an existing approved CONCESSION with the Department of Education - kindly attach the approved letter to this application.

Please indicate with an X if you have been diagnosed with any of the following, kindly supply supporting documentation (e.g. Doctors Certificate or historical report). If not mentioned, please indicate what your diagnosis is:

Anxiety Disorder		Hard of Hearing	
Aphasia		Hemiplegic	
Attention Deficit Disorder without hyperactivity		Impaired Lower Limb	
Attention Deficit Hyperactivity Disorder		Impaired Upper Limb	
Auditory Processing Disorder		Insomnia	
Austic Spectrum Disorder		Mild/Moderate Intellect Disabled	
Blind		OCD	
Cerebral Palsied		Paraplegic	
Chronic Medical Condition		Partially Sighted	
Conduct Disorder		Profound Intellectual Disabled	
Deaf		Quadriplegic	
Deaf/Blind		Schizophrenia	
Depression		Social Communication Disorder	
Dyscalculia		Speed Sound Disorder	
Dysgraphia		Stuttering	
Dyslexia		Traumatic Head Injury	
Epilepsy		Other (Specify)	
Fetal Alcohol Syndrome			

*(Family information on next page)*



# 03

## Family information

### Previous relatives at Selborne (Grandfather/Father/Uncle/Brother)

Name and surname	Relationship	House (Crewe/Fuller/Malcomess/Reece/Perry)	Exit Year

### Details of siblings

Name and surname	School/Tertiary Institution	Grade	Year

### Details of biological father/guardian

Surname				Title	
First name(s)					
ID number					
Cell number			Work number		
Email address			Home number		
Marital status (please indicate with an X)	Single		Married		Divorced
	Widower <small>Please provide death certificate</small>		Guardian <small>Please provide death certificate</small>		
Home address					
				Code	
Postal address, (if different to above)				Code	
Occupation			Work email		
Name of employer	<small>(If parent is state employed, state name of Institution or if self employed, state name of business)</small>				
Work address					

## Details of biological mother/guardian

Surname					Title		
First name(s)							
ID number							
Cell number				Work number			
Email address				Home number			
Marital status (please indicate with an X)	Single		Married		Divorced		
	Widower <i>Please provide death certificate</i>			Guardian <i>Please provide death certificate</i>			
Home address							
						Code	
Postal address, (if different to above)							
						Code	
Occupation				Work email			
Name of employer	<i>(If parent is state employed, state name of Institution or if self employed, state name of business)</i>						
Work Address							

## Emergency contact numbers

(Not parents' details - Next of kin, in case of emergency, if the school cannot get hold of either parent)

Surname					Title		
First name(s)							
ID number							
Relation to pupil							
Cell number				Work number			
Email address				Home number			
Marital status (please indicate with an X)	Single		Married		Divorced		
	Widower <i>Please provide death certificate</i>			Guardian <i>Please provide death certificate</i>			
Home address							
						Code	

Initials of both parents

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## Additional information

Applicant living with	Parents	Mother	Father	Guardian	Other
Number of siblings	Applicant's position (eg. first born)				
Communicate with	Parents	Mother	Father	Guardian	Other
Parent responsible for school fees (Please note both parents are responsible for fees) Kindly indicate who is to receive the statements	Mother		Father	Other	
Email address for statements					
Payment method	Annual	Termly	Monthly	Debit order	

## Social grants

Does this learner benefit from the National School Nutrition Program?	YES	NO	Student study time	Full time	X
Do you receive a social grant? (please indicate with an X)	YES	NO	Which type of grant do you receive? (please indicate with an X)	Child support	Maintenance
If YES, please provide a Social Grant Number				Foster child	Care-dependancy
Are you currently receiving a School Fee Exemption? (please indicate with an X)	Yes	No	Partial	Not applicable	

Initials of both parents

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(Financial information on next page)

# 04

## Financial information

### Details of person responsible for account (to be completed if not the father or mother)

Surname					Title	
First names						
ID number						
Cell number			Work number			
Home number			Email			
Marital status (please indicate with an X)	Single		Married		Divorced	
	Widower <small>Please provide death certificate</small>			Guardian <small>Please provide death certificate</small>		
Home address						
					Code	
Postal address, (if different to above)						
Occupation			Work email			
Name of employer	<small>(If parent is state employed, state name of Institution or if self employed, state name of business)</small>					
Work address						

Signature

Initials of both parents

 

## Admission application

Completion of this application and the payment of the R100 administration fee is not a guarantee that your child/ward will be accepted at Selborne College. This fee is refundable upon request if the application is unsuccessful.

You will be informed of the school's decision by the 31 August 2024.

A deposit of R5 000 is payable within 14 days to secure the position offered.

