

**APPLICATION FOR REDUCTION  
IN SCHOOL FEES FOR 2017**

**Please note:**

- a. This form must be completed by the learner(s) legal parent or guardian. All particulars must be completed in full. **An application that is not completed in full, will not be considered**
- b. **A reduction in school fees is only valid until the end of the particular year. Therefore you have to re-apply for reduction each year.**
- c. The completed application form must be handed in at the finance office. It is the parents' responsibility to provide proof of their annual gross income.

**1. \*PARTICULARS OF LEARNER(S) WHO YOU ARE APPLYING FOR.**

	PARTICULARS	Learners to whom you are applying for deduction		
		1	2	3
a.	Surname			
b.	Full names			
c.	ID-number			
d.	Effective date of requested deduction			
e.	Current grade			

f. Admission number: \_\_\_\_\_

\* Should you be applying for reduction for more than three children, you are kindly requested to complete an additional form in respect of paragraph 1.

**2. PARTICULARS OF PARENT/GUARDIAN**

- (a) Surname \_\_\_\_\_
- (b) Name(s) (in full) \_\_\_\_\_
- (c) Marital status (married\*/divorced\*/remarried/widower\*/widow\*) \_\_\_\_\_  
**\*Attach a copy of divorce letter / death certificate..**
- (c) Residential address (name of farm/district/town/suburb/street)  
\_\_\_\_\_  
\_\_\_\_\_
- (d) Postal address \_\_\_\_\_  
\_\_\_\_\_
- Tel. no.(Home) \_\_\_\_\_ (Work) \_\_\_\_\_
- Cell no. \_\_\_\_\_

- (e) Position: \_\_\_\_\_
- (f) Employer: \_\_\_\_\_
- (g) Magisterial District where parents reside: \_\_\_\_\_
- (h) Number of children that are dependant upon the parent/guardian, including children that are full-time students, not older than 26 years (unemployed dependants excluded): \_\_\_\_\_
- (i) Particulars of dependant in other schools:

NAME	DATE OF BIRTH	NAME OF INSTITUTION	GRADE

- (j) Particulars of dependants attending universities, colleges, technicons, as well as pre-school children:

NAME	DATE OF BIRTH	NAME OF INSTITUTION	GRADE

### 3. CONFIDENTIAL REPORT BY PARENT OR GUARDIAN

Particulars of annual gross income of parents / guardians. Proof of income to be attached.

- (a) Annual gross income of parent or guardian in the form of, eg. Bonuses, wages, salaries, pension, allowances, commission and fixed over-time remuneration.

PARTICULARS	NAME AND ADDRESS OF EMPLOYER	TEL. NO. OF EMPLOYER	NATURE OF EMPLOYMENT	Nature of amount received	GROSS INCOME
You					R
					R
					R
					R
Spouse					R
<b>TOTAL</b>					R

**PLEASE ATTACH YOUR LATEST I.R.P. 5 AS WELL AS PAYSLIP AND/OR LETTER AS PROOF OF GROSS INCOME.**

(b) Annual income\* from own business, practice or farming.

Particulars	Nature of business	Registered name of business	GROSS INCOME	NETT INCOME
You			R	R
Your spouse			R	R
<b>TOTAL</b>			R	R

\* **Proof must be submitted by means of financial statements signed by you and your auditor/accountant/bookkeeper/person that completes your tax return forms. Should financial statements not be available, complete the attached annexure A.**

(c) Other income (eg. Maintenance if divorced, maintenance from welfare, disability-allowance, age- of other pensions, rent from property, income from investments; etc.

Particulars	RECEIVED FROM	RECEIVED I.R.O.	GROSS INCOME
You			R
Your spouse			R
<b>TOTAL</b>			R

## **PLEASE CERTIFY**

### **4. DECLARATION BY PARENT/GUARDIAN**

I (full name) \_\_\_\_\_

hereby solemnly declare that without support I am not in the position to make provision for the education of the child(ren), mentioned in paragraph 2, that I did not withheld any information regarding my circumstances and all information supplied is true and correct. I accept that should there at any time be determined that the information I supplied is not true and correct, the financial support awarded to me will be forfeited and I will be liable for all monies received.

DATE: \_\_\_\_\_ YEAR: \_\_\_\_\_ Signature: \_\_\_\_\_

The person undertaking this declaration acknowledges that he / she is familiar with the contents of this agreement and understands the implications in full.

Certified before me at \_\_\_\_\_ on this \_\_\_\_ day of \_\_\_\_\_ 20\_\_\_\_.

