EMIS NUMBER					



# SNAP SURVEY Special Schools

## 2014

The South African Schools Act No. 84 of 1996 (section 59 [1] and [2]) states that: Every school must supply such information about the school as is reasonably required by the Head of Education, and any person, who without just cause, fails to comply, shall be guilty of an offence.

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## ANNUAL SNAP SURVEY FOR PUBLIC AND INDEPENDENT SPECIAL SCHOOLS

#### **ALL INFORMATION TO BE PROVIDED AS AT 04 MARCH 2014**

The Annual Snap Survey for Special Schools is the most important source of information regarding the situation at your school. The information collected will contribute to the Education Management Information System (EMIS) of the province and will be of assistance in the management, administration and governance of schools, including the supply of school resources to schools.

DECLARATION
I,, principal of
I certify that the information provided on this form is to the best of my knowledge and belief correct and complete.
Principal:
Surname and initials Signature Date
I certify that the information provided on this form is to the best of my knowledge and belief correct and complete.  Education Manager:
Surname and initials Signature Date
Designation
N.B: Education Manager means an official who functions at the level of administration between the institutions and the province. This manager may function at regional, district, circuit or ward level.

\*NEMIS005B SNE SNAP14-1\*

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**PROVINCE** CODE (Please place X in the correct province)

Code		Province Name	
1	=	Western Cape	
2	=	Eastern Cape	
3	=	Northern Cape	
4	=	Free State	
5	=	KwaZulu-Natal	
6	=	North West	
7	=	Gauteng	
8	=	Mpumalanga	
9	=	Limpopo	

1	GENERAL INFO	ORMATION ocks where particulars have	cha	nged	d, ar	e inc	orre	ct or	· are	mi:	ssin	g.)								
1.1	School name																			
1.2	Province code	(Codes on the cover page	je)																	
1.3	School level	([1=Pre-Primary; 2=Primary;	<b>3</b> =Se	econo	dary;	<b>4</b> =Int	terme	ediat	e; <b>5</b> :	=Cor	mbin	ed]								
1.4	School Funding Type	[1=Public; 2=Independent]																		
1.5	Ownership of land	[1=State; 2=Church; 3=Mine	<b>4</b> =Fa	arm; <b>5</b>	=Ho	spital	; <b>6</b> =T	rust;	7=C	omp	any;	<b>8</b> =P	rivat	e in	divid	ual;	<b>9</b> =Fa	acto	ry;	
		10=Other: specify																		
1.6	Educational region																			
1.7	Educational district																			
1.8	Circuit (If applicable)																			
1.9	Email																			

EMIS NUMBER
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disorder that initially manifests in childhood and is characterized by hyperactivity, impulsivity and/or affected by ADHD manifest all three behavioral categories. Can lead to difficulty in academic, tioning. May be associated with other neurological, significant behavioral, and/or developmental/
s impact the normal development of the brain in the areas of social interaction and communication we difficulties in verbal and non-verbal communication, social interactions, and leisure or play immunicate with others and relate to the outside world A medical practitioner, preferably a sychiatrist) must diagnose learners.
onduct disorder usually have little concern for others and repeatedly violate the basic rights of iety. Children and adolescents act out their feelings or impulses in destructive ways. Offences ver time. Such offences may include lying, theft, aggression, truancy, the setting of fires, and
ess can be temporary or permanent. Damage to any portion of the eye, the optic nerve, or the ele for vision can lead to blindness. <3/60 in the better eye, after maximum correction.
group of chronic conditions affecting body movements and muscle coordination. Caused by ecific areas of the brain, traumatic, infectious, or developmental. Major types include spastic, ic and they can be quadriplegic, diplegic or hemiplegic. A medical practitioner must make the
a <u>severe</u> hearing impairment and who depend on specialized educational support. Hearing must uditory test and the hearing loss should be more than 61 dB at 0,5; 1; 2 and 4KHz in the better ear
comitant hearing and visual impairments, the combination of which causes such severe developmental and educational needs different from children with deafness or children with
dden over activity of brain cells and characterized by repetitive attacks of a diverse nature.  occur when there is abnormal electrical discharge in the brain. This may be triggered by chemical bnormality. Seizures differ in cause, nature, severity, management and long term effect.
a moderate hearing impairment and who are in need of additional specialized support. Hearing an auditory test and the decibel loss must be more than 31dB for persons under the age of 15 proons 15 years and older
al disability have significantly lower than average intellectual ability and deficits in social and s, limitations in such areas as communication, social, daily living or movement skills. Learners with al disability are academically functioning on level below 75% of that of their peers. (See moderate ility below) IQ tests are no longer considered appropriate.
profound intellectual disability are academically functioning on a level below 50% of that of their

