

Begin Your
Child's Quest
with Us

2026: APPLICATION FORM



Littlequest Academy Introduced

Welcome to Littlequest Academy, a premier pre-primary institution located in the vibrant community of Windhoek West. We are dedicated to providing a nurturing and stimulating environment where young learners can thrive academically, socially, and emotionally. Our carefully designed programs blend local and international educational standards with individualized care, ensuring that each child receives the foundation they need for lifelong success.

Academic Excellence

At Littlequest Academy, we pride ourselves on delivering a robust academic foundation through the Cambridge curriculum. This esteemed framework is enriched with a dedicated focus on phonemic awareness and core maths concepts, ensuring that children develop critical literacy and numeracy skills from an early age. Our structured yet engaging approach fosters curiosity, problem-solving abilities, and a genuine love for learning.

Individualised Attention

We believe that every child deserves to be seen and supported in their unique learning journey. That's why we maintain small class sizes of only 10 children. This allows our qualified and passionate educators to provide personalized attention, tailor activities to individual interests, and closely monitor each child's progress. In this supportive setting, children gain confidence and build the skills necessary for a smooth transition to formal schooling.

Holistic Development

Education at Littlequest Academy goes beyond academics. Our holistic approach integrates social, emotional, creative, and physical development into daily learning. Through play-based activities, group interactions, and creative expression, children learn to communicate effectively, collaborate with peers, and develop resilience. We cultivate a well-rounded personality, preparing children not just for school, but for life.

Practical Benefits for Families

Understanding the needs of modern families, we offer practical solutions to support busy parents. Our all-inclusive program features nutritious daily meals prepared on-site, ensuring that children enjoy healthy, fresh food every day. Additionally, we provide a convenient aftercare and homework service, offering a safe and productive environment for children after school hours.

Join the Littlequest Academy Family

We invite you to become part of a community where education is personalized, caring, and comprehensive. Secure your child's place for the 2026 academic year and let them embark on a rewarding journey of discovery and growth.



**Little Hands
Big Creativity!**



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		Two recent ID photos of learner	
		Employee no.	
		Year applying for	
Family code (existing parents only)			

Necessary supporting documents, completed sections and forms

This application will be processed only if all fields are legibly completed, are signed, and all supporting documents are attached.

Copy of learner's birth certificate/ID	☐	Copy of learner's latest progress report	☐
Copy of parents'/legal guardians' IDs	☐	Copy of learner's FINAL progress report once available	☐
Proof of residence/study permit, if foreign	☐	All sections completed and signed	☐
Copy of learner's vaccination records	☐		
Two recent ID photos of learner	☐		

Application details

Please indicate the programme you are applying for (select all that apply):

Little Quest Academy: Pre-Primary
(Ages 4–5 years / Ages 5–6 years)

☐
☐

Homework Supervision &
Aftercare (Grade 0–7)

☐

School Readiness Programme
(Ages 4–6 years)

☐

Learner details

Surname												
Name/s as on birth certificate/ID												
Preferred name												
ID number												
Date of birth	DD/MM/YYYY			Current age		Gender:	Male	☐	Female	☐		
Home language					Second language							
1st teaching language					2nd teaching language							
Nationality				Country of origin					Immigration date			

For office use

Interview date		Approved Date	Y ☐	N ☐	Family code	
Notes		approved			Credit reference	
		Commencement date			Siblings at the school	1 ☐
		Group/Grade				2 ☐

Learner details (continued)

Religion

Mode of transport

Person dropping learner at school (preschool to Grade 7)

Name

Relationship

Person collecting learner from school (preschool to Grade 7):

Name

Relationship

Learner's education details

Current school

Tel no.

Last grade passed

Year

Grade/s repeated

Has admission to any other school/s ever been refused?

Yes

☐

No

☐

If yes, please state the reason below:

Learner's medical details

Family doctor

Name

Tel. no.

Address

Medical aid

Name

Member no.

Option

Main member initials and surname

Main member ID number

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Has the learner received all the necessary immunisations?

Yes

☐

No

☐

If no, please state the reason below:

Learner's medical details (continued)

Has the learner suffered from any of the following illnesses? Please indicate with an X.

