



21 Digtebij Crescent  
Mabille Park  
Kuilsriver  
7580

☎: 021 906 6980  
Email: gondavljn@gmail.com

A REGISTERED NON-PROFIT ORGANISATION NO: 043-617-NPO

Annexure D

### CONFIDENTIAL QUESTIONNAIRE

*To be completed and stamped by the Principal of the school the learner is presently attending:*

1. Full names of learner: \_\_\_\_\_ Grade: \_\_\_\_\_
2. Address of learner: \_\_\_\_\_
3. Name of school: \_\_\_\_\_
4. Address of school: \_\_\_\_\_
5. Telephone number of school: (021) \_\_\_\_\_
6. Achievements:
  - 6.1. Sport: \_\_\_\_\_
  - 6.2. Cultural: \_\_\_\_\_
  - 6.3. Academic: \_\_\_\_\_
7. Has the learner been subject to any disciplinary hearing? \_\_\_\_\_  
If yes, please provide details: \_\_\_\_\_
8. Has the learner ever been referred to a practitioner for psychological or remedial assessment? \_\_\_\_\_  
If yes, please provide details: \_\_\_\_\_
9. What are the school fees per annum? \_\_\_\_\_
10. What are the school fees per month? \_\_\_\_\_
11. Are fees paid regularly? Yes \_\_\_\_\_ No \_\_\_\_\_  
If No, please provide details: \_\_\_\_\_
12. Are there any fees outstanding? Yes \_\_\_\_\_ No \_\_\_\_\_ If Yes, state amount: R \_\_\_\_\_
13. Are school fees subsidised? Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, state amount R \_\_\_\_\_

**NB! No consideration will be given to a learner whose form is incomplete**

General criteria

Criteria	Poor	Acceptable	Good	Excellent
Appearance				
Application to work				
Behaviour				
School attendance				
School involvement				

School stamp

Principal's Name: \_\_\_\_\_ Principal's Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Revised 06/16