



Dear Parents/Guardians

GRADE 9 APTITUDE TESTS: 2 JULY 2020

As all things in life, studies also require certain developed skills to ensure success and efficiency. Should a learner's learning skills be developed, he/she will be able to spend relatively less time on studies, yet achieve higher marks.

The learner, the parent and the school are normally unaware to what extent the learning receptiveness skills of the learner are developed. The school has thought it well to determine your child's learning receptiveness skills by means of an assessment. These results can assist and enable the school and you as a parent to become aware of your child's developed, less-developed and under-developed learning skills. With your permission, this assessment, supported by Human Progress Management (an educational institution) can also be conducted on your child.

Once the learning receptiveness skills profile of your child has been determined and analysed, an educational advisor will discuss the results with you and your child. Should there be a need and you deem it necessary to develop various learning skills, you can then register your child with Human Progress Management. Human Progress Management specializes in the development of learning receptiveness skills through the use of scientific-pedagogic founded methods.

To support parents and learners with the decision process relating to subject choices (and later career choices), aptitude assessments will be done for all the Grade 9 learners on **THURSDAY, 2 July 2020 in TWO SESSIONS** as follows:

SESSION 1: GRADES 9.1, 9.2, 9.3 and 9.4

08:00 Line up outside school gate at Small Theatre in full school uniform.

Screening, sanitizing, filling in of forms and signing in.

09:00 Start of First session

12:00 End of session and learners will exit School Hall via main gate in Killburn Street.

Sanitizing of Hall will proceed after the first session.

SESSION 2: GRADES 9.5, 9.6 and 9.7

11:00 Line up outside school gate at Small Theatre in full school uniform.

Screening, sanitizing, filling in of forms and signing in.

12:00 Start of Second session

15:00 End of session and learners will exit School Hall via main gate in Killburn Street.

(Please watch the **video** to ensure smooth running of the procedures The **video** will be uploaded on **Monday 29 June 2020**).

Learners are to abide by the COVID-19 regulations at all times during the entrance, duration of tests and exit at the end of the session. Please ensure that you

- wear a mask at all times
- bring your own stationery: pen, pencil, ruler and eraser.

Furthermore,

NO eating/drinking will be allowed in the Hall during the tests and

Social distancing must be adhere to at all times.

No parent/guardian may enter the premises without appointment prior to your visit and you will also have to do screening, sanitizing and filling in of forms at the main gate.

To ensure the minimum contact with moneys, and for the protection of our staff, we would appreciate it if your child can have the correct amount (**R60-00**) available when entering the School Hall where staff members will receive this money. Where possible, please make use of the EFT system, using the following reference:

APT Gr 9 FULL NAME AND SURNAME, of your child. **Proof of payment** must be handed in when entering the School Hall.

Each learner will have to complete a form, signed by you, the parent/guardian, prior to entering the premises. Please copy the form, at the end of this letter, if possible, complete and hand it in after the screening process at the Small Theatre. The filling in of this form is **compulsory** according to the COVID-19 regulations. (Video will also address this issue). Learners who do not have a printed copy will be handed a form at the gate, **BUT PARENTS HAVE TO SIGN THIS FORM BEFORE LEARNERS ENTER THE PREMISES.**

After the tests, learners will not be allowed to enter the school area and have to leave the campus immediately, using the main gate. Please ensure that you meet your child on time.

The assessment process will be coordinated by Human Progress Management in collaboration with the school and a panel of psychologists and psychometrist.

The following information regarding the assessment can assist you to make the decision whether you want your child to participate:

- Participation is **voluntary**.
- The Differential Aptitude Test (D.A.T.) - an HSRC product- will be used.
- These tests will not be conducted if your child did a D.A.T. form S assessment during the past 6 months.
- The D.A.T. is made up with subtests assessing some of the following: verbal and non-verbal reasoning, language and computation capabilities and mechanical insight. This information,

together with the learner's interest and academic performance will help to get a clear picture of possible subject choices and career alternatives.

- The assessment will be done in a group under the supervision of a psychologist and/or a psychometrist.
- The answer sheets will be processed by a psychologist using a computer program for this purpose to create a clear and self-explaining aptitude profile. The purpose of this aptitude profile is to assist the parents, learner and school in selecting specific and appropriate subjects for the learner.
- The school will also arrange a parent evening during the third term so that feedback can be given in a group format to the parents and the learners. If the parents need more clarity or assistance regarding the aptitude profile, an appointment can be made with the psychologist.
- The assessing, processing, transfer and storing of the information of the learner will be confidential, but there are limitations.
 - Only certain staff members of the school and the psychologist or psychometrist will have access to the confidential information. Information will only be made available to other people if you give written consent.
 - All relevant persons will take the necessary steps to protect the confidentiality of the results.
 - If your child is taking prescription medication (for whatever reason), please make sure that he/she has taken it on the day of the assessment to ensure his/her optimal performance.
 - If your child is **not feeling well (emotionally or physically)** on the day of the assessment, he/she must please **stay at home**. Alternative arrangements will be made to have tests done at a later stage.

Parents/guardians, it is in everybody's interest that you discuss the above safety matters with your child. I would like to stress the importance of wearing masks, social distance and sanitizing during this very difficult time for us at school and to ensure the safety of all roleplayers. Thank you so much.

This letter will be available on the school's website and on the Grade 9 Whats.app groups. If you need more information, feel free to contact us at school.

Regards.



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M. van der Merwe
PRINCIPAL



.....
S. Meyer
GRADE 9 GRADE HEAD

HOËRSKOOL ROODEPOORT



ANNEXURE A

Learner Symptoms Risk Assessment Questionnaire

**Parents/Guardians must complete this questionnaire on a daily basis(morning's) with their children – who will submit the questionnaire at the school to gain entry into the facility.*

PLEASE COMPLETE THIS FORM BEFORE ENTERING THE PREMISES

Date	
Surname and Names	
Did the learner travel to any 'hotspot' area outside of their residential area in the last 14 days?	Y N
Did the learner have contact with anyone with a confirmed diagnosis of COVID-19 in the last 14 days?	Y N
Has the learner recently experienced symptoms such as fever, cough or difficulty breathing?	Y N
Has the learner travelled inter-provincially in the last 14 days?	Y N

MONITORING OF SYMPTOMS

NB: Please ask and record your child's answers to each of the following questions. If the learner answers "YES" to any question, DO NOT let the learner attend school before you have consulted with a medical practitioner.

SYMPTOMS	ANSWER
Do you have any shortness of breath lately?	Y / N
Do you have a sudden ' dry ' cough lately?	Y / N
Do you have a sore throat today?	Y / N
Do you have any new body aches recently?	Y / N
Have you noticed any redness of your eyes recently?	Y / N
Do you have any loss of smell lately?	Y / N
Do you have any loss of taste lately?	Y / N
Do you have any sudden unexplained nausea lately?	Y / N
Did you vomit unexpectedly recently?	Y / N
Do you have any symptoms of diarrhoea recently?	Y / N
Have you noticed any fatigue/weakness lately?	Y / N

LEARNER SURNAME: _____ LEARNER INITIALS: ____ SIGNATURE: _____

I herewith declare that: I have asked the above questions to my child, and recorded the answers truthfully.

Parent/ Guardian:
SURNAME: _____ INITIALS: _____ SIGNATURE: _____

SCHOOL EVALUATION: (to be completed by school staff)

DID THE LEARNER COMPLETE THIS WITH THEIR PARENTS: Y / N

CURRENT TIME: _____ : _____ MEASURED TEMPERATURE: _____ °C

