



ZAMBEZI PRIVATE SCHOOL

Fax 088 652 6821
Cell: 081 343 7734
E-pos: zps@iway.na
Katima Mulilo, Namibia

APPLICATION COVER

Year of enrolment: _____

Grade: _____

STUDENT NAME:

Included herewith:

1. Application form Pages 2-4
2. Fee Structure Page 5
3. Indemnity Form Page 6
4. Work Permit (Non-Namibians)
5. Birth Certificate or passport – student
6. Proof of Address (i.e. municipality account)
7. Grade 1 – School Readiness Report

CHECKED	

Please ensure that every page is completed correctly. All the required information is relevant and necessary. Both parents/guardians to sign acknowledgement of fees responsibility.



ZAMBEZI PRIVATE SCHOOL

Fax 088 652 6821
 Cell: 081 343 7734
 E-pos: zps@iway.na
 Katima Mulilo, Namibia

APPLICATION FORM	NO:
-------------------------	------------

YEAR FOR ENROLMENT: _____
 Grade: _____

Male:
Female:

1. Personal Details of the student:

Please note: Fees are subject to change

Surname:			
First Name:		Preferred Name:	
Date of Birth:	y	m	d
Place of Birth:			Citizenship:
Foreign Student:	Yes or No		Study Permit Nr:
Present School:			
Name of Class Teacher:		Cell nr:	
Other schools attended:			
School 1:		Tel nr:	Grades:
School 2:		Tel nr:	Grades:
School 3:		Tel nr:	Grades:
Grades repeated:			
Brothers and Sister at Zambezi Private School			
Name:		Grade:	
Name:		Grade:	

2. Personal Details of the Parents:

Father/ Guardian				Mother/ Guardian			
Title:		Initials:		Title:		Initials:	
Surname:				Surname:			
First Name:				First Name:			
Contact Number:				Contact Number:			
ID nr:				ID nr:			
Tel(H):				Tel(H):			
Cell nr:				Cell nr:			
Postal Address:				Postal Address:			
Residential Address:				Residential Address:			
E-mail:				E-mail:			
EMPLOYMENT				EMPLOYMENT			
Profession:				Profession:			
Employer:				Employer:			
Position:				Position:			
Tel(W)				Tel(W)			
E-mail:							
FOR OFFICE USE ONLY							
Mandatory charges:		Application fee:				Signature:	
		Book fee:				Date:	
		School fee:					



ZAMBEZI PRIVATE SCHOOL

Fax 088 652 6821
 Cell: 081 343 7734
 E-pos: zps@iway.na
 Katima Mulilo, Namibia

3. Person responsible for the accounts

Name:		Postal Address:	
Namibian Tax nr:			
Financial References:			
		Tel Nr:	
		Tel Nr:	

4. Medical Information:

Known Allergies:			
Person to contact in event of illness:			
Contact details of the above:			
Other family/friends not from same household:			
Name:		Relation:	
Address:		Tel Nr:	
Confidential information we should know about:			

5. Sport / Cultural achievements or activities:

Kindly name achievements in sports, culture and / or preferences:

5 (A) Medical Information: Kindly inform us if you child has a particular medical condition that you think the school should be aware of

--



ZAMBEZI PRIVATE SCHOOL

Fax 088 652 6821
Cell: 081 343 7734
E-pos: zps@iway.na
Katima Mulilo, Namibia

Kindly attach the following:

1. Certified copy of the birth certificate/passport of the student
2. Proof of residential / work address of person responsible for the account
3. Copy of the study permit if applicable
4. A copy of most recent school report or pre-primary school assessment
5. Recent photograph of the applicant
6. Copy of work permit if applicable

General information:

1. This application does not guarantee placement in the school, nor does the date of application indicate any specific order of priority.
2. Acceptance for enrolment will be determined after successful completion of an admission text.
3. Collateral information will be obtained from previous schools in order to determine the student's general behavior and academic achievements.
4. The applicant and his/her parents may be interviewed.
5. Proficiency in English is paramount.
6. If it's a transfer, a transfer letter should be attached

Declaration by parents or guardian:

To be signed by both parents and or guardians:

I have read and understood the content of this application form and all information supplied by me is correct. I have omitted no relevant information. I further undertake to submit myself and my child to the rules and regulations as set by the school management

Father/Guardian: Name: _____ Signature: _____

Date: _____

Mother/Guardian: Name: _____ Signature: _____

Date: _____



ZAMBEZI PRIVATE SCHOOL

Fax 088 652 6821
Cell: 081 343 7734
E-pos: zps@iway.na
Katima Mulilo, Namibia

INDEMNITY

We/I, the undersigned, father/mother/guardian of

.....
Student's name

.....
Class

.....

I hereby indemnify and hold harmless **ZAMBEZI PRIVATE SCHOOL** its **TEACHERS, EMPLOYEES and/or AGENTS (THE SCHOOL)** and hold it harmless against all loss or damage of whatever nature, from cause arising, which we/I and/or my/our child/children may sustain whilst participating in any excursion or sports event, whether or not such injury, loss or damage arises from any defective equipment, act of God, act omission of or by the school, its **TEACHERS, EMPLOYEES or AGENTS**, except in the case of negligence and or intentional harmful action.

Waive any claims or whatever nature which we/ I may have against the school set out above.

Full Names Capacity: Signature:

Full Names Capacity: Signature:

Place Date:



ZAMBEZI PRIVATE SCHOOL

Fax 088 652 6821
Cell: 081 343 7734
E-pos: zps@iway.na
Katima Mulilo, Namibia

SCHOOL FEE STRUCTURE AND PAYMENT POLICY ~ 2023

Above mentioned school is a non-profit school that depends solely on the financial commitment from parents.

- 1. Enrolment fee and Development fund:** Only for first time learners. N\$ 550 cash payable on the first school day.
- 2. Text book fee:** All learners from Gr.4 to Gr.7 @ N\$ 500 per year payable on the first school day of the school. The text book fee is only part of the actual cost. The books will remain the property of the school. Learners will only receive text books after this amount is paid. Lost or badly damaged books must be refunded in full.
- 3. School fees:** School fees are payable by Direct Debit Order ONLY, at the beginning of each month before the 7th for TWELVE months of the year. School fees payable by debit order and returned UNPAID will be charged a N\$ 250 fees. When debit orders are rejected and parents ignore notification of this by the School, the outstanding balance plus the current school fee will be submitted to the bank the following month. An additional fee of N\$250 will also be raised. **TWO (2) CONSEQUETIVE DEFAULT OF PAYMENTS** on school fees will result on your application becoming NULL and VOID. You will be asked TO REMOVE YOUR CHILD/CHILDREN FROM SCHOOL and the debt will be handed over to our lawyers for collection.

4. School fees for 2020 is as follows:

GRADE	PER MONTH FOR 12 MONTHS.
Pre School (5 years old in 2023)	N\$ 1410,00
Grade 0 (6 years old in 2023)	N\$ 1494,60
Grades 1 to 7 + For a second child in Gr.1-7 = N\$ 2203.74/month + For a third or more in Gr.1-7 = N\$ 2081.31/month	N\$ 2448,60
Grade 8 to 11	N\$2,968,00

5. Important!

5.1 Interest on overdue accounts will be charged at current Prime Bank Rate.

5.2 Arrangements to pay by EFT must be made with the school, HOWEVER we encourage all parents to pay by Debit Order. These payments must clearly reflect the Student name and account number.

EFT payments must also be paid before the 7th of each month.

Read and understood: _____ (Print name)

Signature: _____ Date: _____

Name of child/children and Grade _____
