

2023 APPLICATION FORM TLHOKOMELO RESIDENCE

(Pty) Ltd 99/27954/07

Physical Address: 530 Moreleta Street, Silverton Postal Address: Private Bag X1840, Silverton, 0127
Telephone +27 (0)12 804 8350 Email address: admin@corncol.co.za



**PLEASE COMPLETE IN CAPITAL LETTERS AND MARK CORRECT OPTIONS WITH X.
ACCURACY IS ESSENTIAL. NEW BOYS OVER THE AGE OF 15 WILL NOT BE ADMITTED INTO THE HOSTEL.**

BOARDER'S DETAILS					
Boarder's Surname:				Admin Number:	
Boarder's Full First Names:				Grade:	
Date of Birth: <i>(day/month/year)</i>				Contract Signed:	
Boarder's ID Number:			Boarder's Cell No:		
Boarder's Age:			Boarder's Nationality:		
Please Mark With X:	Female: <input type="checkbox"/>	Male: <input type="checkbox"/>	If not SA, study permit expiry date: <input type="text"/>		
Name/s of sibling/s at Tlhokomelo Residence this year: <input type="text"/>					

PARENTS' OR LEGAL GUARDIANS' DETAILS <small>(Please notify us as soon as there are changes!)</small>							
DETAILS OF FATHER OR LEGAL GUARDIAN				DETAILS OF MOTHER OR LEGAL GUARDIAN			
Relationship to child:	Father <input type="checkbox"/>	Step-Father <input type="checkbox"/>	Other: <input type="checkbox"/>	Relationship to child:	Mother <input type="checkbox"/>	Step-Mother <input type="checkbox"/>	Other: <input type="checkbox"/>
Title:	Signature: <input type="text"/>			Title:	Signature: <input type="text"/>		
First Name:				First Name:			
Surname:				Surname:			
ID Number:				ID Number:			
Residential Address:				Residential Address:			
Postal Address:	Postal Code: <input type="text"/>			Postal Address:	Postal Code: <input type="text"/>		
Cell Number:				Cell Number:			
Tel No. (H):				Tel No. (H):			
Fax No:				Fax No:			
Name of Employer:				Name of Employer:			
Occupation:				Occupation:			
Tel No. (W):				Tel No. (W):			
Work Address:				Work Address:			
Email Address:				Email Address:			
Home address where student lives: <input type="text"/>							
Means of transport to/from hostel: <input type="text"/>				Name of driver if car/taxi: <input type="text"/>			
Alternative Contact's Name (Not Parent/Guardian): <input type="text"/>						Tel No: <input type="text"/>	
Alternative Contact's Name (Not Parent/Guardian): <input type="text"/>						Tel No: <input type="text"/>	

BOARDER'S HEALTH RECORD <small>(Medical costs are borne by the parents or legal guardians)</small>	
IMPORTANT! Please advise of any health concerns, dietary requirements or daily medication:	<input type="text"/>
Name and number of Medical Aid:	<input type="text"/>
Allergies from which your child suffers:	<input type="text"/>
Other information important for the Hostel Manager:	<input type="text"/>

PAYMENT SCHEME: Name of person and fund (if applicable) responsible for fee payments: <input type="text"/>			
Signature: <input type="text"/>			Date: <input type="text"/>
Please mark your choice with X :	Annually: <input type="checkbox"/>	Bi-annually: <input type="checkbox"/>	Monthly: <input type="checkbox"/>
<ul style="list-style-type: none"> The application fee of R500 (for new Boarders only) must be included with this application form. The application will not be processed and a place in the hostel will not be considered until the application fee is paid in full. A R200 payment to cover property maintenance during the year (not refundable) must be paid on registration. A non-refundable R500 booking fee will be levied in October for existing boarders who would like to book a place for next year. It will be deducted from January fees next year upon return. <p style="text-align: center;">Please note that the application fee is not refundable</p>			