

Enq. Khoza HNS  
0829352502  
0662382296



Bethel Creche & Pre-School  
Application Form

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

2024

Child's Full Name and Surname: NEO MOKOENA  
Date of Birth: 15-03-2022  
ID Number: 2203150755088  
Home language: SISWATI  
Gender: FEMALE

Parent, Guardian or Caregiver Name: MNCIABA MBALI  
Parent/guardian/caregiver ID: 9608020869088  
Telephone number: 0727167268  
Place of work: NOT WORKING / UNEMPLOYED  
Home Address: STAND NO 111 SANDRIVER TRUST  
Income per month:

Parent, Guardian or Caregiver Name: BONGIWE LEKHULENI  
Parent/guardian/caregiver ID: 0007080915080  
Telephone number: 0726727072  
Home Address: STAND NO 111 SANDRIVER TRUST  
Place of work: UNEMPLOYED  
Income per month:

Number of dependants under 18 years: 3  
Emergency number: 0767801234  
Name and phone number of child's regular doctor or clinic:  
Medical issues:

Allergies:

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 pay card or salary slip or copy of child support grant for parents, guardian or caregiver

I agree to pay the school fees of \_\_\_\_\_ per month and to follow the rules and regulations of the centre.

Signed:

Date: 30-01-2024

**FOR OFFICE USE ONLY:**

Date received:

Date & Time of Interview:

All forms received:

Date accepted:

I.D. No. 960802 0869 088  
S.A. CITIZEN

- NOTICE OF PERSONAL PARTICULARS
1. Any changes to the personal particulars in your ID Book must be communicated to all relevant parties.

NOTICE OF CHANGE OF ADDRESS

1. Keep the NOTICE OF CHANGE OF ADDRESS form in this pocket to report a change of address or a change in particular of your present address e.g. name of street and/or street number etc.
2. Hand in at or post to the nearest regional/district office of the DEPARTMENT OF HOME AFFAIRS



SURNAME  
**MNGIBA**

FORENAMES  
**MBALI**

COUNTRY OF BIRTH  
**SOUTH AFRICA**

DATE OF BIRTH  
**1996-08-02**

DATE ISSUED  
**2013-09-03**

ISSUED BY AUTHORITY OF  
THE DIRECTOR-GENERAL  
HOME AFFAIRS

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.....  
MAGSOMMER **558905111** RANG **esT**  
FORCE NUMBER ..... RANK .....  
NAAM IN DRUKSKRIE **B M abuye**  
NAME IN PRINT .....

.....  
MANDTEKEN / SIGNATURE

**SUID-AFRIKAANSE POLISIEDIENS**

**C.S.C**

**2024-01-31**

**HAZVIEWW**

**SOUTH AFRICAN POLICE SERVICE**

# Clinic Visits

SUID-AFRIKAANSE POLISIEDIENS  
C.S.C  
2024-02-02  
HAZYVIEW  
SOUTH AFRICAN POLICE SERVICE

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 MAGSNUMBER  
 FORRE NUMBER  
 NAME IN PRINT

Age	Date	Feeding advice p4	Growth monitoring p9	Development p23	Head circumference p25	Immunisation p27	Vitamin A p28	Deworming p28	Oral Health p29	TB screen p40	Consider HIV p40	Next date
3-6 days	18-03-22	✓	✓							✓	✓	26-04-22
6 weeks	26-04-22	✓	✓			✓				✓	✓	24-05-22
10 weeks	24-05-22	✓	✓			✓				✓	✓	21-06-22
14 weeks	21-06-22	✓	✓			✓				✓	✓	15-09-2022
4 months												
5 months												
6 months	21/9/22	✓	✓	✓		✓				✓	✓	15/12/22
7 months												
8 months												
9 months	16/12/22	✓	✓	✓		✓				✓	✓	16/03/23
10 months												
11 months												
12 months	22-03-23	✓	✓	✓		✓				✓	✓	15-09-2023
14 months												
16 months												
18 months	15-04-23	✓	✓	✓		✓				✓	✓	15-03-2024
20 months												
22 months												
2 years												
2 and a half years												
3 years												
3 and a half years												
4 years												
4 and a half years												
5 years												
6 years												
12 years												