Author effects to a chronic disorder that initially manifests in childhood and is characterized by hyperactivity (ADH-D):  Autistic spectrum disorders:  Behavioral / conduct disorders:		
skills. Children typically have difficulties in verbal and non-verbal communication, social interactions, and leiserus or play activities, find it hard to communicate with others and relate to the outside word! A medical practitioner, preferably a specialist (pediatrician or psychiatrist) must diagnose learners.  Behavioral / conduct disorder (including severe behavior) and the same and the rules of society. Children and adolescents act out their feelings or impulses in destructive ways. Offences Severe behavior who more serious over time. Such offences may include lying, theft, aggression, truency, the setting of fires, and vandalism.  Loss of useful sight. Blindness can be temporary or permanent. Damage to any portion of the eye, the optic nerve, or the area of the brain responsible for vision can lead to blindness. 4360 in the better eye, after maximum corrections area of the brain responsible for vision can lead to blindness. 4360 in the better eye, after maximum corrections disposed to one or more specific areas of the brain, traumatic, infectious, or developmental. Major types include spastic, dystonic, athetoid and ataxic and they can be quadriplegic, diplegic or hemiplegic. A medical practitioner must make the disanosis.  Learners who experience a <u>severe</u> hearing impairment and who depend on specialized educational support. Hearing must be assessed through an auditory test and the hearing loss should be more than 61 dB at 0,5; 1; 2 and 4KHz in the better ear Deaf-blindness.  Epilepsy:  Disorder caused by the sudden over activity of brain cells and characterized by repetitive attacks of a diverse nature. Seizures (or convulsions) occur when there is abnormal electrical discharge in the brain. This may be triggered by chemical intellectual disability.  Hard of hearing:  Mild to moderate intellectual disability are academically functioning on level below 75% of that of their peers. (See moderate to severe intellectual disability are academically functioning on level below 75% of that of their peers, of me	disorder with/without hyperactivity	inattention. Not all of those affected by ADHD manifest all three behavioral categories. Can lead to difficulty in academic, emotional, and social functioning. May be associated with other neurological, significant behavioral, and/or developmental/
discrete phaty of the service of the		skills. Children typically have difficulties in verbal and non-verbal communication, social interactions, and leisure or play activities, find it hard to communicate with others and relate to the outside world A medical practitioner, preferably a
area of the brain responsible for vision can lead to blindness. <a href="Action-Reventage-18">Action of the better eye, after maximum correction.</a> Cerebral palsy describes a group of rhorino conditions affecting body movements and muscle coordination. Caused by damage to one or more specific areas of the brain, traumatic, intectious, or developmental. Major types include spastic, dystonic, athetoid and ataxic and they can be quadriplegic, diplegic or hemiplegic. A medical practitioner must make the diannosis.  Learners who experience a severe hearing impairment and who depend on specialized educational support. Hearing must be assessed through an auditory test and the hearing loss should be more than 61 dB at 0,5; 1; 2 and 4KHz in the better ear communication and other developmental and educational needs different from children with deafness or children with blindness.  Epilepsy:  Epilepsy:  Disorder caused by the sudden over activity of brain cells and characterized by repetitive attacks of a diverse nature. Seizures (or convulsions) occur when there is abnormal electrical discharge in the brain may be triggered by chemical imbalance or a structural abnormality. Seizures differ in cause, nature, severity, management and long term effect.  Learners who experience a moderate hearing impairment and who are in need of additions adjusted to additive the appropriate of the presons 15 years and older intellectual disability:  All the severe to profound intellectual disability are activity tower than average intellectual ability and deficition in social and adaptive functioning, that is, limitations in such areas as communication, social, daily living or movement skills. Learners with in the object 75% of that of their peers. See moderate intellectual disability are cademically functioning on a level below 50% of that of their peers. Some identifiable causes include. hereditary factors; chromosome abnormalities; brain damage after brite due to illness or accident; mainterior or dereprivation in early childhood.  Pa	disorder (including Severe behavioral	others and the rules of society. Children and adolescents act out their feelings or impulses in destructive ways. Offences often grow more serious over time. Such offences may include lying, theft, aggression, truancy, the setting of fires, and
damage to one or more specific areas of the brain, traumatic, infectious, or developmental. Major types include spastic, dystonic, athetoid and taxic and they can be quadriplegic, diplegic or hemiplegic. A medical practitioner must make the diannosis.  Deafness:  Learners who experience a severe hearing impairment and who depend on specialized educational support. Hearing must be assessed through an auditory test and the hearing loss should be more than 61 dB at 0.5; 1; 2 and 4KHz in the better ear beaf-blindness means concomitant hearing and visual impairments, the combination with clauses such severe communication and other developmental and educational needs different from children with deafness or children with blindness.  Epilepsy:  Disorder caused by the sudden over activity of brain cells and characterized by repetitive attacks of a diverse nature. Setzures (or convulsions) occur when there is abnormal electrical discharge in the brain. This way be triggered by chemical imbalance or a structural abnormality. Seizures differ in cause, nature, severity, management and long term effect. Learners who experience a moderate hearing impairment and who are in need of additional specialized support. Hearing must be assessed through an auditory test and the decibel loss must be more than 31dB for persons under the age of 15 and more than 41dB for persons 15 years and older  Learners with an intellectual disability have significantly lower than average intellectual ability and deficits in social and adaptive functioning, that is, limitations in such areas as communication, social, daily living or movement skills. Learners with mild to moderate intellectual disability per academically functioning on level below 750 of that of their peers. (See moderate osevere intellectual disability per academically functioning on level below 750 of that of their peers. (See moderate to severe intellectual disability per academically functioning on level below 750 of that of their peers. Some identificable causes include: hereditar	Blindness:	
