ANNEXURE B

## **SOUTH AFRICAN SCHOOLS ACT, NO. 84 OF 1996**

## REGULATIONS FOR THE EXEMPTION OF PARENTS FROM PAYMENT OF SCHOOL FEES

## APPLICATION FOR EXEMPTION

1.	PARTICULARS OF SCHOOL				
	Name:				
	Postal address:				
	***************************************				
	••••••••••••				
	•••••				
	••••••				
	Residential address:				
	•••••••••••••••••••••••••••••••••••••••				
	••••••				
	•••••••••••••••••••••••••••••••••••••••				
	Tel.:				
	Fax:				
2.	PERSONAL PARTICULARS OF PARENT				
	Name of parent <sup>1</sup> :				
	•••••••••••				
	Residential address:				
	•••••				

<sup>&</sup>lt;sup>1</sup> "Parent" means (a) a natural parent or guardian of a learner; (b) a person legally entitled to custody of a learner; or (c) a person who undertakes to fulfil the obligations of a person referred to in paragraphs (a) and (b) towards a learner's education at school.

Name(s) of learner(s) at the same public school or at another public school that has not been declared a no fee school.						
Name	ID no.	Grade	Amount of school fees	Additional monetary contribution	Name of	Tel. no.
					school	school
(1)						
(2)						
(3)						
(4)						
(5)						
(6)						
(7)						
(8)						
(9)						
(10)						

**3.** 

3.1

3.2.

	(Please provide documentary proof.)
3.3	Profit gained from any form of business:
	R
	(Please provide documentary proof.)
3.4	School fees for the applicant's child at the school:
	R
3.5	Additional monetary contributions paid by a parent in relation to a learner's
	attendance of, or participation in any programme of, a public school:
	R
4.	ADDITIONAL INFORMATION
	Any other relevant information supplied by the applicant, indicating the
	inability to pay school fees owing to personal circumstances, that may lead to
	conditional exemption:

## 5. MANNER OF DELIVERY OF THE APPLICATION FORM

The application form and accompanying documents must be sealed in an envelope addressed to the chairperson of the governing body and must be delivered to the school concerned by hand or by registered post.

Name of Parent	Name of Chairperson
Signature of Parent	Signature of Chairperson
Date:	Date:
	School stamp: