



SELBORNE COLLEGE

WELCOME TO SELBORNE COLLEGE

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 **9th April 2025**. (**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

MR A C DEWAR
HEADMASTER



SELBORNE COLLEGE

DOCUMENTS REQUIRED

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.

- | | | |
|----|---|--------------------------|
| 1 | Selborne College APPLICATION FORM | <input type="checkbox"/> |
| 2 | Two (2) Identical IDENTITY size PHOTOGRAPHS of your son. (<i>Photos to be taken in year of application</i>) | <input type="checkbox"/> |
| 3 | Certified copy of your son's UNABRIDGED BIRTH CERTIFICATE
<i>(If you need to apply for this, please supply use with an ordinary Birth Certificate together with the receipt for the unabridged.)</i> | <input type="checkbox"/> |
| 4 | Certified copy of your son's - FINAL GRADE 6 REPORT | <input type="checkbox"/> |
| 5 | Copy of MEDICAL AID membership card (back and front) | <input type="checkbox"/> |
| 6 | Copy of your son's ROAD TO HEALTH/IMMUNISATION CARD | <input type="checkbox"/> |
| 7 | Certified copy of MOTHER'S Identity Document or Passports | <input type="checkbox"/> |
| | Certified copy of FATHER'S Identity Document or Passports | <input type="checkbox"/> |
| 8 | Certified copy of Identity Document of person responsible for the school fee account of the pupil (if not the parent or guardian). | <input type="checkbox"/> |
| 9 | 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"/> |
| 10 | PROOF OF RESIDENCE - A municipal utility accountant in the name of the Parent/Guardian.
(Not more than three months old.)
<i>(Proof of Residence are required for both parents if not living at the same address.)</i> | <input type="checkbox"/> |
| 11 | Certified copy of 2024 and current year School Fee Statement . | <input type="checkbox"/> |
| 12 | GUARDIANS - Legal documents attached. | <input type="checkbox"/> |
| 13 | <u>SINGLE PARENTS ALSO NEED TO SUBMIT</u>
A certified copy of the death certificate of the other parent if deceased. | <input type="checkbox"/> |
| | A certified copy of the final divorce agreement if divorced. | <input type="checkbox"/> |
| | A certified copy of the Identity Document/Passport and contact details of the other parent if never married. | <input type="checkbox"/> |
| 14 | <u>OTHER</u>
Certified copy of Court Ruling for Guardianship if applicable. | <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"/> |
| 15 | ADMINISTRATION FEE of R100.00 is payable with application.
ALL admin fees due on submission by EFT (ONLY) Banking details:
Account Name - Selborne College - Standard Bank - Current Account
Account No. 241567009 - Branch Code: 051001
Ref number - Son's name & Surname2026 | <input type="checkbox"/> |

NO APPLICATION will be accepted / processed without ALL the relevant documentation attached!



APPLICATION FORM

GRADE applying for (indicate with an X)	8	9	10	11	12
ADMISSION as a (indicate with an X)	DAY SCHOLAR			BOARDER	
CURRENT SCHOOL				Full Time	
YEAR (admission reg.)	2026			Weekly	

Please
Paste
ID size Photo
Here

Closing date for Grade 8 applications: 9th April 2025 (12h00).
Grade 9 – 11 applications will be considered should a vacancy exist in the grade.
This application form must be completed by parents/guardians. Please note that incomplete applications will not be considered. Please refer to the attached checklist whilst completing this form.

LEARNER INFORMATION

SURNAME/FAMILY NAME					INITIALS		
FULL NAME (s)					PREFERRED NAME		
IDENTITY NUMBER					DATE OF BIRTH		
HOME LANGUAGE					NATIONALITY		
RELIGION / CHURCH					NB: Copy of valid Study Permit/Permanent Resident if not South African citizen is required		
ETHNIC GROUP	African / Black	Asian / Indian	Coloured	White	Other		
DEXTERITY OF LEARNER	Right handed		Left handed		Ambidextrous		
ADDRESS AND CONTACT DETAILS OF LEARNER							
HOME ADDRESS						POSTAL CODE	
HOME PHONE NUMBER				LEARNER MOBILE			
LEARNER EMAIL ADD.							
2026: APPLICANT WILL BE LIVING WITH	Both parents	Mother	Father	Guardian	Other		
TRANSPORT TYPE	Private	Public	MODE OF TRANSPORT				
EMERGENCY CONTACT (other than parents)			EMERGENCY NAME				
EMERGENCY NUMBER				EMERGENCY SURNAME			
ALTERNATIVE NUMBER				RELATIONSHIP TO LEARNER			
BIOLOGICAL BROTHERS PRESENTLY AT SELBORNE SCHOOLS (name/grade)			BIOLOGICAL SISTERS PRESENTLY AT CLARENDON SCHOOLS (name/grade)				
PREVIOUS RELATIVES/ASSOCIATION WITH SELBORNE COLLEGE (Grandfather/Father/Uncle/Brother)							
Name and Surname		Relationship to Learner		House (Crewe/Fuller/Malcomess/ Reece/Perry)		Exit Year at the School	