Asthma	☐	Chickenpox	☐	Diabetes	☐	Diphtheria	☐
Enteric fever	☐	German measles	☐	Hepatitis	☐	Malaria	☐
Measles	☐	Mumps	☐	Polio	☐	Rheumatic fever	☐
Scarlet fever	☐	Tick bite fever	☐	Typhoid fever	☐	Whooping cough	☐

Does the learner suffer from any allergies?

Yes ☐ No ☐

If yes, please provide details below:

Does the learner have any special medical needs?

Yes ☐ No ☐

If yes, please provide details below:

Does/Has the learner suffered from any other illnesses/disabilities?

Yes ☐ No ☐

If yes, please provide details below:

Is the learner receiving medical treatment for any condition?

Yes ☐ No ☐

If yes, please provide details below:

Is/Has the learner suffered from or received treatment for any psychological/emotional upset?

Yes ☐ No ☐

If yes, please provide details below:

Has the learner had any operations?

If yes, please provide details below:

Please specify any other relevant medical details:

Consent to act in a medical emergency

In the event of a medical emergency involving my child, I acknowledge that the school will contact me immediately using the provided emergency details for guidance, and should I be unreachable, I irrevocably consent to the school administering basic first aid or arranging emergency ambulance transport to the nearest medical facility, with all associated decisions, costs, and liabilities being my sole responsibility, and I fully release the school, its staff, and management from any liability for illness, injury, or medical conditions occurring during school activities, including school hours, aftercare, or school-sanctioned events.

I, _____, being the parent/legal guardian of _____, hereby agree that a medical practitioner may provide emergency treatment as may be necessary.

Signature of parent/legal guardian

Date

Emergency contact details (not parental)

Full names and surname					
Tel. H		Tel. W		Cell	
Relation to learner					
Email address					

Details of person responsible for account

Surname												
Full names as on ID												
ID number												
Designation	Mr	☐	Mrs	☐	Ms	☐	Miss	☐	Dr	☐		
	Rev.	☐	Prof.	☐	Other							
Relationship							Marital status					
Occupation							Employer					

Residential address	Work address	Postal address			
Tel. H		Tel. W		Cell	
Email address					

Parental status	Learner living with parent/s	☐	Learner's legal guardian	☐
	Access rights to learner	☐	Access rights in emergency only	☐

Pick-Up Authorization

This form should be completed by the parent/guardian to grant permission for someone else to collect their child from the school. Letters of consent will be filed at reception for the information of all staff.

- Permission may be granted on a once-off or semi-permanent basis.
- Parents should inform the teacher and receptionist each time that another person will be collecting the child/learner.
- The person identified below should bring along proof of identification to be verified at reception.

Name of person granted permission

Relationship to learner:

Family member Family friend Transport service Other

Details of Parent(s)/Guadian(s) (1)

Surname												
Full names as on ID												
ID number												
Designation	Mr	☐	Mrs	☐	Ms	☐	Miss	☐	Dr	☐		
	Rev.	☐	Prof.	☐	Other							
Relationship							Marital status					
Occupation							Employer					
Residential address				Work address				Postal address				
Tel. H				Tel. W				Cell				
Email address												

Details of Parent(s)/Guadian(2)

(2)

Surname												
Full names as on ID												
ID number												
Designation	Mr	☐	Mrs	☐	Ms	☐	Miss	☐	Dr	☐		
	Rev.	☐	Prof.	☐	Other							
Relationship							Marital status					
Occupation							Employer					
Residential address				Work address				Postal address				
Tel. H				Tel. W				Cell				
Email address												

Signature of parents/legal guardians and account holder

We, the undersigned parent(s)/legal guardian(s), hereby certify that all information provided in this application for admission is true and complete. We understand that enrolment is conditional upon the signing of a Learner Admission Agreement, which outlines the full terms, conditions, and requirements for admission.

We confirm that we have read and accept the policies and rules of Littlequest Academy, as made available on the school's official website and as may be updated from time to time. We agree to abide by these terms upon acceptance of a placement offer for our child.

We further consent to the processing of personal information provided in this application for the purposes of evaluation, administration, and communication related to enrolment at Littlequest Academy, in accordance with applicable data protection regulations.

NB: The signatures of the account holder and both parents and/or legal guardians are required where applicable.

Signature of account holder

Date

Signature of parent/legal guardian

Date





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