

 <b>Western Cape Government</b> FOR YOU <small>Education</small>		<h1 style="text-align: center;">2025</h1> <h2 style="text-align: center;">WCED ONLINE FORM FOR LEARNER APPLICATIONS TO ORDINARY PUBLIC SCHOOLS (GR.1 &amp; Gr.8 ONLY)</h2>										
<b>WESTERN CAPE EDUCATION DEPARTMENT (WCED) ADMISSIONS 2025</b>												
The information on this form will be captured on the WCED online admissions system to assist the parent.												
<b>Primary Parent / Legal Guardian Information</b>												
<b>Parent / Legal Guardian type (Please tick)</b>			Biological		Adoptive		Legal Guardian		Step		Other	
<b>Title: (Please tick)</b>			Mr.	Miss	Mrs.	Ms	Prof.	Dr	Rev	Hon	Adv	
<b>First Name</b>			<b>Second Name</b>			<b>Surname</b>						
<b>Date of birth</b>						<b>Gender</b>		Male		Female		
<b>SA Citizen</b>		YES	NO		<b>ID number /Passport Number / Permit</b>							
<b>Marital status: (Please tick)</b>			Divorced		Married		Separated		Single		Widowed	
<b>IMPORTANT!!! Please Complete</b>												
<b>Contact Information</b>												
<b>Cell phone No.</b>						<b>Emergency Contact No.</b>						
<b>Tel. No. (work)</b>						<b>Alternative Contact No.</b>						
<b>Alternative Name and Surname</b>						<b>Alternative: Relationship</b>						
<b>Email address</b>												
<b>Physical Address</b>												
<b>Western Cape Address</b>		YES			NO							
<b>Address type: (Please tick)</b>		Street / Road		Flat		Farm		Plot		Other		
<b>Address No / House / Street Number</b>					<b>Address / Street Name</b>							
<b>Building / Complex / Block / Apartment name</b>												
<b>Country</b>							<b>Province</b>					
<b>Town</b>							<b>Suburb</b>					
<b>Work Address (Optional)</b>												
<b>Western Cape Address</b>		YES			NO							
<b>Address type: (Please tick)</b>		Street / Road		Flat		Farm		Plot		Other		
<b>Address No / House / Street Number</b>					<b>Address / Street Name</b>							
<b>Building / Complex / Block / Apartment name</b>												
<b>Country</b>							<b>Province</b>					
<b>Town</b>							<b>Suburb</b>					
<b>Which address must be used for your application?</b>					<b>Physical Address</b>					<b>Work Address</b>		

**OPTIONAL (Secondary Parent / Legal Guardian Information)**

<b>Parent / Legal Guardian type (Please tick)</b>				Biological		Adoptive		Legal Guardian		Step		Other	
<b>Title: (Please tick)</b>				Mr.	Miss	Mrs.	Ms.	Prof.	Dr	Rev	Hon	Adv	
<b>First Name</b>				<b>Second Name</b>				<b>Surname</b>					
<b>Date of birth</b>				<b>Gender</b>				Male		Female			
<b>SA Citizen</b>		YES		NO				<b>ID number /Passport Number / Permit</b>					
<b>Gender</b>		Male		Female				<b>SA Citizen</b>		YES		NO	
<b>Marital status: (Please tick)</b>				Divorced		Married		Separated		Single		Widowed	
<b>IMPORTANT!!! Please Complete</b>													
<b>Contact Information</b>													
<b>Cell phone no.</b>								<b>Emergency Contact no.</b>					
<b>Tel. no. (work)</b>								<b>Alternative Contact No.</b>					
<b>Alternative Name and Surname</b>								<b>Alternative: Relationship</b>					
<b>Email address</b>													
<b>Address Outside Western Cape</b>				YES		NO							
<b>Address type: (Please tick)</b>				Street		Flat		Farm		Plot			
<b>House / Street Number</b>						<b>Street name</b>							
<b>Building / Complex / Block / Apartment name</b>													
<b>Town</b>								<b>Suburb</b>					

<b>Learner Information</b>													
<b>Required Grade (The Grade you are applying for)</b>								<b>Date of Application (YYYY / MM / DD)</b>					
<b>First-time registration in Western Cape</b>						Yes		No					
<b>First Name</b>				<b>Second Name</b>				<b>Surname</b>					
<b>Learner's ID Number:</b>								<b>Date of Birth</b>					
<b>Learner's CEMIS Number:</b>													
<b>Gender</b>		Male		Female									
<b>Population group</b>		Black/African		Coloured		Indian/ Asian		White					
<b>SA Citizen</b>		YES		NO		Undocumented SA / Foreign learner		YES		NO			
<b>Is the address the same as the primary parent's?</b>						YES		NO					
<b>Home address (where learner currently resides)</b>													
<b>Address type</b>		Street		Flat		Farm		Plot					
<b>Address no.</b>		Street name						<b>Building / Complex /Apartment name</b>					
<b>Town</b>						<b>Suburb</b>							
<b>Reason for Application</b>		<b>Learner Not promoted</b>						<b>Better prospects</b>					
		<b>Highest Grade Reached</b>						<b>New registration</b>					
		<b>Serious Trauma or issue at Previous School (Proof required)</b>						<b>Transfer from SNE to Public Ordinary school</b>					

