



**AMITY INTERNATIONAL SCHOOL : “We nurture talent”**

GDE Reg No: 70023265

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NPO : 2013/090771/12

### **SCHOOL CLEARANCE FORM**

(To be completed by the school the learner currently attends)

(Please complete the letter and send directly to [admissions@amityza.com](mailto:admissions@amityza.com))

Name of learner	
Grade of learner	
Date of birth	
Age	
Name of person responsible for fee payment	
ID number of person responsible for fee payment	
Name of school where child is currently enrolled	
Telephone number of school	
Annual Fees	R (academic year)
Fees paid to date	R
Fees outstanding	R
Comments :	

## **ACADEMIC**

Does the learner's academic performance reflect his/her capability? Yes / No

Has the learner been assessed by an Educational Psychologist / Occupational Therapist/other? Yes / No

The learner's academic results fall in the  
Top  Middle  Bottom   
of the GRADE performance.

English \_\_\_\_\_% or Level \_\_\_\_\_

Afrikaans \_\_\_\_\_% or Level \_\_\_\_\_

Mathematics \_\_\_\_\_% or Level \_\_\_\_\_

## **SKILLS**

*Please rate the learner on the following scale:*

4 – Exceptional                      3 – Good                      2 Average                      1 – Below average

- |   |   |  |
|---|---|--|
| <input type="checkbox"/> Concentration          | <input type="checkbox"/> Reading ability              | <input type="checkbox"/> Group participation     |
| <input type="checkbox"/> Following instructions | <input type="checkbox"/> Study habits                 | <input type="checkbox"/> Interaction with peers  |
| <input type="checkbox"/> Independence           | <input type="checkbox"/> Task completion              | <input type="checkbox"/> Leadership skills       |
| <input type="checkbox"/> Listening skills       | <input type="checkbox"/> Parent involvement           | <input type="checkbox"/> Problem solving ability |
| <input type="checkbox"/> Meeting deadlines      | <input type="checkbox"/> Acceptance of responsibility | <input type="checkbox"/> Courtesy                |
| <input type="checkbox"/> Reliability            | <input type="checkbox"/> Respect for superiors        |  |
| <input type="checkbox"/> Presentation of work   | <input type="checkbox"/> Adherence to Code of Conduct |  |
| <input type="checkbox"/> Appearance             | <input type="checkbox"/> Behaviour                    |  |
| <input type="checkbox"/> Self-control           | <input type="checkbox"/> Involvement in school life   |  |

**ABSENTEEISM**

Number of days absent to date: \_\_\_\_\_

**SCHOOL FEES**

Have you experienced difficulties with school fee payment / collection? Yes / No

**DISCIPLINE**

Has the learner been involved in any of the following:

- |                         |                          |            |                          |                            |                          |
|-------------------------|--------------------------|------------|--------------------------|----------------------------|--------------------------|
| Gang-related activities | <input type="checkbox"/> | Disrespect | <input type="checkbox"/> | Swearing                   | <input type="checkbox"/> |
| Stealing                | <input type="checkbox"/> | Smoking    | <input type="checkbox"/> | Dealing in/taking drugs    | <input type="checkbox"/> |
| Bullying/fighting       | <input type="checkbox"/> | Vandalism  | <input type="checkbox"/> | Drinking alcohol at school | <input type="checkbox"/> |

Has there ever been any problems with:

Disturbance in class:	Yes / No
Books left at home:	Yes / No
Work not done:	Yes / No

Has the learner ever been suspended? Yes / No

Has the learner ever been expelled? Yes / No

In the event of the learner being suspended or expelled please provide reasons.

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Parental involvement in the school (please specify)

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Should we accept this learner, is there any relevant information (positive/negative) you would like to draw to our attention: (e.g. family, remedial, emotional, medical, ability to adapt etc.):

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Thank you very much for completing this form and for your valuable input.

\_\_\_\_\_  
Principal signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
School stamp

***This is to certify that the above person has paid the school fees as indicated.***

<b>PLEASE PRINT IN BLOCK LETTERS</b>		
Bursar / Finance: full name and surname		
Bursar / Finance: signature		
Date		

Amity International School (AIS) Clearance Form