Deafness:  Learners who experience a <u>severe</u> hearing impairment and who depend on specialized eductational support. Hearing must be assessed through an auditory test and the hearing loss should be more than 61 db a1 0,5; 1; 2 and 4KHz in the better ear Deaf-blindness:  Deaf-blindness means concomitant hearing and visual impairments, the combination of which causes such severe communication and other developmental and educational needs different from children with deafness or children with blindness.  Disorder caused by the sudden over activity of brain cells and characterized by repetitive attacks of a diverse nature. Seizures (or convulsions) occur when there is abnormal electrical discharge in the brain. This may be triggered by chemical imbalance or a structural abnormality. Seizures differ in cause, nature, severity, management and long term effect.  Hard of hearing:  Learners who experience a moderate hearing impairment and who are in need of additional specialized support. Hearing must be assessed through an auditory test and the decibel loss must be more than 31dB for persons under the age of 15 and more than 41dB for persons 15 years and older  Mild to moderate intellectual disability:  Learners with an intellectual disability have significantly lower than average intellectual ability and deficits in social and intellectual disability and provide the content of the server intellectual disability are academically functioning on level below 75% of that of their peers. (See moderate intellectual disability:  Learners with in severe to profound intellectual disability are academically functioning on a level below 50% of that of their peers. Some identifiable causes include: hereditary factors; chromosome abnormalities; brain damage before or at birth; brain damage after birth due to illness or accident; maintrition or other deprivation in early childhood.  Learners with in severe to profound intellectual disability are academically functioning on a level below 50% of that of their peers. Some identifiable	Cerebral palsy:	damage to one or more specific areas of the brain, traumatic, infectious, or developmental. Major types include spastic, dystonic, athetoid and ataxic and they can be quadriplegic, diplegic or hemiplegic. A medical practitioner must make the
communication and other developmental and educational needs different from children with blindness.  Epilepsy:  Disorder caused by the sudden over activity of brain cells and characterized by repetitive attacks of a diverse nature. Sezures (or convulsions) occur when there is abnormal electrical discharge in the brain. This may be triggered by chemical imbalance or a structural abnormality. Seizures differ in cause, nature, severity, management and long term effect.  Learners who experience a moderate hearing impairment and who are in need of additional specialized support. Hearing must be assessed through an auditory test and the decibel loss must be more than 31dB for persons under the age of 15 and more than 41dB for persons 15 years and older  Learners with an intellectual disability: mittellectual disability are adametically functioning on level before 75% of that of their peers. (See moderate intellectual disability in the disability are academically functioning on level below 55% of that of their peers. Some identifiable causes include: hereditary factors; chromosome abnoralities; brain damage before or at birth; brain damage after birth due to illness or accident; malnutrition or other deprivation in early childhood.  Partial sightedness Low Vision:  Learners with a significant physical disability are academically functioning on a level below 50% of that of their persons. Some identifiable causes include: hereditary factors; chromosome abnoralities; brain damage before or at birth; brain damage after birth due to illness or accident; malnutrition or other deprivation in early childhood.  Low vision is impairment of visual functioning even after treatment, for example an operation and/or standard refractive orrection (has been given plasses or lenses) and has a visual acuity of less than 6/18 to light perception, or a visual field of less than 10° from the point of fixation (i.e. 20° across) but who uses, or is potentially able to use, vision for the planning disability:  Expectic learning disability:  E	Deafness:	Learners who experience a severe hearing impairment and who depend on specialized educational support. Hearing must
Seizures (or convulsions) occur when there is abnormal electrical discharge in the brain. This may be triggered by chemical imbalance or a structural abnormality. Seizures differ in cause, nature, severity, management and long term effect.  Hard of hearing:  Learners who experience a moderate hearing impairment and who are in need of additional specialized support. Hearing must be assessed through an auditory test and the decibel loss must be more than 31dB for persons under the age of 15 and more than 41dB for persons 15 years and older  Mild to moderate intellectual disability have significantly lower than average intellectual ability and deficits in social and adaptive functioning, that is, limitations in such areas as communication, social, daily living or movement skills. Learners with mild to moderate intellectual disability have significantly lower than average intellectual ability and deficits in social and adaptive functioning, that is, limitations in such areas as communication, social, daily living or movement skills. Learners with mild to moderate intellectual disability have significantly lower than average intellectual ability and deficits in social and adaptive functioning, that is, limitations in such areas as communication, social, daily living or movement skills. Learners with a disability severe to profound intellectual disability personal disability functioning on a level below 50% of that of their peers. Some identifiable causes include: hereditary factors; chromosome abnormalities; brain damage before or at birth; brain damage after birth due to illness or accident, malnutrition or other deprivation in early childhood.  Partial sightedness /  Low vision:  Learners with a significant physical disability and attentioning on the personal profess or a cidentification (i.e. 20° across) but who uses, or is potentially able to use, vision for the planning and/or execution of a task  Physical disability:  Specific learning disability is a discorder in one or more of the central nervous system proc	Deaf-blindness:	communication and other developmental and educational needs different from children with deafness or children with