Initials of both parents

--	--

ADMIN NO.

RECEIVED BY

DATE RECEIVED

PERSONAL DETAILS OF LEARNER

APPLICANT'S ACADEMIC PERFORMANCE

This section must be filled in AND report attached as requested.

SUBJECT	FINAL GRADE 6 REPORT	VERIFIED BY ADMISSIONS	PREVIOUS SCHOOL INFORMATION		
English	%		NAME OF PREVIOUS SCHOOL		
Mathematics	%		NAME OF PRE-PRIMARY SCHOOL		
Afrikaans	%		PROVINCE		
IsiXhosa	%		Has applicant repeated a grade?	YES	NO
Final Grade 6 average	%		Which grade?	Year	

APPLICANT'S ACTIVITIES AND INVOLVEMENT IN CURRENT SCHOOL (Please list any noteworthy achievements (Provincial representation, Captaincy, etc.))

	Current Cultural Activities	ACHIEVEMENTS
CULTURAL ACTIVITIES: (Including MUSIC)		
SPORTING ACTIVITIES	Current Sports Participation	ACHIEVEMENTS
SERVICE ACTIVITIES		
LEADERSHIP POSITIONS		

EXTRA-MURALS

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 and culture 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		

EDUCATIONAL DISABILITY INFORMATION

(Please indicate any relevant information in the following areas. This will not affect admissions)

Does The Learner Have Any Educational Disabilities?	YES	NO	If YES, Please attached Educational Report.
PHYSICAL DISABILITIES			
SPECIAL EDUCATIONAL NEEDS			
MEDICAL CONDITIONS			
CONCESSIONS GRANTED	YES	NO	(If your son has existing approved CONCESSIONS with the Department of Education, please attach approved letter)

Initials of both parents

--	--

MEDICAL INFORMATION

MEDICAL AID DETAILS (Copy of Medical Aid Card to be attached).		FAMILY DOCTOR INFORMATION	
MEDICAL AID NAME		DOCTOR'S NAME / PRACTICE	
Medical Aid Telephone Number		Doctor Telephone Number	
Membership Number		Physical Address	
Principal Member			

HEALTH INFORMATION

CHRONIC DISEASES	
ALLERGIES	
MEDICATION	
Any Other Medical Conditions	

LANGUAGE CHOICE GRADE 8 - 9

All pupils do English as their primary language. Please indicate which First Additional Language your son will be taking in 2026.	AFRIKAANS	ISIXHOSA
--	-----------	----------

ACADEMIC SUBJECT CHOICE GRADE 10 - 12

LINE NUMBER	SUBJECTS	PLEASE INDICATE
COMPULSORY SUBJECT	English (Home Language)	X
FIRST SET (Choose one subject only)	Afrikaans (First Additional Language)	
	IsiXhosa (First Additional Language)	
SECOND SET (Choose one subject only)	Mathematics	
	Mathematics Literacy	
COMPULSORY SUBJECT	Life Orientation	X
THIRD SET (Choose one subject only)	Physical Science	
	Geography	
	Music	
	Cat	
	Visual Art	
FOURTH SET (Choose one subject only)	Life Sciences	
	History	
	Geography	
	IT * (IT will only be offered here if there is sufficient demand)	
FIFTH SET (Choose one subject only)	Music	
	Accounting	
	Engineering Graphics & Design	
	Life Sciences	
	Visual Art	
	Music	
	Business Studies	