tick once done

Not in schedule

ENQ: ZITHA N  
REF: 9/1/5  
TEL: 013 709 7019

**RE: CONFIRMATION LETTER OF A BENEFICIARY IN RECEIPT OF SOCIAL GRANT/S**

**Name and Surname of the beneficiary: MNGIBA MBALI**

**I.D. No: 9608020869088**

**Address: Sandriver Trust, Stand No. 111**

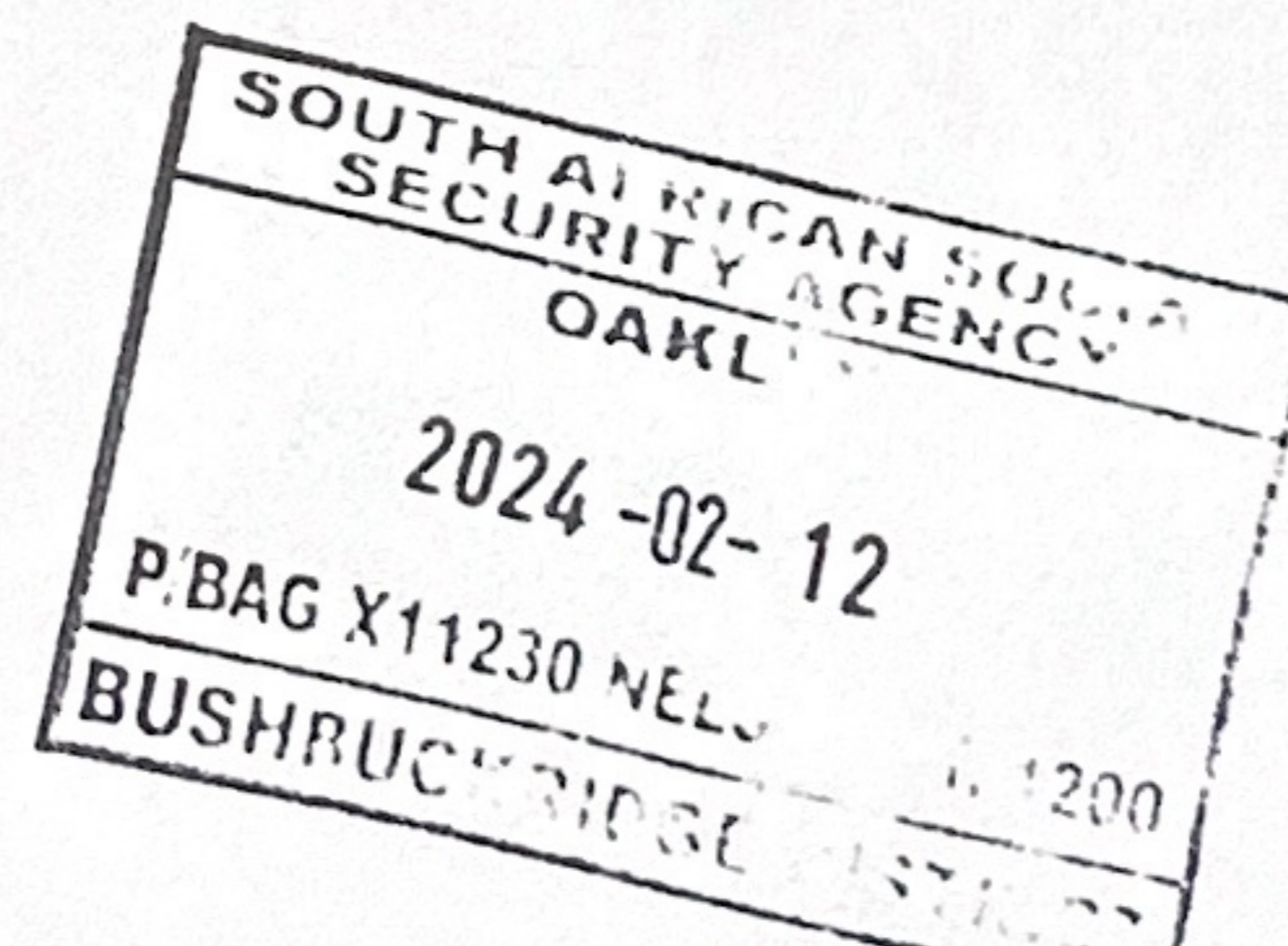
**GRANT TYPE: Child Support Grant**

No	Name and Surname	I.D. Number
1	MOKOENA NEO NKOSENHLE MATEO	2203150755088
3	MGIBA PRINCE	0719092173083
4	SHABANGU BONOLO	2109200679089
5		
6		

The total monthly Grant amount is: R1530.00

**N.B. Please note that this letter cannot be used to open accounts or personal loans**

Signature:  Date: 2024.01.10







home affairs

Department:  
Home Affairs  
REPUBLIC OF SOUTH AFRICA

H 4338190

83/DHA - 5

PARTICULARS FROM THE POPULATION REGISTER (R.O.):

# BIRTH CERTIFICATE

CHILD  
 SURNAME: MOKOENA  
 FORENAMES: NEO NKOSENHLE MATEO

GENDER: FEMALE  
 PLACE OF BIRTH: THEMBA  
 COUNTRY OF BIRTH: SOUTH AFRICA

DATE OF BIRTH: 2022-03-15

MOTHER: IDENTITY NUMBER : 9608020869088

MAIDEN/SURNAME: MNGIBA  
FORENAMES: MBALI

DATE OF BIRTH: 1996-08-02  
PLACE OF BIRTH: BONGANI  
COUNTRY OF BIRTH: SOUTH AFRICA

FATHER: IDENTITY NUMBER : 9310065618088

SURNAME: MOKOENA  
FORENAMES: EVANS ANTAN

DATE OF BIRTH: 1993-10-06  
PLACE OF BIRTH: MATIKWANA  
COUNTRY OF BIRTH: SOUTH AFRICA

ENDORSEMENTS:  
NONE

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*B Mabuye*  
 SIGNATURE

85840511 RANG RANK  
 FORCE NUMBER

MABUYE B Mabuye  
 NAME IN DRUKSRIF NAME IN BRIT

SUID-AFRIKAANSE POLISIEDIENS

C.S.C

2024-01-31

HAZYVIEW

SOUTH AFRICAN POLICE SERVICE

DEPARTMENT OF HOME AFFAIRS  
 PRIVATE BAG 12002  
 HAZYVIEW 1242

2022-03-23

OFFICIAL MATTERS STAMP

*[Signature]*  
 DIRECTOR-GENERAL: HOME AFFAIRS

DATE PRINTED: 20220323

ISSUED BY: YBV262