

BYLAAG A

HIERDIE VORM MOET IN 'N PLASTIEKSAKKIE BUITE-OP ELKE LEERLING SE PAKKIE BOEKE EN/OF ASSESSERING VASGEBIND WORD. GEEN WERK SAL GEMONITOR WORD, INDIEN BYLAAG A&B NIE INGEHANDIG WORD NIE

GR 0-9 LE - AMEN 2020

DATUM:

GRAAD:

NAAM:

VAN:

D. NOMMER:

MERK DIE TOEPASLIKE BLOKKIE

HUISTAAL AFRIKAANS

KOERIER KOM HAAL

ONS SAL SELF KOM HAAL

20 Maart

KWARTAAL 1: ASSESSERING

221 Junie

KWARTAAL 2: ASSESSERING

MONITOR VAN BOEKE

20 September

KWARTAAL 3: ASSESSERING

MONITOR VAN BOEKE

29 November

KWARTAAL 4: ASSESSERING

ANNEXURE A

THIS FORM MUST BE PLACED IN A PLASTIC POCKET AND SECURED ON TOP OF EACH LEARNER'S BOOK PARCEL AND/OR ASSESSMENT. NO WORK WILL BE MONITORED, UNLESS ANNEXURE A&B ARE HANDED IN

GR 0-9 LE - AMEN 2020

DATE:	GRADE:
NAME:	SURNAME:
D. /NUMBER:	

MARK THE APPLICABLE SPACE

HOME LANGUAGE	ENGLISH	
COURIER WILL FETCH	<input type="checkbox"/>	
WE WILL COLLECT	<input type="checkbox"/>	
<u>20 March</u>	TERM 1: ASSESSMENT	<input type="checkbox"/>
<u>21 June</u>	TERM 2: ASSESSMENT	<input type="checkbox"/>
	MONITORING OF BOOKS	<input type="checkbox"/>
<u>20 September</u>	TERM 3: ASSESSMENT	<input type="checkbox"/>
	MONITORING OF BOOKS	<input type="checkbox"/>
<u>29 November</u>	TERM 4: ASSESSMENT	<input type="checkbox"/>



HIS FORM MUST BE PLACED IN A PLASTIC POCKET AND SECURED ON TOP OF EACH LEARNER'S BOOK PARCEL AND/OR ASSESSMENT. NO WORK WILL BE MONITORED, UNLESS ANNEXURE A&B ARE HANDED IN

ANNEXURE B

GRADE 0-9

LE-AMEN 2020

WE, _____ THE PARENTS OF

GRADE _____ D _____, HEREBY DECLARE THAT WE ARE AWARE OF THE CONTENT AND STANDARD OF WORK BEING HANDED IN TO BE MONITORED BY LE-AMEN. WE ARE AWARE OF THE FACT THAT OUR CHILD IS REGISTERED AT LE-AMEN AS A HOME EDUCATION LEARNER AND WE AS PARENTS TAKE FULL RESPONSIBILITY FOR OUR CHILD/REN'S EDUCATION. WE AGREE THAT IF WE HAVE DECIDED TO MAKE USE OF A QUALIFIED TEACHER, IT IS AN ARRANGEMENT BETWEEN US, (THE PARENTS AND THE TEACHER).

WE AS PARENTS HAVE CHECKED THE FOLLOWING:

1. WORK IS DONE AND DATED ACCORDING TO THE WORK SCHEME
2. ALL WORK IS MARKED BY PARENT
3. ALL CORRECTIONS ARE DONE BY PUPIL
4. ASSESSMENT IN EACH SUBJECT WAS WRITTEN UNDER EXAM CONDITIONS

SIGNATURE FATHER: _____ DATE: _____

SIGNATURE MOTHER: _____ DATE: _____

(Both parents must sign. In case of only one signature, we need an affidavit attached)

"....For me and my house we shall serve the Lord"



HIERDIE VORM MOET IN 'N PLASTIEKSAKKIE BUIE-OP ELKE LEERLING SE PAKKIE BOEKE EN/OF ASSESSERING VASGEBIND WORD. GEEN WERK SAL GEMONITOR WORD, INDIEN BYLAAG A&B NIE INGEHANDIG WORD NIE

