



THE DIOCESE OF CHINHOYI

P.O. Box 680 | Phone:00263 267 2122562
26 Robson Manyika Drive | Fax :00263 267 2122217
Chinhoyi | Email :diochinhoyi@gmail.com
Zimbabwe



THE COMPLETION OF THIS FORM IS NOT A GUARANTEE OF ACCEPTANCE OF THE PUPIL. It is suggested that in your own interests you simultaneously make application to other school/s of your choice. All children applying for a place will be subject to an assessment.

A. PUPIL DETAILS

Surname: _____ Official Forenames: _____

Date of Birth: _____ Birth Certificate/ID no: _____

Gender: _____ Level applied for: _____

Date of entry: _____ Race: _____

Name of previous school: _____

Any other information you feel we should know?

B. MEDICAL INFORMATION

Name of Family Doctor: _____ Telephone No _____

Medical Aid Society: _____ Medical Aid No. _____ Suffix No. _____

Does the child have allergies or any medical conditions?

C. FAMILY DETAILS

Marital Status of mother and father: Married/Divorced/Widowed/Single/Other (specify):

Home Language: _____ Religion: _____

Which place of worship do you attend? _____

Name of Religious Leader: _____

Address: _____



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D. HOME DETAILS

HomeAddress: _____

Home Telephone: _____ Cell _____

E-mail _____

E. FATHER'S DETAILS

Surname _____ Forename/s: _____

Nationality: _____

Home Address, if different to D: _____

Occupation: _____ Company Name: _____

BusinessAddress: _____

Business Telephone No(s) _____ Cell: _____

E-mail: _____

F. MOTHER'S DETAILS

Surname _____ Forenames: _____

Nationality: _____

Home address, if different to D: _____

Occupation _____ CompanyName _____

BusinessAddress: _____

Business telephone No(s) _____ Cell: _____

Email: _____

G. INVOICING DETAILS

Details of person who is responsible for payment of school fees

Surname: _____ Initials _____ Title:Mr/Mrs/Miss/Ms/Rev/Doc

PostalAddress: _____

PersonalEmail: _____

Information provided on this application form is confidential.



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G. LEGAL GUARDIAN (If applicable)

Surname: _____ Forename/s: _____ Title: _____

Nationality: _____ Home Address, if different to D: _____

Occupation: _____ CompanyName: _____

BusinessAddress: _____

BusTelephoneNo(s): _____ Cell _____

Email: _____

H. EMERGENCY CONTACTS

(Must be people who are willing and able to come within a short time, to collect and care for child, if school has been unable to contact mother or father)

Contact #1Name: _____ Home Telephone no. _____

Bus Telephone no. _____ Cell: _____ Relationship to family _____

Contact#2Name: _____ Home Telephone no. _____

Bus Telephone no. _____ Cell: _____ Relationship to family: _____

I would like my child to attend OLPH PRIMARY SCHOOL for the following reasons:

I. SCHOOL RULES

- ❖ Mass is compulsory.
- ❖ Every child to conform to the school Liturgical Calendar and all activities. (CATHOLIC ETHOS)
- ❖ Learners should only communicate in English except during Shona lesson.
- ❖ All learners to be at school by the designated time.
- ❖ Learners shall put on sports attire only during sports/ on a sports day.
- ❖ No learner shall leave the school premises without permission.
- ❖ Zero tolerance to any form of abuse at school.
- ❖ No learner should be seen loitering in town in school uniform.



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- ❖ Uniform should be worn complete all the time.
- ❖ Learners to put on correct seasonal uniform.
- ❖ Girls plait their hair neatly (100 lines) no braids and plain brush for boys.
- ❖ No high heeled shoes for girls, no mini dresses or skirts.
- ❖ Boys should not drop their shorts or trousers, must put on one short/ trousers.
- ❖ No makeup of any level.
- ❖ Handle all school property with care, if any damages parents are responsible.
- ❖ Learners should conserve the school environment, no litter in the school environment.
- ❖ Learners should always move in a single file, no running in the corridors but walk quietly.
- ❖ Every learner has to greet the elders and welcome visitors in English.
- ❖ Learner to rise from their chairs when greeting a visitor and offer a chair for the visitor.
- ❖ Sports are compulsory.
- ❖ All parents to pay fees before schools open.
- ❖ All parents / visitors to report to the admin first.
- ❖ All parents to observe consultation days.
- ❖ Communication to the school should be done in writing/ email or through the admin.
- ❖ Parents to check and respond to teacher communications.
- ❖ All parents to be at school by dismissal time.
- ❖ Learners to be collected in the presence of the class teacher.
- ❖ NO ABUSE OF THE SOCIAL MEDIA AT SCHOOL.

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Signature of parent/guardian

Relationship to child

Date:

Stamp here