



THE NATIONAL SCHOOL OF THE ARTS

1. Copy of FULL (Unabridged) Birth Certificate or ID Document.
2. Two recent Passport / ID. Size Photos (No School Photos).
3. Latest current year ORIGINAL report (or certified copy) from current school,
4. For Immigrants, all the relevant permits.
5. A non-refundable R50 audition fee.

PLEASE COMPLETE THE FOLLOWING AND MARK WITH AN X WHERE NECESSARY

Learners Audition Requirements (Only ONE audition on the same day)	<u>GAUTENG DEPARTMENT OF EDUCATION</u> <input type="checkbox"/> ART <input type="checkbox"/> DANCE: DANCE FORM <input type="checkbox"/> DRAMA <input type="checkbox"/> MUSIC: INSTRUMENT
Is hostel accommodation required?	<input type="checkbox"/> YES <input type="checkbox"/> NO
Learner's Surname	
Learner's First Names	
Learner's Date of Birth	
Learner's Present Grade	
Learner's Present School	
Learner's Present School Address <u>with Postal Code</u>	
Father's Surname	
Father's First Names	
Father's ID Number	
Father's Postal Address <u>with Postal Code</u>	
Father's Home Address <u>with Postal Code</u>	
Father's Email Address	
Father's Work: Name of Company and Address	
Father's Telephone Numbers	Home: Work: Cell:
Father's Occupation (if self employed state type of business)	
Father's Annual Income	<input type="checkbox"/> Less than R60 000 <input type="checkbox"/> Between R60 000 and R130 000 <input type="checkbox"/> Greater than R130 000

Mother's Surname	
Mother's First Names	
Mother's ID Number	
Mother's Postal Address <u>with Postal Code</u>	
Mother's Home Address <u>with Postal Code</u>	
Mother's Email Address	
Mother's Work: Name of Company and Address	
Mother's Telephone Numbers	Home: Work: Cell:
Mother's Occupation (If self employed state type of business)	
Mother's Annual Income	<input type="checkbox"/> Less than R60 000 <input type="checkbox"/> Between R60 000 and R130 000 <input type="checkbox"/> Greater than R130 000
Alternative Contact number in case of an emergency	Contact name: Relationship to child: Phone Number:
Do you have other children at present at the NSA?	<input type="checkbox"/> No <input type="checkbox"/> Yes Name of Child: Relation to child:
With whom does the learner reside?	
Who is responsible for paying school fees? The person stated will be legally liable for the school fees.	Surname: First Names: Relationship to Learner:
Account Payer's ID Number	
Account Payer's Postal Address and Telephone Numbers	

SIGNATURES:

FATHER: _____

DATE: _____

MOTHER: _____

DATE: _____

ACCOUNT PAYER: _____

DATE: _____