Initials of both parents

--	--

DETAILS OF BIOLOGICAL FATHER / LEGAL GUARDIAN

SURNAME						TITLE			
FULL NAME (s)						PREFERRED NAME			
IDENTITY NUMBER						NATIONALITY			
MARITAL STATUS <small>(please indicate with an X)</small>		Single	Married	Divorced <small>Provide copy of Divorced Agreement</small>		Widower <small>Provide copy of death certificate</small>		Guardian <small>Provide copy of death certificate</small>	
ETHNIC GROUP		African / Black	White	Asian / Indian	Coloured	Other	HOME LANGUAGE		
HOME PHONE NUMBER						MOBILE NUMBER			
Email address to be used for all correspondence. Print clearly									
PHYSICAL ADDRESS						CODE			
POSTAL ADDRESS						POSTAL CODE			
NAME OF EMPLOYER									
OCCUPATION						BUSINESS NO.			
PHYSICAL ADDRESS						CODE			
If self-employed provide certified copies of documentation		Company Registration No							
		VAT Number							
Proof of business if not registered		Name of Business							
		Type of Business							
GROSS MONTHLY INCOME		Less than R20 000 / R25 000 – R30 000 / R40 000 / more than R40 000 (This Information required for budget purposes).							

DETAILS OF BIOLOGICAL MOTHER / LEGAL GUARDIAN

SURNAME						TITLE			
FULL NAME (s)						PREFERRED NAME			
IDENTITY NUMBER						NATIONALITY			
MARITAL STATUS <small>(please indicate with an X)</small>		Single	Married	Divorced <small>Provide copy of Divorced Agreement</small>		Widower <small>Provide copy of death certificate</small>		Guardian <small>Provide copy of death certificate</small>	
ETHNIC GROUP		African / Black	White	Asian / Indian	Coloured	Other	HOME LANGUAGE		
HOME PHONE NUMBER						MOBILE NUMBER			
Email address to be used for all correspondence. Print clearly.									
PHYSICAL ADDRESS						CODE			
POSTAL ADDRESS						POSTAL CODE			
NAME OF EMPLOYER									
OCCUPATION						BUSINESS NO.			
PHYSICAL ADDRESS						CODE			
If self-employed provide certified copies of documentation		Company Registration No							
		VAT Number							
Proof of business if not registered		Name of Business							
		Type of Business							
GROSS MONTHLY INCOME		Less than R20 000 / R25 000 – R30 000 / R40 000 / more than R40 000 (This Information required for budget purposes).							

Initials of both parents

SCHOOL FEE PAYMENT INFORMATION

PLEASE NOTE: Selborne College School is a FEE PAYING SCHOOL in terms of the relevant legislation. Both parents are responsible for payment of school fees. Please indicated which parent/other must receive the account. (please indicate with an X)	FATHER	MOTHER	*PRIVATE INDIVIDUAL	*TRUST FUND
Email address for accounts. Print clearly.				
Please indicate with X which payment method.	Monthly School Payments	Termly School Payments	Annual School Payment	
*Please attach: Certified copy of 2024 and current year school fee statement.				

*DETAILS OF PRIVATE INDIVIDUAL (ID to be attach)

SURNAME						TITLE				
FULL NAME (s)						PREFERRED NAME				
IDENTITY NUMBER						NATIONALITY				
MARITAL STATUS <small>(please indicate with an X)</small>	Single	Married		Divorced	Widower <small>Provide copy of death certificate</small>		Guardian <small>Provide copy of death certificate</small>			
ETHNIC GROUP <small>(please indicate with an X)</small>	African / Black	White	Asian / Indian	Coloured	Other	HOME LANGUAGE				
HOME PHONE NUMBER						MOBILE NUMBER				
EMAIL ADDRESS										
PHYSICAL ADDRESS								CODE		
POSTAL ADDRESS								POSTAL CODE		
NAME OF EMPLOYER										
OCCUPATION						BUSINESS NO.				
PHYSICAL ADDRESS								CODE		
GROSS MONTHLY INCOME	Less than R20 000 / R25 000 – R30 000 / R40 000 / more than R40 000 (This Information required for budget purposes).									

*TRUST FUND (Copy of Trust Fund to be attach)

NAME OF TRUST FUND						
CONTACT PERSON						
EMAIL ADDRESS						
MOBILE NUMBER				BUSINESS NO.		

SOCIAL GRANTS

(Attach SASSA card or relevant documentation)

Do you received a Social Grant ?	YES	NO	If YES, please give Grant Number			
Please indicate which type of Grant you are receiving <small>(please indicate with an X)</small>	TYPE OF GRANTS				GRANT NUMBER	
	Child Support	Disability	Foster Child			
	Care Dependency	Social Grant	Benefit from School Nutrition Programme			

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.
- Interviews will be held. You will be informed via email of the School's decision by the 31st August 2025.