Name of the last school attended					Year	
Are you relocating to the Western Cape (WC) from another province?	YES		NO			
If yes, write down the name of the province.						
Are you relocating to the WC from another country?	YES		NO			
If yes, write down the name of the country.						
Language of Learning and Teaching (LOLT)	AFR	ENG	XHOSA	SESOTHO	TSWANA	

Do you wish to apply for Hostel accommodation? (Applicable to mainly rural areas)	YES		NO	
Do you wish to apply for learner transport? (Applicable to mainly rural areas at schools using the WCED learner transport schemes)	YES		NO	
a) Participation in sport	YES		NO	
If yes, please indicate which sport.				
b) Participation in cultural programme / s	YES		NO	
If yes, please indicate which cultural programme / s.				
c) Has the learner held any leadership position/s at school?	YES		NO	
If yes, please provide details.				
Name any sports award/s achieved.				
d) Does the learner play an instrument/s?	YES		NO	
If yes, please indicate which instrument/s.				
e) Level of music participation (Write down the level of participation or achievement.)				

**Select Schools**

*Please indicate the schools you want to APPLY TO:*

**KINDLY RANK SCHOOLS BELOW IN THE ORDER OF YOUR PREFERENCE**

No.1	NAME OF SCHOOL				Are you applying for more than 1 learner at the same school?	YES		NO	
Please indicate if the learner has a sibling attending this school.		YES		NO		CEMIS NUMBER			
No.2	NAME OF SCHOOL				Are you applying for more than 1 learner at the same school?	YES		NO	
Please indicate if the learner has a sibling attending this school.		YES		NO		CEMIS NUMBER			
No.3	NAME OF SCHOOL				Are you applying for more than 1 learner at the same school?	YES		NO	
Please indicate if the learner has a sibling attending this school.		YES		NO		CEMIS NUMBER			
No.4	NAME OF SCHOOL				Are you applying for more than 1 learner at the same school?	YES		NO	
Please indicate if the learner has a sibling attending this school.		YES		NO		CEMIS NUMBER			
No.5	NAME OF SCHOOL				Are you applying for more than 1 learner at the same school?	YES		NO	
Please indicate if the learner has a sibling attending this school.		YES		NO		CEMIS NUMBER			

No.6	NAME OF SCHOOL				Are you applying for more than 1 learner at the same school?	YES		NO	
Please indicate if the learner has a sibling attending this school.		YES		NO		CEMIS NUMBER			
No.7	NAME OF SCHOOL				Are you applying for more than 1 learner at the same school?	YES		NO	
Please indicate if the learner has a sibling attending this school.		YES		NO		CEMIS NUMBER			
No.8	NAME OF SCHOOL				Are you applying for more than 1 learner at the same school?	YES		NO	
Please indicate if the learner has a sibling attending this school.		YES		NO		CEMIS NUMBER			
No.9	NAME OF SCHOOL				Are you applying for more than 1 learner at the same school?	YES		NO	
Please indicate if the learner has a sibling attending this school.		YES		NO		CEMIS NUMBER			
No.10	NAME OF SCHOOL				Are you applying for more than 1 learner at the same school?	YES		NO	
Please indicate if the learner has a sibling attending this school.		YES		NO		CEMIS NUMBER			

<b>Declaration by legal parent/guardian</b>	
I, the undersigned, declare that the above information is correct.	
Signed by legal parent/guardian: _____	
Date: _____	

REQUIRED DOCUMENTS SUBMITTED TO THE SCHOOL / WCED		
Please check that the following documentation is attached	Please tick	
1. Certified copy of ID / Birth certificate (learner)	YES	NO
2. A study permit issued by the Department of Home Affairs or proof of application (If the learner is a foreign learner)	YES	NO
3. Copy of immunization card / Road to Health chart (Primary schools only)	YES	NO
4. Latest official school academic report of the learner	YES	NO
5. Proof of residence (This could be: Rates account / Lease agreement / An affidavit confirming residence)	YES	NO
Checked by (Name and surname): _____	Date: _____	
Checked and signed by: _____		