



**DEPARTMENT OF EDUCATION  
PROVINCE OF THE EASTERN CAPE  
TRANSFER FORM FOR LEARNERS**

<b>Name and address of school issuing the form</b>						
<b>Contact details</b>	<b>Tel.</b>			<b>Fax.</b>		
<b>Full name of learner</b>						
<b>ID number of learner/ Date of Birth</b>						
<b>Medium of Instruction the learner has received</b>						
<b>Last grade passed and year</b>	<b>Grade</b>			<b>Year</b>		
<b>Grade(s) in which the learner has been retained</b>						
<b>This learner should be placed in Grade</b>						
<b>Attendance at this school</b>	<b>From</b>			<b>To</b>		
	<b>Y</b>	<b>M</b>	<b>D</b>	<b>Y</b>	<b>M</b>	<b>D</b>
<b>Reasons for leaving the school</b>						
<b>Full name and address of parents / guardians</b>						

\_\_\_\_\_  
**Name of Principal (Print)**

\_\_\_\_\_  
**Signature of Principal**

\_\_\_\_\_  
**Date**

**SCHOOL STAMP**