



education

DEPARTMENT: EDUCATION
MPUMALANGA PROVINCE

APPLICATION FOR REGISTRATION OF AN INDEPENDENT SCHOOL

1. The application for registration of an independent school must be submitted to the relevant Circuit Manager **on or before 30 April** preceding the following academic year. An acknowledgement of receipt must be obtained from the relevant circuit office on submission of the application.
2. The application, together with the attachments required in terms of this application form, must be contained in a **Portfolio of Evidence**. Please note that all attachments must be certified. All the applicable boxes must be populated in either black/blue ink.
3. An incomplete and incorrect application will not be considered for evaluation and other processes to follow. The application will be returned to the applicant and the registration cycle will have to start afresh. A check list is attached for the applicant's convenience to ensure that the application is complete in terms of the required attachments.
4. A separate application for each site must be submitted if a school wishes to operate on different sites.
5. A site visit will be conducted to verify the information supplied in the registration form.





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APPLICATION FOR REGISTRATION OF AN INDEPENDENT SCHOOL

DETAILS OF OWNER OF PROSPECTIVE SCHOOL			
Name(s) and Surname:			
Identification No: (Certified copy attached)			
Valid Work Permit No: (Certified copy attached if applicable)		Expiry Date:	
Passport Number : (Certified copy attached if applicable if applicable)		Expiry Date:	
Cellular Phone Number:		Landline Number:	
E-mail Address:			



Postal Address:		
Will the school be managed on behalf of a religious society or some other body?	Yes	No
If the answer above is Yes , give details below:		
Name of Society/Body:		
Name of Contact Person:		
Postal Address:		
Landline Telephone Number:		
Cell Number:		
E-mail Address:		
DETAILS OF PROSPECTIVE SCHOOL		
Proposed Name(s): (Propose 3 names and indicate their meanings. Attach an agreement on the proposed name(s) of the school, e.g. minutes)	Proposed name	Meaning of name



Status of prospective school: Indicate with (X)	Primary (Gr 1-7)	Secondary (Gr 8-12)	Combined	Type of prospective school: Indicate with (X)	Ordinary	Special (LSEN)
Physical address:						
Postal address:				Postal Code:		
Does the prospective school building(s) belong to the owner? Indicate with an (X) If Yes , attach a certified copy of the Title Deed. If No , attach certified copy of lease agreement/permission to occupy the buildings as proof of tenure for a minimum period of one academic year.				Yes		No
				If No , indicate below with an (X): <i>Trust/Tribal/Rented</i>		
				Trust	Tribal	Rented
District:						
Circuit:						
Region:						
Municipality:						
Cellular Number:				Landline Number:		
E-mail Address:						



DETAILS OF OWNER OF THE LAND ON WHICH PROSPECTIVE SCHOOL IS SITUATED			
Name(s) and Surname:			
Identification No: (Certified copy of ID attached)			
Cellular Number:		Landline Number:	
E-mail Address:			
Postal Address:			
		Postal Code:	
<p>Does the land on which the school buildings will be belong to the owner of the prospective school? Indicate with an (X)</p> <p>If Yes, attach a certified copy of the Title Deed. If No, attach certified copy of lease agreement/permission to occupy the land as proof of tenure for a minimum period of one academic year.</p>	Yes		No
	If No , indicate ownership of land below: Trust/Tribal/Rented		
	Trust	Tribal	Rented
TYPE OF BUSINESS ENTITY - Indicate with an (X)			
Sole Owner:			
Partnership:			
Close Corporation: (Registration no)			



Section 21 Company: (Registration no)	
Non Profit Company: (Registration no)	
Trust :(Name of Trust and Registration no)	

INFORMATION ABOUT NEAREST SCHOOLS

Indicate all existing GET and FET Band feeder schools in the concerned surrounding area.	Name of school	Primary/ Secondary or Combined	Public/Private	Distance from prospective school

GOVERNANCE STRUCTURE ENVISAGED - Indicate with an (X)

Governing Body		Board of Directors		Board of Trustees		None	
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CONTACT DETAILS OF PROSPECTIVE CHAIR PERSON OF GOVERNING STRUCTURE			
Name(s) and Surname:			
Cellular Phone Number:		Landline Number:	
E-mail Address:			
Postal Address:		Postal Code:	
POLICIES OF PROSPECTIVE SCHOOL			
Does the prospective school have a: Indicate with an (X)		Yes	No
Constitution. (Attach a copy) (The School's Constitution must state the Mission and Vision as well as clearly indicate the functions of the governing structure envisaged)			
Admission policy. (Attach a copy)			
Language policy. (Attach a copy)			
Comprehensive system of quality assurance for learning, development and assessment. (Attach a copy)			



