



**POTCHEFSTROOM HIGH SCHOOL
FOR BOYS
CONFIDENTIAL REPORT**

(This form is to be completed by the learner's current School and returned directly to Potchefstroom High School for Boys)

Private Bag X45
Potchefstroom
2520
Tel: 018 294-5339/0
Fax: 018 293-3338
E-mail: admin@potchboyshigh.co.za
Web Site: www.potchboyshigh.co.za

LEARNER SURNAME: _____

LEARNERS FIRST NAMES: _____

GRADE: _____ **AGE:** _____

ACADEMIC ACHIEVEMENT (as per last report)

SUBJECT	PERCENTAGE
English	
Afrikaans	
Mathematics	
Mathematical Literacy	
Physical Science	

SPORT Comment on ability, Participation, Sportsmanship and Team Membership:

CULTURAL AND CREATIVE ACTIVITIES

CHARACTER AND LEADERSHIP POTENTIAL

ANY KNOWN PROBLEMS (e.g. Family, Emotional, Remedial, Medical, SGB Disciplinary hearing)

Has all school/boarding fees been paid to date? Yes No

If "No" please specify _____

NAME _____

SIGNATURE _____

SCHOOL STAMP

Thank you for your assistance and co-operation.