Learners with one and intellectual disability:  Learners with an intellectual disability below IQ test and note to a cademically functioning on level below 75% of that of their peers. (See moderate intellectual disability have significantly lower than average intellectual ability and deficits in social and adaptive functioning, that is, limitations in such areas as communication, social, daily living or movement skills. Learners with mild to moderate intellectual disability have significantly lower than average intellectual ability and deficits in social and adaptive functioning, that is, limitations in such areas as communication, social, daily living or movement skills. Learners with mild to moderate intellectual disability are academically functioning on level below 75% of that of their peers. (See moderate to severe intellectual disability below) IQ tests are no longer considered appropriate or severe intellectual disability.  Learners with to severe to profound intellectual disability are academically functioning on a level below 50% of that of their peers. Some identifiable causes include: hereditary factors; chromosome abnormalities; brain damage before or at birth; brain damage after birth due to illness or accident; malnutrition or other deprivation in early childhood.  Low vision:  Low vision is impairment of visual functioning even after treatment, for example an operation and/or standard refractive correction (has been given glasses or lenses) and has a visual acuity of less than 6/18 to light perception, or a visual field of less than 10° from the point of fixation (i.e. 20° across) but who uses, or is potentially able to use, vision for the planning and/or execution of a task  Physical disability:  Learners with a significant physical disability that substantially limits one or more basic physical activities, such as walking, climbing stairs, reaching, lifting, or carrying.  A specific learning disability is a disorder in one or more of the central nervous system processes involved in perceiving,	Epilepsy:	Seizures (or convulsions) occur when there is abnormal electrical discharge in the brain. This may be triggered by chemical
intellectual disability: adaptive functioning, that is, limitations in such areas as communication, social, daily living or movement skills. Learners with mild to moderate intellectual disability are academically functioning on level below 75% of that of their peers. (See moderate to severe intellectual disability below) IQ tests are no longer considered appropriate.  Severe to profound intellectual disability are academically functioning on a level below 50% of that of their peers. Some identifiable causes include: hereditary factors; chromosome abnormalities; brain damage before or at birth; brain damage after birth due to illness or accident; malnutrition or other deprivation in early childhood.  Partial sightedness / Low vision is impairment of visual functioning even after treatment, for example an operation and/or standard refractive correction (has been given glasses or lenses) and has a visual acuity of less than 6/18 to light perception, or a visual field of less than 10° from the point of fixation (i.e. 20° across) but who uses, or is potentially able to use, vision for the planning and/or execution of a task  Physical disability:  Specific learning disability is a disorder in one or more of the central nervous system processes involved in perceiving, understanding and/or using concepts through verbal (spoken or written) language or nonverbal means. This disorder manifests itself with a deficit in one or more of the following areas: attention, reasoning, processing, memory, communication, reading, writing, spelling, calculation, coordination, social competence and emotional maturity.  Psychiatric disorder:  These disorders must be diagnosed by a psychiatrist or psychologist and could include: Personality disorders: Mental illnesses that share several unique qualities. While many disorders vacillate in terms of symptom presence and intensity, personality disorders typically remain relatively constant.  Adjustment disorders: The primary feature is abnormal or inappropriate anxiety such as Acute Stress D	Hard of hearing:	Learners who experience a moderate hearing impairment and who are in need of additional specialized support. Hearing must be assessed through an auditory test and the decibel loss must be more than 31dB for persons under the age of 15
intellectual disability:  peers. Some identifiable causes include: hereditary factors; chromosome abnormalities; brain damage before or at birth; brain damage after birth due to illness or accident; malnutrition or other deprivation in early childhood.  Low vision is impairment of visual functioning even after treatment, for example an operation and/or standard refractive correction (has been given glasses or lenses) and has a visual acuity of less than 6/18 to light perception, or a visual field of less than 10° from the point of fixation (i.e. 20° across) but who uses, or is potentially able to use, vision for the planning and/or execution of a task  Physical disability:  Learners with a significant physical disability that substantially limits one or more basic physical activities, such as walking, climbing stairs, reaching, lifting, or carrying.  Specific learning disability:  A specific learning disability is a disorder in one or more of the central nervous system processes involved in perceiving, understanding and/or using concepts through verbal (spoken or written) language or nonverbal means. This disorder manifests itself with a deficit in one or more of the following areas: attention, reasoning, processing, memory, communication, reading, writing, spelling, calculation, coordination, social competence and emotional maturity.  Psychiatric disorder:  These disorders must be diagnosed by a psychiatrist or psychologist and could include: Personality disorders: Mental illnesses that share several unique qualities. While many disorders vacillate in terms of symptom presence and intensity, personality disorders typically remain relatively constant.  Adjustment disorders: Disorders in this category relate to a significantly more difficult adjustment to a life situation than would normally be expected considering the circumstances.  Mood disorders: The primary feature is abnormal or inappropriate anxiety such as Acute Stress Disorder, etc. Psychotic disorders: The major symptom of these disorders is psychosis,		adaptive functioning, that is, limitations in such areas as communication, social, daily living or movement skills. Learners with mild to moderate intellectual disability are academically functioning on level below 75% of that of their peers. (See moderate
