



UCT Educare Centre
 Properties and Services Department
 Nursery Road
 Upper Campus, University of Cape Town, 7701
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Secretary: Alison Witbooi
 E-mail: educare@uct.ac.za
 Web: <http://www.staff.uct.ac.za/staff/support/educare/application>

2025 EDUCARE FEE PAYMENT PER MONTH

Child's Name	
Sibling Name (less 10% p.m.)	
Sibling Name (less 10% p.m.)	

JOINT GROSS EARNINGS OF BOTH PARENTS

3 months to 5 years	Less than R 150 000.00 per annum	R150 000.00-R450 000.00 per annum	+ R450 000.00 per annum and Third Party staff
Rate per month:	R 2 398.00	R 3005.00	R 3250.00
Tick applicable column			

Parents earning less than R 150 000.00 per annum are required to submit supporting documentation such as three months proof of income (letter from employer / bursary office / bank statements).

RESIGNATION PERIOD:

The resignation period is **three 3 months**. A written notification is required should you wish to resign from the Educare Centre. Without this letter of resignation, we are unable to cancel your stop order or credit your student fee account.

Educare Fee Payment Methods

- Staff members** Permanent UCT staff member's monthly salary will be debited each month.
- Registered students** The student fee office will debit your student fee account with Educare fees as a once-off payment at the end of February 2020. The only means of payment for students.
- Third Parties** **Paid on claim and contract staff members (not on the UCT STAFF MONTHLY PAYROLL)** are to pay the fees in advance, by the first day of each month. **No cash payments will be received.** Proof of payment for electronic transfers must be emailed or handed in at the office on or before the 1st day of each month or it will be assumed that the fees have not been paid. In this instance you will receive a statement indicating an arrear amount.

PAYMENT METHOD AUTHORISATION (Please indicate the payment method and insert the fee amount)

1. Staff members

I, the undersigned, do hereby authorise the Coordinator of UCT Educare Centre, to deduct the sum of _____ from my monthly salary with effect 1st _____.	R
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2. Students

I the undersigned do hereby authorise the Coordinator of UCT Educare Centre to deduct annual fee of _____ at the end of _____.	R
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3. Third Parties

I, the undersigned do therefore certify that I am not on the UCT Staff Monthly Payroll, therefore, an electronic fee payment of _____ will be made as required.	R 3250.00
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PAYEE DETAILS AND SIGNATURE (By signing this I acknowledge that my income details are correct and that failure to comply may result in legal action)

Name of Payee	Staff / Student Number	Signature	Date