



**EASTERN CAPE
DEPARTMENT OF EDUCATION**

**APPLICATION FOR THE OPERATIONALIZATION
OF A NEW SCHOOL**

PLEASE NOTE

1. The operationalization of a new school cannot take place unless recommended by the District Director and finally approved by the Department of Education.
2. Paragraphs 1 – 7 must be completed by the Principal and checked out by the District Director.
3. All completed applications must be submitted to the District Director.
4. The application form must be accompanied by a sketch plan indicating distances between existing neighbouring schools and the proposed school.
5. All forms must be completed in triplicate. Once approval has been obtained a copy of this form must be submitted to EMIS for capture.

SCHOOL		EMIS NO.	
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1	LOCATION	REMARKS
1.1	District Office _____	_____
1.2	Circuit _____	_____
1.3	Magisterial District _____	_____
1.4	Residential Area _____	_____
1.5	Nearest town _____	_____
1.6	SUGGEST THREE NAMES IN ORDER OF PREFERENCE	
	1.6.1 _____	_____
	1.6.2 _____	_____
	1.6.3 _____	_____

2 PROPOSED ENROLMENT / STRUCTURE		
	Proposed class	Proposed enrolment
2.1	Junior Primary School Grade R – Grade 3	_____
2.2	Senior Primary School Grade 4 – Grade 6	_____
2.3	Junior Secondary School Grade 7 or Grade 8	_____
2.4	Secondary School Grade 10	_____

3 PROPOSED CURRICULUM		
3.1	_____	_____
3.2	_____	_____
3.3	_____	_____
3.4	_____	_____
3.5	_____	_____
3.6	_____	_____

4 STAFFING				
4.1	TEACHING POSTS	REMARKS		
4.1.1	Principal	_____		
4.1.2	Heads of Department	_____		
4.1.3	Educators PL1	_____		
4.1.4	Total posts Required	_____		
4.2	Accommodation			
4.2.1	Own accommodation available	<table border="1"> <tr> <td>YES</td> <td>NO</td> </tr> </table>	YES	NO
YES	NO			
4.2.2	Platoon with another School	<table border="1"> <tr> <td>YES</td> <td>NO</td> </tr> </table>	YES	NO
YES	NO			
	If yes – state name of Host schools	_____		
4.2.3	Are buildings to be rented?	<table border="1"> <tr> <td>YES</td> <td>NO</td> </tr> </table>	YES	NO
YES	NO			
	If yes; which buildings	_____		
	Are funds available?	<table border="1"> <tr> <td>YES</td> <td>NO</td> </tr> </table>	YES	NO
YES	NO			

11	RECOMMENDATION
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_____ DEPUTY DIRECTOR GENERAL	_____ DATE

12	AUTHORIZATION		
<table border="1"><tr><td>APPROVED</td><td>NOT APPROVED</td></tr></table>		APPROVED	NOT APPROVED
APPROVED	NOT APPROVED		
_____ SUPERINTENDENT GENERAL DEPARTMENT OF EDUCATION	_____ DATE		