correction (has been given glasses or lenses) and has a visual acuity of less than 6/18 to light perception, or a visual field of less than 10° from the point of fixation (i.e. 20° across) but who uses, or is potentially able to use, vision for the planning and/or execution of a task  Physical disability:  Learners with a significant physical disability that substantially limits one or more basic physical activities, such as walking, climbing stairs, reaching, lifting, or carrying.  Specific learning disability:  A specific learning disability is a disorder in one or more of the central nervous system processes involved in perceiving, understanding and/or using concepts through verbal (spoken or written) language or nonverbal means. This disorder manifests itself with a deficit in one or more of the following areas: attention, reasoning, processing, memory, communication, reading, writing, spelling, calculation, coordination, social competence and emotional maturity.  Psychiatric disorder:  These disorders must be diagnosed by a psychiatrist or psychologist and could include: Personality disorders: Mental illnesses that share several unique qualities. While many disorders vacillate in terms of symptom presence and intensity, personality disorders typically remain relatively constant.  Adjustment disorders: Disorders in this category relate to a significantly more difficult adjustment to a life situation than would normally be expected considering the circumstances.  Mood disorders: The primary feature is abnormal or inappropriate anxiety such as Acute Stress Disorder, Obsessive-Compulsive disorders: The primary feature is abnormal or inappropriate anxiety such as Acute Stress Disorder, Obsessive-Compulsive disorders: The major symptom of these disorders is psychosis, or delusions and hallucinations. Delusions are false beliefs that significantly hinder a person's ability to function, e.g. schizophrenia		peers. Some identifiable causes include: hereditary factors; chromosome abnormalities; brain damage before or at birth;
Climbing stairs, reaching, lifting, or carrying.  Specific learning disability:  A specific learning disability is a disorder in one or more of the central nervous system processes involved in perceiving, understanding and/or using concepts through verbal (spoken or written) language or nonverbal means. This disorder manifests itself with a deficit in one or more of the following areas: attention, reasoning, processing, memory, communication, reading, writing, spelling, calculation, coordination, social competence and emotional maturity.  Psychiatric disorder:  These disorders must be diagnosed by a psychiatrist or psychologist and could include:  Personality disorders: Mental illnesses that share several unique qualities. While many disorders vacillate in terms of symptom presence and intensity, personality disorders typically remain relatively constant.  Adjustment disorders: Disorders in this category relate to a significantly more difficult adjustment to a life situation than would normally be expected considering the circumstances.  Mood disorders: These include those disorders where the primary symptom is a disturbance in mood. In other words, inappropriate, exaggerated, or limited range of feelings, e.g. bipolar disorder, major depression disorder, etc.  Anxiety disorders: The primary feature is abnormal or inappropriate anxiety such as Acute Stress Disorder, Obsessive-Compulsive disorders: The major symptom of these disorders is psychosis, or delusions and hallucinations. Delusions are false beliefs that significantly hinder a person's ability to function, e.g. schizophrenia		correction (has been given glasses or lenses) and has a visual acuity of less than 6/18 to light perception, or a visual field of less than 10° from the point of fixation (i.e. 20° across) but who uses, or is potentially able to use, vision for the planning
understanding and/or using concepts through verbal (spoken or written) language or nonverbal means. This disorder manifests itself with a deficit in one or more of the following areas: attention, reasoning, processing, memory, communication, reading, writing, spelling, calculation, coordination, social competence and emotional maturity.  Psychiatric disorder:  These disorders must be diagnosed by a psychiatrist or psychologist and could include: Personality disorders: Mental illnesses that share several unique qualities. While many disorders vacillate in terms of symptom presence and intensity, personality disorders typically remain relatively constant.  Adjustment disorders: Disorders in this category relate to a significantly more difficult adjustment to a life situation than would normally be expected considering the circumstances.  Mood disorders: These include those disorders where the primary symptom is a disturbance in mood. In other words, inappropriate, exaggerated, or limited range of feelings, e.g. bipolar disorder, major depression disorder, etc. Anxiety disorders: The primary feature is abnormal or inappropriate anxiety such as Acute Stress Disorder, Obsessive-Compulsive disorders: The major symptom of these disorders is psychosis, or delusions and hallucinations. Delusions are false beliefs that significantly hinder a person's ability to function, e.g. schizophrenia	Physical disability:	
Personality disorders: Mental illnesses that share several unique qualities. While many disorders vacillate in terms of symptom presence and intensity, personality disorders typically remain relatively constant.  Adjustment disorders: Disorders in this category relate to a significantly more difficult adjustment to a life situation than would normally be expected considering the circumstances.  Mood disorders: These include those disorders where the primary symptom is a disturbance in mood. In other words, inappropriate, exaggerated, or limited range of feelings, e.g. bipolar disorder, major depression disorder, etc.  Anxiety disorders: The primary feature is abnormal or inappropriate anxiety such as Acute Stress Disorder, Obsessive-Compulsive disorders; Phobias, Posttraumatic Stress Disorder, etc.  Psychotic disorders: The major symptom of these disorders is psychosis, or delusions and hallucinations. Delusions are false beliefs that significantly hinder a person's ability to function, e.g. schizophrenia		understanding and/or using concepts through verbal (spoken or written) language or nonverbal means. This disorder manifests itself with a deficit in one or more of the following areas: attention, reasoning, processing, memory, communication,
	Psychiatric disorder:	Personality disorders: Mental illnesses that share several unique qualities. While many disorders vacillate in terms of symptom presence and intensity, personality disorders typically remain relatively constant.  Adjustment disorders: Disorders in this category relate to a significantly more difficult adjustment to a life situation than would normally be expected considering the circumstances.  Mood disorders: These include those disorders where the primary symptom is a disturbance in mood. In other words, inappropriate, exaggerated, or limited range of feelings, e.g. bipolar disorder, major depression disorder, etc.  Anxiety disorders: The primary feature is abnormal or inappropriate anxiety such as Acute Stress Disorder, Obsessive-Compulsive disorder, Phobias, Posttraumatic Stress Disorder, etc.  Psychotic disorders: The major symptom of these disorders is psychosis, or delusions and hallucinations. Delusions are