BYLAAG B GRADE 0-9

LE-AMEN 2020

ONS, _____ DIE OUERS VAN

GRAAD _____ D _____, VERKLAAR HIERMEE DAT ONS BEWUS IS VAN DIE INHOUD EN STANDAARD VAN WERK WAT INGEHANDIG WORD OM GEMONITOR TE WORD DEUR LE-AMEN. ONS IS BEWUS VAN DIE FEIT DAT ONS KIND/ERS GEREGISTREER IS BY LE-AMEN AS TUISONDERRIG LEERLINGE EN NEEM VOLLE VERANTWOORDELIKHEID AS OUERS VIR ONS KIND/ERS SE SKOOLOPLEIDING. ONS WEET DAT INDIEN ONS ENIGSINS VAN 'N GEKWALIFISEERDE ONDERWYSER GEBRUIK MAAK, IS DIT 'N OOREENKOMS TUSSEN ONS AS OUERS EN DIE BETROKKE ONDERWYSER.

ONS AS OUERS HET DIE VOLGENDE NAGEGAAN:

1. WERK IS GEDOEN EN GEDATEER VOLGENS DIE WERKSKEMAS
2. ALLE WERK IS GEMERK DEUR DIE OUERS
3. ALLE NASORG IS GEDOEN DEUR DIE LEERLING
4. ASSESSERING IN ELKE VAK IS ONDER EKSAMENOMSTANDIGHED E AFGELÊ

HANDTEKENING VADER: _____ DATUM: _____

HANDTEKENING MOEDER: _____ DATUM: _____

(Beide ouers moet teken. Indien een ouer nie kan teken nie, moet 'n beëdigde verklaring aangeheg word.)

G9

GRADE 0-10 – 2020

PLEASE COMPLETE THE FORM AND FAX (011) 958-1945 OR E-MAIL info@le-amen.co.za .
REGISTRATION OF THE STUDENT WILL BE ON HOLD UNTIL THIS FORM REACHES US.

WE, _____

PARENTS / GUARDIANS OF

(NB: Please note that we will deal with parents only, regardless of the fact that children may receive tuition at a group / teacher. Parents are responsible for home schooling their child/ren.)

CONFIRM THAT WE ARE AWARE OF ALL THE REQUIREMENTS STIPULATED IN THE MANUAL. WE ARE ALSO AWARE THAT FAILURE TO MEET THESE REGULATIONS CAN RESULT IN PROBLEMS WITH CERTIFICATION AT THE END OF THE YEAR. NO REFUNDS.

SIGNATURE:

(Both parents must sign. In case of only one signature, we need an affidavit attached)

FATHER: _____ DATE: _____

MOTHER: _____ DATE: _____

CONTACT NUMBERS:

Contact details will be used for correspondence. **Please make sure of the correct contact details and let us know immediately if anything changes. We take no responsibility for lack of communication if the e-mail address is wrong or has changed without notification.**

CELL: _____

E-MAIL: _____

G9

Graad 0-10 / 2020

VOLTOOI ASSEBLIEF DIE VORM EN FAKS (011) 958-1945 OF E-POS info@le-amen.co.za.

REGISTRASIE GAAN NIE VOORT, ALVORENS ONS NIE HIERDIE VORM TERUG ONTVANG.

ONS, _____

OUERS / VOOGDE VAN

(NB: Neem asseblief kennis dat indien die leerling in 'n groep onderrig ontvang of gebruik maak van onderwysers, ons direk net met die ouers gaan werk en nie via die betrokke groep / onderwyser nie. Ouers is verantwoordelik vir die tuisonderrig.)

NEEM DEEGLIK KENNIS VAN ALLES IN DIE HANDLEIDING. INDIEN DIE REGULASIES SOOS UITEENGESIT, NIE NAGEKOM WORD NIE, IS ONS BEWUS DAARVAN DAT DAAR PROBLEME KAN ONTSTAAN MET SERTIFIKASIE AAN DIE EINDE VAN DIE JAAR. GEEN GELDE SAL TERUGBETAAL WORD NIE.

