



EDUPLEX
PRE-, PRIMARY AND HIGH SCHOOL
 Confidential Report

We kindly request that, the Principal or his/her representative, of the school where the learner is currently enrolled, please be so kind, as to complete the form below, as accurately as possible. Please return the form to:

The Principal: Eduplex
P.O. Box 11610
Queenswood
0121

OR

Primary School e-mail: primary.school@eduplex.co.za
Primary School fax: 086 632 8289
High School e-mail: high.school@eduplex.co.za
High School fax: 086 276 3289

1. Learner's surname:

First names:

Nickname: _____ Boy/Girl: _____

2. Date of birth: _____ Current grade: _____

3. Academic record: (Please complete **and** attach latest school report)

	Term 1	Term 2	Term 3
English			
Afrikaans			
Mathematics			

Academic potential (Intellect): (Please mark with an **X** where applicable)

Weak	Below average	Average	Above average	Outstanding

4. Attitude to school work: (Please mark with an **X** where applicable)

Exceptionally conscientious	Conscientious	Not conscientious at this stage

5. Extra-mural participation:

SPORT: (Complete and mark with an **X** where applicable)

		Provincial	A-team	B-team	Participant
5.1					
5.2					
5.3					
5.4					
5.5					

CULTURE: (Complete and mark with an X where applicable)

		Provincial	A-team	B-team	Participant
5.6					
5.7					
5.8					
5.9					
5.10					

6. LEADERSHIP: (comment)

7. General comment re learner:

8. Problems that you may be aware of: (e.g. Family, Emotional, Remedial, Medical, Behaviour, Adaptability, etc.)

9. Parental involvement:

10. School fees:

Pay regularly	Do not pay regularly

11. Do you recommend this learner?

Yes	No

SCHOOL STAMP

SIGNATURE OF PRINCIPAL