LEARNER INFORMAT

if there are learners indicated in the "Other" columns of the tables.

EMIS NUMBER					

2.1.1		al nu I ger			LE	ARN	ERS	enro	olled	at t	he s	cho	ol on	the	sur	vey	date	acc	ordi	ng t	to PI	RIMA	RY d	isab	ility	to le	arni	ng
Gender	Attortion	Deficit	Disorder	Διπistic	Spectrum	Disorder	Behavioural	disorder/ Conduct	Disorder		Blindness			Cerebral	ćen -		Doafnoss			Deaf.	Blindness			Epilepsy		Hard of	Hearing	
Male																			T									
Female																												
Total																												
Gender	Mild to Moderate	Intellectual	disability	Severe to	profound intellectual	disability		Partial Sighted/ Low vision			Physical disability			Specific learning disability		,	Psychiatric disorder		Oth	er			То	tal				
Male																												
Female																												
Total																												

NOTE: If a particular grade is NOT offered at your school, place an X in the NOT APPLICABLE area for that grade. Do not enter any learner numbers or total for a grade not offered at your school.

If your school does offer a particular grade, but there are no learners for either the Male or Female gender, then enter 0 for the relevant gender. e.g. If your school has only Female learners in Grade 5 then enter 0 under the Male row in the Grade 5 column and the correct number of Female learners in the Female row for Grade 5. Include the total.

2.1.2	Т	ota	ıl n	un	nbe	r of	LE	AR	NEI	RS	enroll	ed	at t	he	sc	ho	ol d	on 1	the	sı	ırv	ey (	dat	e a	CC	ord	ing	to	gra	de	an	d g	jen	der				
Grades		Pre- rad R		Gı	rade R		(	Gra 1	de	•	Grade 2	ď	Grac 3	de	G	rad 4	е		ade 5		Gra		G	Frac 7	de	G	rade 8		Gra 9			rad 10	le		ade 1		Grad	
Not Applicable																																						
Male																																						
Female																																						
Total																																						
Grades	s	pec	ial		vo	Pre cati		1		Oth	er																									T	ОТА	L
Not Applicable																																						
Male																																						
Female																																						
Total																																						

**Pre Grade** R = A programme of learning provided by school or other education institution in a grade before Grade R.

Grade R = The reception year for a learner in a school or an ECD centre, i.e. the grade immediately before Grade 1.

**SNE** = Special Needs Education. Specialized education provided in special or ordinary schools that addresses barriers to learning and development experienced by learners with specific or severe learning difficulties or disabilities

Post-Matric = Instructional programme offered by a school to learners who have completed Grade 12

Not Applicable = the Grade is not offered at your school

**Other** = Learners not grouped in any of the grades provided

EMIS NUMBER									
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2.2	Number Learners assesse	s can be	e classi	arners a fied as l	ccordir having	ng to ye a disab	ar of bi ility if m	rth, gen nedical	der and evidend	l <i>PRIM)</i> ce has t	4 <i>RY</i> Dis been pr	sability. ovided	by pare	ents or i	f the Di	strict-b	ased Si	upport Te	am has	
Year of Birth	Gender	Attention Deficit Disorder	Autistic Spectrum Disorder	Behavioural disorder/ Conduct Disorder	Blindness	Cerebral Palsy	Deafness	Deaf-Blindness	Epilepsy	Hard of Hearing	Mild to Moderate Intellectual disability	Severe to profound intellectual disability	Partial Sighted/ Low vision	Physical disability	Specific learning disability	Psychiatric disorder	Other	Total		Age in years
≥2011	Male																			≤3
	Female																			
2010	Male																			4
	Female																			
2009	Male																			5
	Female																			
2008	Male																			6
	Female																			
2007	Male																			7
	Female																			
2006	Male																			8
	Female																			
2005	Male																			9
	Female																			
2004	Male																			10
	Female																			
2003	Male																			11
	Female																			46
2002	Male																			12
	Female																			

ENTIO NILIMADED					
EMIS NUMBER					

		d the le	arner. (	Continu	naving a uation)	a disabi	lity if m	edical	evidenc	e has l	peen pr	sability. ovided	by pare	nts or i	f the Di	strict-b	ased Si	upport Tea	am has	
Year of Birth	Gender	Attention Deficit Disorder	Autistic Spectrum Disorder	Behavioural disorder/ Conduct Disorder	Blindness	Cerebral Palsy	Deafness	Deaf-Blindness	Epilepsy	Hard of Hearing	Mild to Moderate Intellectual disability	Severe to profound intellectual disability	Partial Sighted/ Low vision	Physical disability	Specific learning disability	Psychiatric disorder	Other	Total		Age in years
2001	Male																			13
	Female																			
2000	Male Female																			14
	Male																			
1999 F	Female																			15
1998	Male																			16
	Female Male																			
1997	Female																			17
1996	Male																			18
	Female																			10
1995	Male Female																			19
	Male																			
1994 F	Female																			20
1993	Male																			21
	Female																			
1992	Male Female																			22

EMIS NUMBER					

2.2	Number Learners assesse	s can b	e class	ified as	having	j a disa								ents or	if the D	istrict-k	pased S	upport Te	am has	
Year of Birth	Gender	Attention Deficit Disorder	Autistic Spectrum Disorder	Behavioural disorder/ Conduct Disorder	Blindness	Cerebral Palsy	Deafness	Deaf-Blindness	Epilepsy	Hard of Hearing	Mild to Moderate Intellectual disability	Severe to profound intellectual disability	Partial Sighted/ Low vision	Physical disability	Specific learning disability	Psychiatric disorder	Other	Total		Age in years
1991	Male																			23
1991	Female																			23
1990	Male																			24
1990	Female																			24
≤1989	Male																			≥25
21303	Female																			225
Total	Male																			
iotai	Female																			

