# Addition of Annexures E1 and E2 to Directions

1. The following Annexures are hereby added to the Directions after Annexure D2:

# “ANNEXURE E1

**APPLICATION FOR EXEMPTION OF LEARNER TO ATTEND SCHOOL**

[Application in terms of direction 6(1)(a),6(1)(b) and 6(1)(c)]

*(To be completed by the parent/caregiver/designated family member)*

**16** No. 43578 GOVERNMENT GAZETTE, 2 AUGUST 2020

I, (Name and surname), the

parent, caregiver or a designated family member *(delete whichever is not applicable)*

of (Name of learner) who is in Grade

at (Name of

school), hereby apply to the Head of Department to exempt the learner from compulsory school attendance, in terms of section 4 of the South African Schools Act, 1996 (Act No. 84 of 1996), for the period of the national state of disaster.

I do so, and take full responsibility, to oversee the learning of the learner at home as indicated in the signed agreement (Annexure E2). The reasons for my application for exemption are as follows:

|  |  |
| --- | --- |
| **Reason** | **Further Details** |
| Underlying health condition and/or comorbidity of the learner or a close family  member |  |
| General concern over the  risk of transmission of COVID-19 |  |

In respect of a learner contemplated in direction 6(1)(a): Evidence of medical condition of learner is **attached/ not attached** *(please select)*

Signed at on this day of 2020.

Parent/Caregiver/Designated family member Full Name Contact number:

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STAATSKOERANT, 2 AUGUSTUS 2020 No. 43578 **17**

# ANNEXURE E2

**PARENT ACCEPTANCE FORM: TO ADHERE TO CONDITIONS FOR EXEMPTION FROM COMPULSORY SCHOOL ATTENDANCE**

[Application in terms of direction 6(1)(a),6(1)(b) and 6(1)(c)]

*(To be completed by the parent/caregiver/designated family member)*

I, (Name and surname), the parent, caregiver or a designated family member *(delete whichever is not applicable)* of (Name of learner) who is in

Grade at (Name of school), hereby

accept the following conditions for the exemption of the learner from compulsory school attendance for the duration of national state of disaster:

1. I accept and agree that I will take responsibility—
   1. to oversee the daily learning of the learner at home, including the daily work and assessments;
   2. to ensure that the learner is informed of the work that must be learned and the work that must be completed on a daily basis; and
   3. to ensure that all work and assignments are collected or accessed and returned to school, in accordance with the arrangements made with the school.
2. I accept and agree that, if the conditions in this Annexure are not met, the exemption from compulsory school attendance may be withdrawn.
3. I accept and understand that, if I am unable to accept these conditions and the associated responsibilities, then the learner should continue to attend school.

Signed at on this day of 2020.

Parent/Caregiver/Designated family member Full Name

Contact number: ”.

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