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

**ANNEXURE D (A)**  
**CONFIDENTIAL QUESTIONNAIRE**

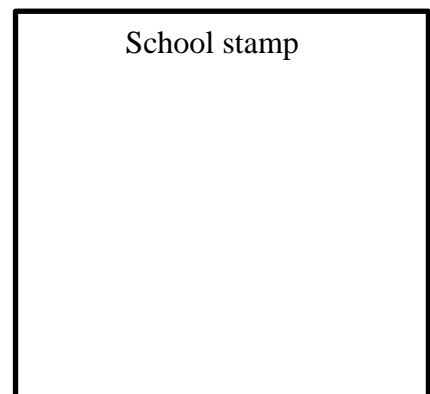
*To be completed and stamped by the Principal of the school the learner is presently attending:*

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 |      |            |      |           |
| Behavior            |      |            |      |           |
| School attendance   |      |            |      |           |
| School involvement  |      |            |      |           |



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

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

04/20R