**Other** = Learners not grouped in any of the disability provided

EMIS NUMBER					
LIVIIO NOIVIDEIX					

2.3	Number of le	earners	acc	ordii	ng to	gra	ade,	gend	ler a	nd y	ear	of bi	irth (l	Lea	arnei	s m	ay I	NOT be	doub	le-co	oun	ted)														
Year of Birth	Gender	Pre Grade	e R	Gr	ade F	₹	Gra	ide 1	G	Grade	2	Gr	ade 3	3	Grad	de 4	G	irade 5	Grad	e 6	G	rade 7		Grad	e 8	Gr	ade 9	)	Gra	de 10	Gr	rade 1	1	Gra	ide 12	Age in years
≥2011	Male Female																																		$\blacksquare$	- ≤3
	Male					T								1														ı			T				$\top$	
2010	Female													ı																						4
2009	Male																																			5
2009	Female																																			3
2008	Male																																			6
	Female		Ш											4									_					4			<u> </u>				_	
2007	Male								-					-			-						$\perp$					-			<u> </u>				+	7
	Female					4						Н		4			-		$\vdash$									4			╨				+	
2006	Male Female					+			-					1			-						+					ł		+	<del>                                     </del>				+	8
	Male					+			╁					+			╂						╁					+			╁				+	
2005	Female					1			+					ı														1							+	9
	Male					+								1									+					t			一				+	
2004	Female					1								T														ı								10
2003	Male																											1			П					44
2003	Female																																			11
2002	Male																																			12
	Female													_														_			$oldsymbol{\perp}$					
2001	Male					_	_	-	_														_					-			<u> </u>				$\perp$	13
	Female					4	_	_	+					_			_		$\vdash$				+					_	_		igspace		4		$\perp$	
2000	Male					-		$\perp$	+					-			-						╀					-		-	₽	$\vdash \vdash$	-		+	14
	Female																														Щ					

EMIC NI IMPED					
EMIS MOMBER					

Year of Birth	Gender	Gı	Pre ade R		Gra	de R	G	Grade	1	Gra	de 2	Grad	e 3	G	rade	4	Gra	de 5	G	rade 6	5	Grad	e 7	Gr	ade 8	3	Grad	de 9	Gr	ade 10	G	Grade	11	Gra	ade 12	Age in years
1999	Male																																			15
1333	Female																																			15
1998	Male																																			16
1990	Female																																			10
1997	Male																																			17
1997	Female																																			17
1996	Male																																			18
1990	Female																																			
1995	Male																																			19
1995	Female																																			19
1994	Male																																			20
1334	Female																																			
1993	Male																																			21
1333	Female																																			
1992	Male																																			22
1002	Female																																			
1991	Male																																			23
1001	Female																																			
1990	Male																																			24
.000	Female																																			
≤1989	Male																																			≥25
	Female																																			
Total	Male																																			
Ī	Female			Ī																																

EMIS NUMBER					

2.3	Number of le	earne	rs ac	cordi	ng to	grad	e, ge	nder	and y	ear c	of birt	h (L	earne	ers n	nay NOT be double-counted) (Continuation)	
Year of Birth	Gender	:	Specia	al	vo	Pre- ocation	nal		Other	r		To	otal			Age in years
≥2011	Male															≤3
	Female															
2010	Male															4
	Female															
2009	Male															5
	Female															
2008	Male															6
	Female															
2007	Male															7
	Female															
2006	Male															8
	Female															
2005	Male Female															9
	Male															
2004	Female															10
	Male															
2003	Female															11
	Male															
2002	Female															12
	Male															
2001	Female															13
2225	Male															
2000	Female															14

EMIS NUMBER					

2.3	Number of le	earne	rs ac	cordi	ng to	grad	le, ge	nder	and y	year (	of bir	th (L	earr	ers
Year of Birth	Gender		Specia	al	vo	Pre- ocatio	nal		Other			To	otal	
1999	Male													
1999	Female													
1998	Male													
1990	Female													
1997	Male													
1997	Female													
1996	Male													
1550	Female													
1995	Male													
1000	Female													
1994	Male													
1004	Female													
1993	Male													
	Female													
1992	Male													
	Female													
1991	Male													
	Female													
1990	Male													
	Female													
≤1989	Male													
	Female													
TOTAL	Male													
	Female Learners not are													

Other = Learners not grouped in any of the grades provided

EMIS NUMBER										1
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2.4	Numb	er of le	arne	ers a	acc	ord	ing	to p	rim	ary	dis	abili	ty, g	jend	der :	and	gra	ade	(Le	arı	ners	ma	ay N	ОТ	be	doul	ole-	cou	ınte	ed)										
Primary Disability	Gender	Pre- Grade R		Gra R	de	G	Grad	e 1	Gı	rade	2	Grad	de 3	Gı	rade	4	Gr	ade	5	Gra	ade 6	G	irade	7	Gra	de 8	Gr	ade	9	Gra 10		Grade 11	е	Gra	S	pecia	al	voc	Pre- ational	Other
Deficit	Male Female																																							
Spectrum	Male Female																																							
Behavioural disorder/ Conduct			+																																					
Blindness	Male Female																					F																		
Cerebral	Male Female																		+			F							1											
Deafness	Male Female																					F																		
Deaf- Blindness	Male Female		-																																					
Epilepsy	Male Female																																							
Haru Oi	Male Female																																							
Moderate	Male Female										$\frac{1}{1}$								<u> </u>										$\frac{1}{1}$				$\dashv$							
Severe to profound	Male Female		†																+			<u> </u>													<u> </u>					
_	Male Female																																							

\*NEMIS005B SNE SNAP14-12\*

EMIS NUMBER					

2.4	Numbe	er of learn	ers acco	rding to p	orimary o	disability	, gender	and grad	e (Learr	ers may	y NOT b	e double	e-counte	d)				
Primary Disability	Gender	Pre Grade R	Grade R	Grade 1	Grade 2	Grade 3	Grade 4	Grade 5	Grade 6	Grade 7	Grade 8	Grade 9	Grade 10	Grade 11	Grade 12	Special	Pre- vocational	Other
	Male																	
Physical disability	Female																	
Specific learning	Male																	
dieability	Female																	
Psychiatric	Male																	
disorder	Female																	
	Male																	
Other	Female																	

Other = Learners not grouped in any of the grades provided

EMIS NUMBER					

#### 3 STAFF INFORMATION

All staff employed at the school on the survey date must be indicated on the survey form.