HANDTEKENING:

(Beide ouers moet teken. Indien een ouer nie kan teken nie, moet 'n beëdigde verklaring aangeheg word.)

VADER: _____

DATUM: _____

MOEDER: _____

DATUM: _____

KONTAKNOMMERS:

Onderstaande nommers sal gebruik word vir korrespondensie. **Maak asseblief seker van die korrekte kontaknommers en indien jou nommer verander, stel ons asseblief onmiddellik in kennis. Ons aanvaar geen aanspreeklikheid vir gebrek aan kommunikasie, indien die e-pos adres verkeerd is of verander het sonder kennisgewing nie.**

SEL: _____

E-POS: _____

Z10

GRADE 11/12 – 2020

PLEASE COMPLETE THE FORM AND FAX (011) 958-1945OR E-MAIL info@le-amen.co.za .

REGISTRATION OF THE STUDENT WILL BE ON HOLD UNTIL THIS FORM REACHES US.

WE, _____

PARENTS / GUARDIANS OF

(NB: Please note that we will deal with parents only, regardless of the fact that children may receive tuition at a group / teacher. Learners and parents are responsible for the matric year.)

CONFIRM THAT WE ARE AWARE OF ALL THE REQUIREMENTS STIPULATED IN THE MANUAL. WE ARE ALSO AWARE THAT FAILURE TO MEET THESE REGULATIONS, WILL RESULT IN STRICT STEPS BEING TAKEN AND CANCELLATION, IF NECESSARY. NO REFUNDS.

SIGNATURE:

(Both parents must sign. In case of only one signature, we need an affidavit attached)

FATHER: _____ DATE: _____

MOTHER: _____ DATE: _____

CONTACT NUMBERS:

Contact details will be used for correspondence. **Please make sure of the correct contact details and let us know immediately if anything changes. We take no responsibility for lack of communication if the e-mail address is wrong or has changed without notification.**

PARENT

LEARNER

CELL: _____

CELL: _____

E-MAIL: _____

E-MAIL: _____

“....For me and my house we shall serve the Lord”

Z10

GRADE 11/12 – 2020

VOLTOOI ASSEBLIEF DIE VORM EN FAKS (011) 958-1945 OF E-POS info@le-amen.co.za.
REGISTRASIE GAAN NIE VOORT, ALVORENS ONS NIE HIERDIE VORM TERUG ONTVANG

ONS, _____

OUERS / VOOGDE VAN

(NB: Neem asseblief kennis dat indien die leerling in 'n groep onderrig ontvang of gebruik maak van onderwysers, ons direk net met die ouers gaan werk en nie via die betrokke groep / onderwyser nie. Leerlinge en ouers is verantwoordelik vir die matriekjaar.)

NEEM DEEGLIK KENNIS VAN ALLES IN DIE HANDLEIDING. INDIEN DIE REGULASIES SOOS UITEENGESIT, NIE NAGEKOM WORD NIE, IS ONS BEWUS DAARVAN DAT DAAR STRENG OPGETREE GAAN WORD EN KANSELLASIE SAL PLAASVIND. GEEN GELDE SAL TERUGBETAAL WORD NIE.

HANDTEKENING:

(Beide ouers moet teken. Indien een ouer nie kan teken nie, moet 'n beëdigde verklaring aangeheg word.)

VADER: _____ DATUM: _____

MOEDER: _____ DATUM: _____

KONTAKNOMMERS:

Onderstaande nommers sal gebruik word vir korrespondensie. **Maak asseblief seker van die korrekte kontaknommers en indien jou nommer verander, stel ons asseblief onmiddellik in kennis. Ons aanvaar geen aanspreeklikheid vir gebrek aan kommunikasie, indien die e-pos adres verkeerd is of verander het sonder kennisgewing nie.**

OUER

LEERDER

SEL: _____

SEL: _____

E-POS: _____

E-POS: _____



Graad 11/12

VOORBLAD

(HEG VOOR AAN ELKE OPDRAG/TOETS/PORTEFEULESTUK.)