LANGUAGE				
What language will be used for teaching and learning?				
What language will be offered as Home Language?				
What language will be offered as First Additional Language?				
Will there be provision for learners with intellectual impairments to learn in their home language? Indicate with and (X)	Yes		No	
INFRASTRUCTURE AND PROXIMITY OF ENVISAGED SITE				
<p>The following documentation on the prospective buildings must be attached to the application:</p> <ol style="list-style-type: none"> 1. A floor plan, that is to scale, of the prospective building(s) to be used for education purposes and an indication of the different rooms and the purpose for which it will be used. The floor area must be indicated in square meters. The ablution facilities must indicate number of toilets, urinals and basins. 2. A site plan indicating the position of the prospective building(s), recreational facilities and total area in square meters or hectares. 3. A confirmation that the prospective grounds are securely fenced and access to the school grounds is controlled. 4. A letter of approval from the relevant municipality that the prospective premises have been zoned and are suitable for educational purposes (Certified copy of such report to be attached) 5. A letter of approval stating that the prospective premises are suitable for education purposes, and conform to health and safety requirements. (Certified copy of Health and Safety Certificate to be attached) 				

PROXIMITY OF PROSPECTIVE SITE		
Is the envisaged school close to a: Indicate with an (X)	Yes	No
Busy road:		
Grave yard:		
Beer hall:		
Taxi/Bus rank:		
Business Centre:		
Railway Station:		
Sewage Plant:		
Hotel:		
Is the school within a radius of ± 3 km around the community it serves?		
Is the school easily accessible from the main road?		
MUNICIPAL SERVICES		
Are the following municipal services available: Indicate with an (X)	Yes	No
Water:		
Electricity:		
Sewerage:		
Refuge removal:		

PROSPECTIVE EDUCATIONAL AND OTHER FACILITIES

Indicate below the number of prospective available core educational spaces.

Class rooms		Work shop		Training kitchen	
Computer Laboratory		Technical Drawing Room		Training restaurant	
Science Laboratory		Library/Media Centre		Life Sciences Laboratory	
Music room		Art room		Hall	
Other (Specify)		Other (Specify)		Other (Specify)	

PROSPECTIVE ADMINISTRATIVE FACILITIES

Indicate below the number of rooms that will be available for administrative purposes.

Office of Principal		Offices for Heads of Department		Strong room	
Store rooms		Reception area/secretary office		Staff room	
Sick bay		Other (Specify)		Other (Specify)	

PROSPECTIVE PLAYGROUND

Indicate the size of the prospective playground. (square m)



ABLUTION FACILITIES						
Indicate the number of available ablution facilities.						
Female Staff:	Toilets			Wash basins		
Girls:	Toilets			Wash basins		
Male Staff:	Toilets		Urinals		Wash Basins	
Boys:	Toilets		Urinals		Wash Basins	
INCLUSIVE ENVIRONMENT AT PROSPECTIVE SCHOOL						
Indicate with an (X)				Yes	No	
Are the envisaged class rooms large enough to accommodate learners in wheel chairs?						
Has the envisaged school building been provided with ramps?						
Are balustrades/hand rails included on ramps?						
Does the prospective school building provide for continuous travel between the buildings for the physically impaired?						
Are the ablution blocks at the prospective school developed inclusive of the disabled?						
Will guidance be given to staff to deal with learners with disabilities in the prospective school?						

Outline what provision will be made for prospective learners experiencing barriers to learning.

AVAILABILITY OF MANAGEMENT INFORMATION SYSTEMS AND RECORDS AT PROSPECTIVE SCHOOL

Indicate with an (X)	Yes	No
Does the prospective school have an electronic management system?		
Is a plan in place to maintain and update the electronic information system regularly? (Attach a copy of a maintenance plan if applicable.)		

