

# 2025 APPLICATION FORM CORNERSTONE COLLEGE (NPC)



Non-Profit Company, 2000/003322/08 Physical Address: 530 Moreleta Street, Silverton  
Private Bag X1840, Silverton, 0127 Telephone +27 (0)12 804 8350 Email address: [admin@corncol.co.za](mailto:admin@corncol.co.za)

**PLEASE COMPLETE IN CAPITAL LETTERS AND MARK CORRECT OPTIONS WITH AN X. ACCURACY IS ESSENTIAL!**

STUDENT'S DETAILS					
Student's Surname:		Grade:			
Student's Full First Names:		Admin Number:			
Student's ID Number:		Student's cell number:			
Date of Birth (day/month/year):	Please Mark with X:	Female: <input type="checkbox"/>	Male: <input type="checkbox"/>	Study Permit (non-SA students): Yes <input type="checkbox"/> No <input type="checkbox"/>	
Student's Age:	Nationality:	Study permit expiry date if appl.:			
Name of previous school:	Tel No:	Transfer letter:			
Name/s of sibling/s at Cornerstone this year:		Final 2024 Report:			
Names of siblings previously at Cornerstone:		Testimonial:			
Health concerns, allergies, or daily medication:					

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

SUBJECT CHOICES (for more information see the Procedures Brochure):											
<b>Grade 8 - 9 Students</b> Choose one:		<b>Grade 10 - 12 Students: Choose 7 subjects</b> Home Language (HL), First Additional Language (FAL), Life Orientation [L.O.] and Maths/Maths Literacy ARE COMPULSORY									
Afrikaans	<input type="checkbox"/>	@English (HL)	<input type="checkbox"/>	English (FAL)	<input type="checkbox"/>	@Mathematics	<input type="checkbox"/>	@Accounting	<input type="checkbox"/>	Life Orientation	<input checked="" type="checkbox"/>
Sepedi*	<input type="checkbox"/>	Sepedi (HL)	<input type="checkbox"/>	Afrikaans (FAL)	<input type="checkbox"/>	Maths Literacy	<input type="checkbox"/>	Economics	<input type="checkbox"/>	C.A.T.	<input type="checkbox"/>
Isizulu*	<input type="checkbox"/>	Isizulu (HL)*	<input type="checkbox"/>	Sepedi (FAL)	<input type="checkbox"/>	@Science	<input type="checkbox"/>	Business Studies	<input type="checkbox"/>	@Information Technology*	<input type="checkbox"/>
	<input type="checkbox"/>		<input type="checkbox"/>	Isizulu (FAL)*	<input type="checkbox"/>	Geography	<input type="checkbox"/>	Life Sciences	<input type="checkbox"/>	History*	<input type="checkbox"/>
@Specific entrance requirements *According to demand											

<b>PAYMENT SCHEME:</b> Name of person responsible for fee payments and name of fund/sponsor (if applicable):							
Choose scheme (mark one with an X):		Monthly:	Mid-monthly in advance:	Bi-Annual	Annual		
Signature:				Date:			
The <b>non-refundable</b> application fee of R700 ( <b>for new students only</b> ) must be included with this application form. <b>Mid-month payments are accepted only in advance</b> , i.e. before the end of the relevant month.							