

Enq. Khoza HNS
0829352502
0662382296



Stand No. 1122 Sand River Trust
P O Box 1698, Hazyview, 1242
Moumalanga

ADMISSION FORM: 2024/2025

Child's Full Name and Surname: CANOKHLE ZIMTOI NKOSI

Date of Birth: 2022-07-22

ID Number: 220722611B081

Home language: SISWATI

Gender: MALE

Mother, Guardian or Caregiver Name: MUTHLE MPSHEAU

Parent/guardian/caregiver ID: 9505110388088

Telephone number: 0824202066

Place of work: N/A

Home Address: ELEPHANT TRUST

Income per month: _____

Father, Guardian or Caregiver Name: THESEN NKOSI

Parent/guardian/caregiver ID: _____

Telephone number: 0193167505

Home Address: ELEPHANT TRUST

Place of work: Hazyview

Income per month: N/A

Number of dependants under 18 years: _____

Emergency number/s: 0822572317

Name and phone number of child's regular doctor or clinic: NA

Medical issues: NONE

Allergies: NONE

This form must be returned with the

- Copy of Child's clinic card/health card,
- Copy of child's birth certificate,
- Parent/guardian/caregiver copy of ID
- A proof of income or copy of child support grant for parents or bank statement where SASA is paid to.

I agree to pay the school fees of _____ per month and to follow the rules and regulations of the creche/centre.

Signed: _____

Date: _____

FOR OFFICE USE ONLY:

Date received: _____

Date & Time of Interview: _____

All forms received by: _____

Date accepted: _____

Attending from: _____

Assigned class: _____



REPUBLIC OF SOUTH AFRICA
NATIONAL IDENTITY CARD

Surname:
MASHEGO
Names:
MUHLE ZINHLE
Sex:
F
Nationality:
RSA
Identity Number:
9505110300088
Date of Birth:
11 MAY 1995
Country of Birth:
RSA
Status:
CITIZEN



Signature:

M. Zinhle



Conditions

This card has been issued by the
Department of Home Affairs in terms of the
Identification Act, Act 68 of 1997

If found please return to the Department of Home Affairs
For enquiry or verification purposes contact 0800 80 11 80

Date of Issue:
29 NOV 2017

237-8



105462976



I CERTIFY THAT THIS DOCUMENT IS A TRUE REPRODUCTION (COPY) OF THE ORIGINAL DOCUMENT WHICH WAS HANDED TO ME FOR AUTHENTICATION. I FURTHER CERTIFY THAT, FROM MY OBSERVATIONS, AN AMENDMENT OR A CHANGE WAS NOT MADE TO THE ORIGINAL DOCUMENT.

HANDTEKENING / SIGNATURE *[Signature]*

MAGS NOMMER / FORCE NUMBER 7263494-5 RANG / RANK CST

NAAM IN DRUKSKRIF / NAME IN PRINT MAWULEKA Sci

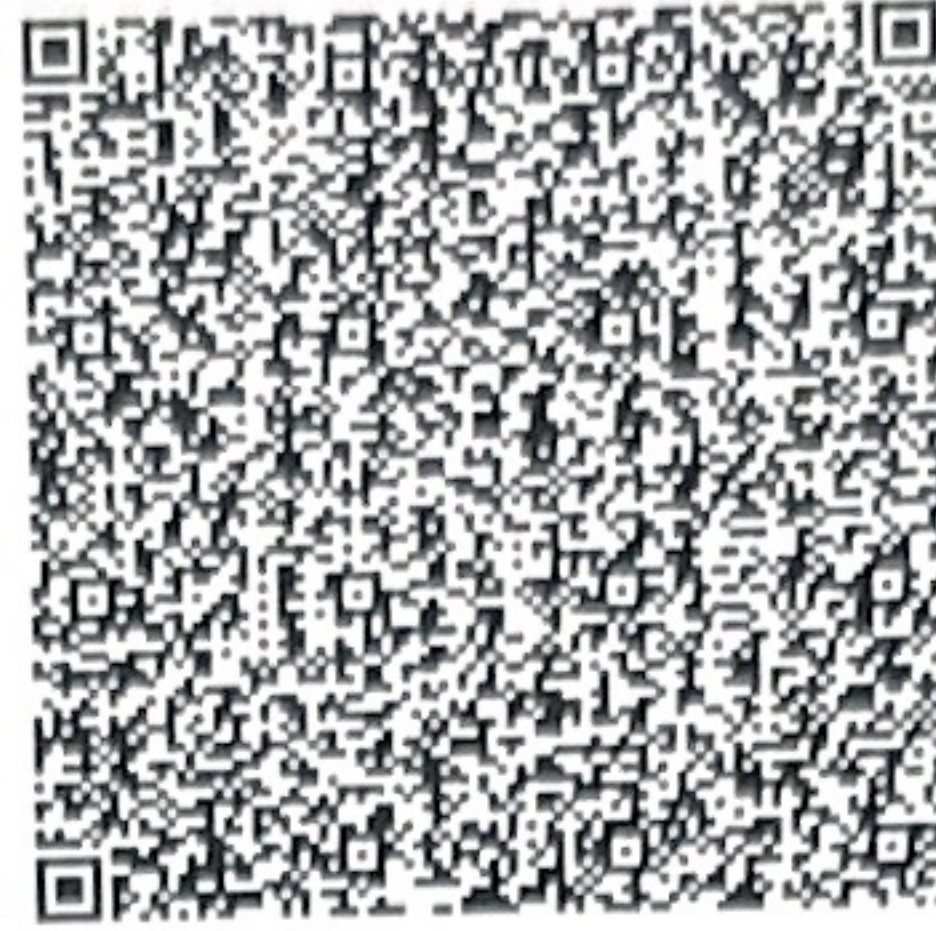
SUID-AFRIKAANSE POLISIEDIENS
C.S.C.
04-03-2025
HAZYVIEW
SOUTH AFRICAN POLICE SERVICE