Staff members who are on leave must be indicated even if they have been replaced by substitutes.

Private centres must indicate their staff under the heading "governing body".

A STAFF MEMBER SHOULD ONLY BE COUNTED ONCE.

3.1 Num	ber	of S	TAF	F rer	nune	erate	d by	y the	STA	ATE	(Do	not ii	nclud	le er	nplo	yees	paid	by t	the g	over	ning	bod	y.)				
			P	erm	ane	nt					T	emp	ora	ry					Sı	ıbst	itut	es					
CATEGORY		Full-	time			Part	-time	)		Full-	time	!		Part-	-time			Full-	time			Part-	-time		٦	Гota	ıI
Educators	M	ale	Fer	nale	Ма	ale	Fer	nale	Ма	ale	Fen	nale	Ma	ale	Fen	nale	Ma	ale	Fen	nale	Ma	ale	Fen	nale			
Educators																											
Practitioners																											
Prof. non- teaching staff																											
Admin. Staff																											
Support staff																											
Hostel staff																											

3.2 Num	ber	of S	TAF	F ren	nune	erate	ed by	y the	GO	VER	NIN	G BC	DDY	(Do	not i	nclu	de ei	mplo	yees	paid	d by	the s	state	.)			
			P	erm	ane	nt					T	emp	ora	ry					Sı	ubst	itut	es					
CATEGORY		Full-	time			Part	-time	)		Full-	time			Part-	-time	)		Full-	time			Part-	time		7	Γota	I
	Ma	ale	Fen	nale	Ma	ale	Fer	nale	Ма	ale	Fen	nale	Ma	ale	Fen	nale	Ma	ale	Fen	nale	Ma	ale	Fen	nale			
Educators																											
Practitioners																											
Prof. non- teaching staff																											
Admin. Staff																											
Support staff																											
Hostel staff																											

Educators = Any person, who teaches, educates or trains other persons or who provides professional educational services.

**Prof. +non-teaching staff =** Staff members of a school who are registered with a professional body other than the South African Council for Educators (**SACE**).

Admin. Staff = Employees in an administrative capacity that provide services to offices and institutions. E.g. secretaries, typists, administrative clerks and accountants

Support Staff = Staff employed at a school to support the core functions of a school. E.g. laboratory assistant, cleaner, kitchen staff, gardener, caretaker, messenger

**Hostel Staff** = Persons employed for the administration, maintenance and management of the hostel.

Substitutes = A person appointed to an additional post to take the place of an educator in a substantive post who is not at school for a period of time.

Full-time staff member = A staff member who is employed in a full-time post for a minimum of 12 months and delivers at least 22.5 hours of teaching per week.

**Part-time staff member** = A staff member appointed to work fewer hours than a full-time employee.

EMIS NUMBER		
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# VERIFICATION AND CLEARANCE SECTION

The purpose of this clearance document is for the verification and authentication of the information declared by the school on the survey form.

The form is to be completed in full and verified by the Principal or Deputy Principal (or another designated person) at the school. The principal must sign and stamp the provided space at the bottom of the verification list to confirm that the checking of the survey data has taken place and that all mistakes have been rectified per item on the list. This verification list should be submitted to the district/ regional offices and a copy should be filed at the school for audit purposes.

Once the form is received from a school at the district or regional office, the designated Provincial Education Manager must verify the data in each item in the list. The Provincial Education Manager must sign and stamp the provided space at the bottom of the verification list to confirm that the checking of the survey data has taken place and that all mistakes have been rectified.

4	SCHOOL LEADNED SECTION		ked and d? Yes / No	If not confirmed,
	SCHOOL LEARNER SECTION	Principal	Education Manager	please comment
1.1	Has the section on <b>General School Information</b> been completed correctly in all aspects? [Table 1.1 – Table 1.8]			
1.2	Does the total number of learners <b>enrolled</b> at the school <b>per grade</b> balance with the class registers for that grade? [Table 2.1.2]			
1.3	Have the correct calculations been made regarding enrolments for all grades according to <b>year of birth</b> ? (Every learner indicated in the year of birth totals, must be documented in the school registers or other official source documentation) [2.3.]			

#### **Summary Control Table: Learners**

- Please check ALL the following tables against the totals in Table 2.1.2
- NOTE: the totals should be transferred from the Snap Survey form as completed by the data compiler
- The totals of each of the tables in the list should balance with the totals for Table 2.1.2

Table	e: 2.1.2	Т	otal	: Ma	le	To	tal: F	ema	ale	Gr	and	Tot	al
1.4	Table 2.1.2 CONTROL TABLE												
The t	otals in each table below must balance with the totals recorded for	TAE	BLE.	2.1.2	2								
1.5	Table 2.1.1"Total number of LEARNERS enrolled at the school on the survey date according to PRIMARY disability to learning and gender"												
1.6	Table 2.2: "Number of disabled learners according to year of birth, gender and <i>PRIMARY</i> Disability."												
1.7	Table 2.3. "Number of LEARNERS enrolled at the school according to year of birth gender and grade""												

Sum	mary Control Table: Educators		
1.7	Total number of Educators (State and SGB paid) at the school (excluding substitute educators		
1.8	Total number of substitute Educators at the school (State and SGB paid)		

I certify that the information provided on this form is to the best of my knowledge and belief correct and complete.

	Name	Signature	Date
Data Compiler			
Principal			
Education Manager			

Principal to place school stamp here

Education Manager to place office stamp here