



Hillcrest High School

FINANCIAL CLEARANCE

Full Name of Pupil: _____

Pupil ID Number: _____ Admission Number: _____

Full Name of Parent: _____

Name of Person responsible for fee payment: _____

ID / Passport No. of fee Payer: _____

Name of School where pupil is currently enrolled: _____

Number of years at current school: _____ Current year at current school: _____

Grade applying for: _____ Year of entry applying for: _____

SCHOOL FEES:

Annual school fees for this year: R _____ Previous years fees: R _____

Fees paid to date: R _____ Fees Outstanding: R _____

Frequency of Payments: Monthly Termly Annually payment

Did the parent / guardian apply for Financial Assistance: YES / NO

Was financial assistance granted: YES / NO

Previous siblings at HHS: YES / NO - If Yes supply name & year: _____

Comments: _____

Signed and Dated on this _____ day of _____ 20_____

Principal / Bursar's Signature:

Date:



Please ensure this form is completed in full & returned with your application.