One of the Global One money management products or services

Proof of Account Details



Capitec Bank
10/03/2025
Branch: 470010
Device:
4298SSERV01



SkyQR App Store Google Play AppGallery
Validate this document using SkyQR

To Whom it May Concern

We hereby confirm that Muhle Mashego has the following account(s) at Capitec Bank Limited on 10/03/2025

Client Details

Name: Muhle Mashego
ID/Passport Number: 9505110388088
Residential Address: STAND NO 66, ELEPHANT TRUST, WHITE RIVER, 9869
Postal Address: STAND NO 66, ELEPHANT TRUST, WHITE RIVER, 9869

Account Details

Account Status: Active
Account Type: Savings
Account Number: 1567310964
Branch Code: 470010
Date Opened: 2018-02-13

The account details provided herein should not be read as extending by implication to any other matters not specifically addressed. The account details are given as at the above date and no obligation is hereby assumed to update the account details on any future date.

Capitec Bank Limited shall have no liability whether in contract, delict (including without limitation negligence) or otherwise to the above accountholder or any third party in relation to the account details contained herein.



home affairs

Department:
Home Affairs
REPUBLIC OF SOUTH AFRICA

H 6272136

83/DHA - 5

PARTICULARS FROM THE POPULATION REGISTER I.R.O.:

BIRTH CERTIFICATE

CHILD IDENTITY NUMBER: '220722611308
 SURNAME: NKOSI
 FORENAMES: ZANOKUHLE ZIMTOTI
 GENDER: MALE DATE OF BIRTH: 2022-07-22
 PLACE OF BIRTH: MKHUHLU
 COUNTRY OF BIRTH: SOUTH AFRICA

MOTHER: IDENTITY NUMBER : 9505110388088
 MAIDEN/SURNAME: MASHEGO
 FORENAMES: MUHLE ZINHLE

DATE OF BIRTH: 1995-05-11
 PLACE OF BIRTH: HAZYVIEW
 COUNTRY OF BIRTH: SOUTH AFRICA

FATHER: IDENTITY NUMBER : 960906
 SURNAME: NKOSI
 FORENAMES: THABANI MARTIN
 DATE OF BIRTH: 1996-09-06
 PLACE OF BIRTH: HAZYVIEW
 COUNTRY OF BIRTH: SOUTH AFRICA

ENDORSEMENTS:
NONE

SUID-AFRIKAANSE POLISIEDIENST
 C.S.C
 2022 -09- 25
 MASOYI
 SOUTH AFRICAN POLICE SERVICE

EK SERTIFISEER DAAR HIERDIE DOKUMENT 'N REPRODUKASIE (KOPIE) VAN
 DIE OORSPRONKLIKE DOKUMENT IS. EK SERTIFISEER VERDER DAT WILKENS 'N WAARNEMINGS DAAR WILKENS
 WYSIGING OF VERANDERING OP DIE OORSPRONKLIKE DOKUMENT AANGE
 BRING IS NE
 I CERTIFY THAT THIS DOCUMENT IS A TRUE REPRODUCTION (COPY) OF THE
 ORIGINAL DOCUMENT WHICH WAS HANDED TO ME FOR AUTHENTICATION. I
 FURTHER CERTIFY THAT FROM MY OBSERVATIONS AN AMENDMENT OR A
 CHANGE HAS NOT MADE TO THE ORIGINAL DOCUMENT.

M. Masojane
 HANDTEKENING / SIGNATURE
 MAGSNOMMER / FORCE NUMBER: 7226878 RANG / RANK: COL
 NAAM IN DRUKSKRYF / NAME IN PRINT: MASHADANE

DEPARTMENT OF HOME AFFAIRS
 PRIVATE BAG X2032
 HAZYVIEW 1242
 2022 -08- 15
 OFFICIAL DATE STAMP
 HAZYVIEW

PP *[Signature]*
 DIRECTOR-GENERAL: HOME AFFAIRS

DATE PRINTED: 20220815

ISSUED BY: YEV262