CONTRACT BETWEEN SELBORNE COLLEGE AND PARENT/LEGAL GUARDIAN

- I/We declare that all particulars furnished by me/us on this form are true and correct.
- Upon an offer of acceptance from Selborne College an amount of R5 000 is payable within 14 days to secure the position offered.
- **I/We hereby agree to:**
 - accept the ethos of the school as contained in the **MISSION STATEMENT**:
 - abide by the Selborne College **CODE OF CONDUCT** and School rules (will receive this with the acceptance pack).
 - acknowledge the authority of the Principal, the Teachers and student leaders;
 - pay the compulsory school fees as agreed by the parent body at the Annual Budget Meeting;
 - pay any bank charges and interest on any outstanding fees;
 - Notify the Principal, in writing, in the event of my child leaving the school at least one term in advance. Failure to do so will require a payment of a term's fees in lieu of the notice. (This is if the pupil is withdrawn for reasons other than disciplinary or financial default).
 - In addition, I undertake to return all books and other property belonging to the school;
 - Ensure that my son attends school regularly and, should my son/ward be absent from school for any reason, to inform the school of that in writing;
 - Pay all costs incurred for damage to school property or losses caused by my son/ward.
 - I/We am fully aware of the admission requirements of Selborne College School as contained herein.
 - 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).
 - 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).
 - I/We will take responsibility for ensuring that my son/ward is adequately insured against personal injury or related risks. I will also ensure that her personal belongings are marked and, if necessary, adequately insured against I and I understand that the school cannot be held responsible for any losses or damage incurred.
 - 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.
 - 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).

- I/We 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.
- I/We as parents and the applicant accept that the information provided to the school was given voluntarily and that the school may:

Store the data safely in its files and electronic systems.

Generate academic, attendance, behavioural and other school-related records.

Use both the provided and generated data for purposes of providing services relevant to the enrolment and progress of the applicant at the school (including, but not limited to contacting parents: placing the applicant in a class: entering her in exams, competitions, leagues and the like: updating the school roll and past learners' register; and researching and reporting on school demographics or performance):

Pass data on (including to the provincial and national education departments) when required to do so as part of data provision, school reports, testimonials and confidential reports, and for statistical or research purposes, or when legally required to do so.

- I/We hereby consent to the use of photographs that may include my/our child, to market the school in promotional materials and on the school's social platforms.
- I/We as the parents accept that we have elected the above home and email addresses as our chosen *domicilium citandi et executandi* (chosen address) in respect of all notices, correspondence, court processes and other documents. We further acknowledge that it is our responsibility to inform the school should we elect to change our home and email addresses.

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 _____ 2025.

BIOLOGICAL FATHER / GUARDIAN (signature)

Print Name

BIOLOGICAL MOTHER / GUARDIAN (signature)

Print Name



2025 FINANCE STRUCTURE

The school fee table below is in respect of our 2025 fee structure - fees for 2026 will only be available in November 2025, once the SGB Budget Meeting has been held

SCHOOL FEES (Day Scholar Only)	MONTHLY	TERMLY	ANNUALLY
	per month x 11 months	(Paid termly, in advance)	(Paid annually, in advance)
	R 5,050-00	R 13,887.50	R55 550.00
FULL BOARDING FEES	MONTHLY	TERMLY	ANNUALLY
	n/a	(Paid termly, in advance)	(Paid annually, in advance)
		R 16,900-00	R 67,600-00
WEEKLY BOARDING FEES	n/a	(Paid termly, in advance)	(Paid annually, in advance)
		R 12,025-00	R 48,100-00
AD-HOC NIGHTLY FEE	R 260,00		
DAY SCHOLAR	R 5 000,00 This amount is payable to secure the position offered.		
WEEKLY / TERMLY / AD-HOC BOARDERS DEPOSIT	R 5 000,00 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.		

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).



SELBORNE COLLEGE

BANKING DETAILS

BANKING DETAILS FOR SELBORNE COLLEGE

ACCOUNT NAME	Selborne College
BANK	Standard Bank
BRANCH CODE	0 510 01
ACCOUNT NUMBER	2415 670 09
REF. NO.	Son's <i>name & surname</i> 2026

BANKING DETAILS FOR NORTON HOUSE

ACCOUNT NAME	Norton House
BANK	Standard Bank
BRANCH CODE	0 510 01
ACCOUNT NUMBER	2415 670 41
REF. NO.	Son's <i>name & surname</i> 2026