NAAM VAN LEERLING: _____

D. NUMBER: _____

VAK: _____

OPDRAG NO: _____

DATUM: _____

PUNTE BEHAAL: _____

KOMMENTAAR:

“...For me and my house we shall serve the Lord”

Grade 11/12

COVER PAGE

(ATTACH TO EACH TEST/ PORTFOLIO/ ASSESSMENT HANDED IN.)

NAME OF STUDENT: _____

D. NUMBER: _____

SUBJECT: _____

ASSIGNMENT NR: _____

DATE: _____

MARKS: _____

COMMENTS:

GRADE 11/12

INDIVIDUELE VAK HERMERK/HERSIEN AANSOEKVORM

Aansoek vir hermerk/hersien van eksamen antwoordstelle vir Junie en/of Rekord eksamens.

Naam		
Vak		
Merk opsie	Hermerk	Hersien
Merk opsie	Junie Eksamen	Rekord Eksamen
Datum		

Foote:

Hermerk R350

Hersien R180

Foote moet aansoek vergesel voordat versoek geprosesseer word.

Faks bewys van betaling na 011 958 1945 of e-pos info@le-amen.co.za

- **Maak seker dat jy bewus is van hermerk/hersien prosedures in handleiding.**

Bankbesonderhede:

Le-Amen Centre

FNB

Rekening no: 50400063372

Tak no: 250741

“....For me and my house we shall serve the Lord”

GRADE 11/12

INDIVIDUAL SUBJECT REMARK/RECHECK APPLICATION FORM

Application for the remarking/ rechecking of exam answer papers for the June exams and the Prelim

Name		
Subject		
Indicate option	Remark	Recheck
Indicate option	June Exam	Prelim
Date		

PRESCRIBED FEES:

Remark R350

Recheck R180

Fees must accompany the application for the process to start

Please fax **proof of payment** to 011 958 1945 or e-mail info@le-amen.co.za

- **Please make sure you have read and understand the manual stipulating the conditions of the remark/ rechecking procedure.**

Banking Details:

Le-Amen Centre

FNB

Acc no: 50400063372

Branch no: 250741

“....For me and my house we shall serve the Lord”



GRADE 7-10

INDIVIDUELE VAK HERMERK/HERSIEN AANSOEKVORM

Aansoek vir hermerk/hersien van eksamen antwoordstelle vir termyn 1-4 Assessering.

<u>Naam en Van van Leerder:</u>			
<u>Vak/ke:</u>			
Merk Opsie:			
Hermerk		Hersien	
Merk Opsie:			
Kwartaal 1	Kwartaal 2	Kwartaal 3	Kwartaal 4

FOOIE:

Hermerk: R350

Hersien: R180

Foosie moet aansoek vergesel voordat versoek geprosesseer word.

Faks bewys van betaling na 011 958 1945 of e-pos info@le-amen.co.za

- **Maak seker dat jy bewus is van hermerk/hersien prosedures in handleiding.**

Bankbesonderhede:

Le-Amen Centre

FNB

Rekening no: 50400063372

Tak no: 250741

“....For me and my house we shall serve the Lord”

GRADE 7-10

INDIVIDUAL SUBJECT REMARK/RECHECK APPLICATION FORM

Application for the remarking/ rechecking of exam answer papers for term 1-4 assessment.

<u>Name and Surname of student:</u>			
<u>Subject/s:</u>			
Indicate option:			
Remark		Recheck	
Indicate option:			
Term 1	Term 2	Term 3	Term 4

PRESCRIBED FEES:

Remark: R350

Recheck: R180

Fees must accompany the application for the process to start

Please fax **proof of payment** to 011 958 1945 or e-mail info@le-amen.co.za

- **Please make sure you have read and understand the manual stipulating the conditions of the remark/ rechecking procedure.**

Banking Details:

Le-Amen Centre

FNB

Acc no: 50400063372

Branch no: 25074

“....For me and my house we shall serve the Lord”