*(Academic information on next page)*

# 05

## Academic information

### Language choice (Grade 8 - 9)

All pupils do English as their primary language. Please indicate which of AFRIKAANS or ISIXHOSA you choose as his first additional language.	Afrikaans	Isixhosa
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### Academic subject choice (Grade 10 - 12)

	Subjects	Please tick
<b>Compulsory subject</b>	English home language	<b>X</b>
<b>First set</b> (Choose one subject only)	Afrikaans (First additional language)	
	Isixhosa (First additional language)	
<b>Second set</b> (Choose one subject only)	Mathematics	
	Mathematical literacy	
<b>Compulsory subject</b>	Life orientation	<b>X</b>
<b>Third set</b> (Choose one subject only)	Physical sciences	
	Geography	
	Music	
	CAT	
	Visual art	
<b>Fourth set</b> (Choose one subject only)	Life sciences	
	History	
	Geography	
	IT* (IT will only be offered if there is sufficient demand)	
	Music	
<b>Fifth set</b> (Choose one subject only)	Accounting	
	Engineering graphics and design	
	Life sciences	
	Visual art	
	Music	
	Business studies	

Initials of both parents

# 06

## Declaration by parent/guardian

Should my son be accepted at Selborne College, I hereby agree to:

Accept the ethos of the school as contained in the Mission Statement (will receive this with the acceptance pack)	Yes	No
Abide by the Code of Conduct of Selborne College (will receive this with the acceptance pack)	Yes	No
Acknowledge the authority of the Principal, the educators and student leaders	Yes	No
Pay the compulsory school fees as agreed by the parent body at the Annual Budget Meeting	Yes	No
Pay any bank charges and interest on any outstanding fees	Yes	No
Notify the Principal, in writing, in the event of my child leaving the school at least one term in advance or pay a terms fee in lieu of such notice. (This is if the pupil is withdrawn for reasons other than disciplinary or financial default)	Yes	No
In addition to a withdrawal, I undertake to return all books and other property belonging to the school	Yes	No
Ensure that my son attends school regularly and, should my son be absent from school for any reason, to inform the school in writing	Yes	No
Pay all costs incurred for damage to school property or losses caused by my son	Yes	No
I am fully aware of the admission requirements of Selborne College as contained herein.	Yes	No
I hereby grant Selborne College and its associate bodies irrevocable permission to publish photographs and videos of my son throughout his scholastic career, encompassing official and unofficial school events, both on and off the school premises (IMAGE RELEASE FORM - will receive this with the acceptance pack).	Yes	No
I hereby consent to my son's participation in any school activity outside the school premises. I further agree that the educators of the school, or a person appointed by the school, may transport my son to and from the school premises for the purposes of school activities outside the school grounds (CONSENT FORM FOR LEARNER TRANSPORT - will receive this with the acceptance pack).	Yes	No
I will take responsibility for ensuring that my son is adequately insured against personal injury or related risks. I will also ensure that his personal belongings are marked and, if necessary, adequately insured against loss and I understand that the school cannot be held responsible for any losses or damage incurred.	Yes	No
Whilst involved in school activities, I authorize the Principal (or appointed staff member) to act in loco parentis, including granting consent for medical treatment in the case of an emergency, once all reasonable efforts to contact the pupil's parents/guardians have been made.	Yes	No
I accept that in line with POPIA (Protection Of Personal Information Act) Selborne College will attempt to ensure the confidentiality of all data collected. By submitting an application you accept this disclaimer (POPIA ACT POLICY FORM - will receive this with the acceptance pack).	Yes	No
I acknowledge that Selborne College is a fee-paying school and parents are expected to pay the fees in full according to arrangements agreed to on the Acceptance Form. Fees are revised each year according to the budget. Financial assistance will be considered after submission of a written request for a fee reduction using the school's Exemption Application Form. Only upon approval, will fees be reduced. An exemption will be reviewed annually.	Yes	No

Interviews will be held. You will be informed whether your application has been successful. School fees are payable monthly, quarterly or annually, preferably in advance. Boarding fees are payable strictly in advance (boys will only be admitted to hostel if they can produce proof of payment). Debit order facilities are available.

I/We request that my/our son be admitted as a pupil of Selborne College. In signing this form, we acknowledge that should our son be accepted as a pupil at Selborne College, we will be jointly and severally liable for the compulsory school fees in terms of Section 39 SASA, as set from year to year by the Governing Body.

Please ensure that you complete EVERY SECTION of this application form. If false information is provided it will be deemed as a criminal offence and will invalidate this application.

**I declare that all particulars furnished by me on this form are true and correct.**

Signed at \_\_\_\_\_ on this \_\_\_\_\_ day of \_\_\_\_\_ in 20 \_\_\_\_\_

**FATHER / GUARDIAN**

**MOTHER / GUARDIAN**

\_\_\_\_\_  
Name & surname (*in print*)

\_\_\_\_\_  
Name & surname (*in print*)

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Signature