RECORD KEEPING OF PROSPECTIVE EDUCATOR STAFF

Are the following available in a prospective educator file?	Yes	No
<ul style="list-style-type: none"> Sample of employment contracts for prospective educators providing for an indication of the remuneration package. 		
<ul style="list-style-type: none"> Prospective educators' Identity Documents. (Certified copies to be attached to Annexure D2) 		
<ul style="list-style-type: none"> Certified copies of qualifications of prospective educators. (Certified copies of all qualifications to be attached to Annexure D2) 		
<ul style="list-style-type: none"> SACE Certificates of all probable educator staff. (Proof to be attached to Annexure D2) 		
<ul style="list-style-type: none"> Proof of prospective principal being a professionally qualified educator and registered with SACE. (Proof to be attached to Annexure D2) 		
<ul style="list-style-type: none"> Attendance Register for envisaged educator staff. 		

• Record of registration of all prospective employees with SARS.		
• Record of registration of all prospective employees with Unemployment Insurance Fund.		
• Proof of evaluation of foreign qualifications by SAQA in case of envisaged foreign employees. (Proof to be attached to Annexure D2)		
• Proof of valid working permits in case of envisaged foreign employees. (Proof to be attached to Annexure D2)		
RECORD KEEPING OF PROSPECTIVE LEARNERS		
Are the following available for use in prospective learner files? Indicate with an (X)	Yes	No
• Sample contract for signature between school and prospective Parent/Guardian.		
• Code of Conduct for signature between school and prospective learner.		
• Attendance Register for prospective learners.		
• Admission Register.		
• Learner files for prospective learners.		
Will the following copies be kept in the prospective learner files?	Yes	No
• ID Documents/Birth Certificates of learners.		
• Previous School Information i.e. Progress/Promotion Reports.		
• Current Progress Reports.		
• Immunization Certificate for foundation phase learners.		
• Study permit in the case of foreign learners.		

FINANCIAL RECORDS FOR THE ENVISAGED SCHOOL			
Are the following available? Indicate with an (X)	Yes	No	
<ul style="list-style-type: none"> Evidence that the school will be financially viable for at least 12 months after registration. 			
<ul style="list-style-type: none"> A comprehensive outlay of the fee structure to be charged. (Copy attached) 			
Other Comments:			
EQUIPMENT AND FURNITURE AT PROSPECTIVE SCHOOL			
Indicate with an (X) whether the following teaching aids will be available. Also indicate the number if the response is Yes .	Yes	No	Number
A desk and chair for educator.			
A desk and chair for each learner.			
A black board/writing board.			
TEXT BOOKS AND STATIONERY AT PROSPECTIVE SCHOOL			
Outline what the policy for the prospective school is in terms of provisioning of text books and how it will ensure that each learner will have the required number of text books for each subject. (Attach a copy of text book policy.)			



Outline what the policy for the prospective school is in terms of provisioning of stationery and how it will be ensured that each learner will have the required stationery for each subject. (Attach a copy of stationery policy.)

TEACHING AIDS FOR THE PROSPECTIVE SCHOOL

Indicate with an (X) whether the following teaching aids will be available. Also indicate the number if the response is Yes .	Yes	No	Number
Computers.			
Video equipment.			
Data projector.			
Audio equipment.			
Interactive White Board.			

Specify other:

CURRICULUM AT PROSPECTIVE SCHOOL

Indicate with an (X)	Yes	No
Will the school offer the National Curriculum Statement (NCS) and follow the Curriculum and Assessment Policy Statement (CAPS)?		



If **No**, indicate what curriculum will be offered, how it is aligned with the National Curriculum and Assessment Policy Statement and prove that Umalusi will accredit it. (This accreditation will indicate what qualifications, which is on the NQF, or is recognized by the SAQA, would be offered.

ANALYSES OF ANTICIPATED LEARNER NUMBERS

Complete the unshaded blocks below each grade, indicating the number of anticipated learners in each subject as applicable to your application.

Anticipated numbers for the year you intend to start operations.

PRIMARY SCHOOL – Foundation Phase – GET

GRADES	R	1	2	3
1. Home Language				
2. First Additional Language				
3. Mathematics				
4. Life Skills				



Anticipated numbers for year you intend to start operations.

PRIMARY SCHOOL – Intermediate Phase - GET

GRADES	4	5	6
1. Home Language			
2. First Additional Language			
3. Mathematics			
4. Natural Sciences & Technology			
5. Social Sciences			
6. Life Skills			

Anticipated numbers for year you intend to start operations.

PRIMARY/SECONDARY SCHOOL – Senior Phase - GET

GRADES	7	8	9
1. Home Language			
2. First Additional Language			
3. Mathematics			
4. Natural Sciences			
5. Social Sciences			
6. Technology			
7. Economic Management Sciences			
8. Life Orientation			
9. Arts and Culture			



Anticipated numbers for year you intend to start operations.