\_\_\_\_\_  
(COMMISSIONER OF OATHS)

**5. ONLY FOR OFFICIAL USE**

**SUMMARY OF INCOME SOURCES**

<b>Gross salaries/wages (paragraph 3(a))</b>	<b>R</b>	_____
<b>Nett income from</b>		
business (paragraph 3(b) of annexure A)	<b>R</b>	_____
farming (paragraph 3(b) of annexure A)	<b>R</b>	_____
diverse (allowances, rent, maintenance, etc.) (paragraph 3 (c) )	<b>R</b>	_____
<b>Total income paragraph 3(d)</b>	<b>R</b>	_____

**6. PARTICULARS THAT HAVE TO BE SUPPLIED BY THE FINANCE OFFICER WORD**

**6.1 Has a reduction been given previously? YES / NO**

(a) Total amount of school fees still due by parent / guardian  
R\_\_\_\_\_

(b) Comment from principal:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**ANNEXURE**

\_\_\_\_\_  
**SIGNATURE: FINANCE OFFICER**

\_\_\_\_\_  
**DATE**

**Reduction recommended by Governing Body:**

\_\_\_\_\_

\_\_\_\_\_  
**SIGNATURE: CHAIRMAN: SCHOOL GOVERNING BODY**

\_\_\_\_\_  
**DATE**

## CONFIDENTIAL

**7. CALCULATION OF PAYMENT ABILITY WHERE INCOME EARNED FROM A BUSINESS, FARMING ETC. , WHERE FINANCIAL STATEMENTS ARE NOT AVAILABLE.**

**7.1 CALCULATION OF NETT ASSETS OF YOU AND YOUR SPOUSE**

7.1.1 List of assets on \_\_\_\_\_ Year: \_\_\_\_\_  
(End of previous tax year)

- 1.1.1 Total value of fixed property owned by me and my spouse (at market value according to your own valuation) \_\_\_\_\_
- 1.1.2 Total value of vehicle, equipment and appliances (at market value according to your own valuation) \_\_\_\_\_
- 1.1.3 Market value of live stock \_\_\_\_\_  
Life stock \_\_\_\_\_
- 1.1.4 Total market value of supplies and products and unused fuel, fertilizer etc. \_\_\_\_\_
- 1.1.5 Total market value of all investments, eg. Fixed deposits, shares, investments, bank balances etc. \_\_\_\_\_
- 1.1.16 Total market value of all assets (par. 1.1.1 to 1.1.5) R \_\_\_\_\_

MINUS:

7.1.2 Total amount of debt on \_\_\_\_\_ YEAR: \_\_\_\_\_ R \_\_\_\_\_  
(End of previous financial year)

All debt as specified below:

INSTITUTION	AMOUNT

7.1.3 Nett value of assets (paragraphs 1.1.5 minus 1.2) on \_\_\_\_\_ Year\_\_\_ R\_\_\_\_\_

**8. NETT INCOME (PROFIT OR EARNINGS) from own business undertaking, practice, farming from previous tax year, that is gross income and earnings, minus expenses (own salaries and stock excluded) that was necessary to run own business / farming etc.**

- (a) Business(es) \_\_\_\_\_
- (b) farming \_\_\_\_\_
- (c) occupation (practice income) \_\_\_\_\_
- (d) other income, e.g. for services rendered, transport, contract work, consulting services, that is not mentioned in paragraph 2(a) to (c) (rent received and rent earnings excluded) \_\_\_\_\_

**9. STATEMENT OF MONTHLY HOUSEHOLD EXPENSES**

**NOTE: (Copies of account statements must be attached)**

			<b>AMOUNT/INSTALMENT</b>
1.	Rent		_____
2.	Water and electricity		_____
3.	Motor (Balance R _____)		_____
4.	Fuel		_____
5.	Groceries		_____
6.	Meat		_____
7.	Vegetables		_____
8.	Milk and Bread		_____
9.	Clothing: Accounts		_____
		(Balance)	R _____
		_____	(Balance) R _____
		_____	(Balance) R _____
10.	Furniture	(Balance)	_____
11.	Pharmacy (Regular medication for eg. asthma, heart, blood pressure etc.)		_____
12.	School fees for child(ren)		_____
13.	Pocket money for children		_____
14.			_____
15.	Insurance		_____
16.	Telephone		_____
	<b>ANY OTHER EXPENSES (MOTIVATED WITH PROOF)</b>		
17.			_____
18.			_____
19.			_____
20.			_____
		<b>TOTAL</b>	_____

**OTHER MOTIVATION AS TO WHY SCHOOL DEDUCTION HAS TO BE AWARDED**

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