



CONFIDENTIAL LETTER

To be completed by the school the learner currently attends.

Please complete this letter and send directly to admissions@theway.co.za

LEARNER DETAILS:

Name of Learner: _____

Current Grade: _____

Age: _____

Date of Birth (dd/mm/yyyy): ____/____/____

ACADEMIC

Does the learner's academic performance reflect his/her capability?

YES

NO

Has the learner been assessed by an Education Psychologist/Occupational Therapist?

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

Concentration

Reading ability

Group participation

Following instructions

Study habits

Interaction with peers

Independence

Task completion

Leadership skills

Listening skills

Parent involvement

Problem solving ability

Meeting deadlines

Acceptance of responsibility

Reliability

Presentation of work

Adherence to Code of Conduct

Respect for superiors

Appearance

Behaviour

Courtesy

Self-control

Involvement in school life

ABSENTEEISM

Number of days absent to date:

SCHOOL FEES

Please select the appropriate comment:

Are the school fees: Fully paid Largely paid Largely unpaid Unpaid

Have you experienced difficulties with school fee collection?

DISCIPLINE

Has the learner been involved in any of the following?

- Gang-related activities
- Disrespect
- Swearing
- Stealing
- Smoking
- Dealing in/taking drugs
- Bullying/Fighting
- Vandalism
- Drinking alcohol at school

Have there ever been any problems with:

Disturbance in class:	<input type="button" value="YES"/>	<input type="button" value="NO"/>
Books left at home:	<input type="button" value="YES"/>	<input type="button" value="NO"/>
Work not done:	<input type="button" value="YES"/>	<input type="button" value="NO"/>

Has the learner ever been suspended?

Has the learner ever been expelled?

In the event of the learner having been suspended or expelled, please provide reasons.

Parental involvement in the school (please specify):

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.):

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

Signature: Date
Principal/HOD/Class teacher

School stamp