SECONDARY SCHOOL – Senior Phase - FET

GRADES	10	11	12
1. Home Language			
2. First Additional Language			
3. Mathematics OR			
4. Mathematical Literacy			
5. Life Orientation			
Plus a minimum of 3 subjects from Group B, Annexure B in NCS policy document			
6. (Please indicate)			
7. (Please indicate)			
8. (Please indicate)			

SPORT AND CULTURAL ACTIVITIES AT PROSPECTIVE SCHOOL

Indicate what sports and cultural activities will be offered at the prospective school.



SCHOOL CALENDAR FOR PROSPECTIVE SCHOOL		
Will the prospective school follow the approved school calendar of Mpumalanga DoE?	Yes	No
<p>If answered Yes, indicate the number of contact hours per grade per week that will be followed.</p> <p>(Attach a generic timetable)</p>		
<p>If answered No, indicate the number of school quarters and school days per quarter. Also indicate the number of contact hours per grade per week.</p> <p>(Attach a school calendar, as well as a generic timetable)</p>		



DECLARATIONS:

I, the undersigned, hereby declare that the particulars furnished in this form and its attachments are true, correct and complete.

NAME OF APPLICANT/OWNER (IN PRINT)	SIGNATURE	DATE
NAME OF PRINCIPAL (IN PRINT)	SIGNATURE	DATE
NAME OF CHAIR PERSON OF GOVERNING STRUCTURE (IN PRINT)	SIGNATURE	DATE



CERTIFICATION AND RECOMMENDATION BY CIRCUIT MANAGER

This is to certify that I, _____, the Circuit Manager of _____, have checked the completeness of the application, and verified the need for an independent school as has been applied for.

The recommendation hereunder is made in consideration of an evaluation by a team comprising of members as outlined in paragraph 5.3.3 of the *Guidelines for the Registration of Independent Schools, Expansion and Reduction of Grades and Curriculum and Application for Subsidy*.

I confirm that confidentiality in terms of the application and the consequent recommendations will be upheld.

REGISTRATION RECOMMENDED/REGISTRATION NOT RECOMMENDED

Motivation:

CIRCUIT MANAGER

DATE

NAME IN PRINT



CERTIFICATION AND RECOMMENDATION BY CIRCUIT COORDINATOR

This is to certify that I, _____, the Circuit Coordinator of _____, have co-ordinated a site visit to the envisaged independent school with stakeholders as outlined in paragraph 5.3.1 of the *Guidelines for the Registration of Independent Schools, Expansion and Reduction of Grades and Curriculum and Application for Subsidy*.

The recommendation hereunder is made in consideration of an evaluation by a team comprising of members outlined in the said document, paragraph 5.3.3, and chaired by myself.

I confirm that confidentiality in terms of the application and the consequent recommendations will be upheld.

REGISTRATION RECOMMENDED/REGISTRATION NOT RECOMMENDED

Motivation:

CIRCUIT COORDINATOR

DATE

NAME IN PRINT



RECOMMENDATION BY DISTRICT DIRECTOR

I confirm that confidentiality in terms of the application and the consequent recommendations will be upheld.

REGISTRATION RECOMMENDED/REGISTRATION NOT RECOMMENDED

Comments:

DISTRICT DIRECTOR

DATE

NAME IN PRINT



RECOMMENDATION BY CHIEF DIRECTOR: GET
(If application is applicable to GET Band)

I confirm that confidentiality in terms of the application and the consequent recommendations will be upheld.

REGISTRATION RECOMMENDED/REGISTRATION NOT RECOMMENDED

Comments:

CHIEF DIRECTOR: GET

DATE

NAME IN PRINT



RECOMMENDATION BY CHIEF DIRECTOR: FET
(If application is applicable to FET Band)

I confirm that confidentiality in terms of the application and the consequent recommendations will be upheld.

REGISTRATION RECOMMENDED/ REGISTRATION NOT RECOMMENDED

Comments:

CHIEF DIRECTOR: FET

DATE

NAME IN PRINT



RECOMMENDATION BY DEPUTY DIRECTOR GENERAL: CURRICULUM

I confirm that confidentiality in terms of the application and the consequent recommendations will be upheld.

REGISTRATION RECOMMENDED/ REGISTRATION NOT RECOMMENDED

Comments:

DEPUTY DIRECTOR GENERAL: CURRICULUM

DATE

NAME IN PRINT



APPROVAL BY HEAD OF DEPARTMENT

REGISTRATION APPROVED/ REGISTRATION NOT APPROVED

Comments:

Conditions:

HEAD OF DEPARTMENT

DATE

NAME IN PRINT



ANNEXURE D1: INFORMATION ON PROSPECTIVE LEARNERS

Number of prospective learners:

	Grade 1	Grade 2	Grade 3	Grade 4	Grade 5	Grade 6	Grade 7	Grade 8	Grade 9	Grade 10	Grade 11	Grade 12	Total
Boys													
Girls													
Total													

PARTICULARS OF PROSPECTIVE LEARNERS

(If there is insufficient space below, provide information on additional pages and attach to this form).

Surname and Initials of learner	Physical address of learner	Grade	Date of birth	Sex	
				Male	Female



ANNEXURE D2: QUALIFICATIONS OF PROSPECTIVE TEACHING STAFF

(If there is insufficient space below, provide information on additional pages and attach to this form).

NOTE: Certified copies of the following documents of educators must be submitted with your application –

1. **Qualifications**
2. **SACE Certificate**
3. **Valid Working Permit**

(If the space provided on the framework below is not sufficient a similar framework can be designed, completed and attached)

Surname and Initials	Female/Male	Post and Rank	Academic Qualifications	Professional (Teaching) Qualifications	Teaching Experience	Subjects taught	SACE Certificate Nr	SA Citizen Yes/No	Work Permit Yes/No
1.									
2.									
3.									
4.									



5.									
6.									
7.									
8.									
9.									
10.									
11.									
12.									
13.									
14.									



ANNEXURE D3: CHECK LIST FOR ATTACHMENTS RE. REGISTRATION OF A PROSPECTIVE INDEPENDENT SCHOOL

NOTE: Please check that you have attached the required attachments, as an incomplete application for registration will not be considered, and will be returned to the applicant.

ATTACHMENTS	Please tick (√)
1. Identification Nr of applicant/owner of prospective school	
2. Valid Work Permit Nr of owner of prospective school- If applicable	
3. Passport Nr of owner of prospective school- If applicable	
4. An agreement on the proposed names of the school, e.g. Minutes of a meeting	
5. Identification Nr of owner of the land of prospective school	
6. Copy of Lease Agreement/Permission to occupy the land/Title Deed	
7. Constitution	
8. Admission Policy	
9. Language Policy	
10. Assessment and Quality Assurance System Policy	
11. Floor plan, that is to scale, of the prospective building(s), indicating all the different rooms and ablution facilities	
12. Plan of prospective site	
13. Confirmation that prospective school site is securely fenced and access is controlled	
14. Letter of approval from municipality that prospective premises have been zoned for educational purposes	

15. Health Certificate stating that prospective buildings and site conforms to Health and Safety Regulations	
16. Proof of tenure that prospective buildings/site will be available for educational purposes for at least one academic year	
17. Maintenance plan for an electronic information management system	
18. Certified copies of prospective employees' IDs	
19. Certified copies of qualifications of prospective employees	
20. Certified copies of SACE Certificates of all prospective educator staff	
21. Proof of evaluation of foreign qualifications by SAQA in case of envisaged foreign employees	
22. Proof of valid working permits in case of envisaged foreign employees	
23. Sample school/parent contract	
24. Code of Conduct	
25. Evidence that the prospective principal of the school is a professionally qualified educator	
26. Copy of Text Book Policy	
27. Copy of Stationery Policy	
28. School Calendar (If school will not follow national departmental school calendar)	
29. Generic timetable	
30. Evidence of financial viability	

**ACKNOWLEDGEMENT OF RECEIPT OF AN APPLICATION FOR THE REGISTRATION OF AN
INDEPENDENT SCHOOL**

Important note to applicant:

Ensure that you, on submission of the *Application for the Registration of an Independent School*, receive a copy of this acknowledgement of receipt as evidence, and for reference purposes.

Hereby it is acknowledged by the undersigned persons that the *Application for the Registration of an Independent School* had been submitted to the office of the relevant Circuit Manager **on/or before the end of April**.

It is acknowledged that all information contained in the *Application for the Registration of an Independent School* is strictly confidential and will be treated as such.

Name of prospective school:	
Name of person submitting application:	
Signature of person submitting application:	
Date submission was made at Circuit Office:	
Name of person receiving the application:	
Signature of person receiving application:	

DATE STAMP OF CIRCUIT
OFFICE

