



OFFICE USE:

Whanau

Class:

Enrolment Number:

NSN Number:

ENROLMENT FORM

Proposed Academic Year Level at Entry: Y7 Y8 Y9 Y10 Y11 Y12 Y13

Male Female

Please note: All applicants must attach a copy of their child's **BIRTH CERTIFICATE OR PASSPORT** and **PROOF OF ADDRESS**

STUDENT INFORMATION

Surname

First Names

Preferred Name

Date of Birth

Street Address

Postal Address

Student Cellphone

Born in NZ Yes No (circle one)

Previous School

GENERAL INFORMATION

Ethnicity

(for statistical purposes only)

NZ European

NZ Maori

Other

State Iwi:

Please state:

Language

English

Other

Please state:

Permanent Resident Yes / No (circle one) (if the answer is 'no' please complete section below)

Student Visa Yes / No / NA (circle one) (if the answer is 'no' please complete section below)

Certification

If you are required to complete this section please bring your passport and any other relevant information with you

Passport Number:

Expiry Date:

Country of origin:

Date of arrival to NZ:

Siblings (please list)

Siblings Whanau Arawa Maniapoto Ngapuhi Whatua (circle one)

Zoning

Please provide proof of address to show that you live within the school catchment zone (eg. Telephone or power account, rental agreement)

If you live outside the enrolment zone please describe briefly why you wish to enrol your son/daughter at OHS.

CAREGIVER ONE INFORMATION

What relationship is the person to the student eg: Mother, Father, other (specify)

Title

Surname

First Names

Home Address

Postal Address

Telephone Numbers: Home
Business
Cellphone

Email Address

CAREGIVER TWO INFORMATION

What relationship is the person to the student eg: Mother, Father, other (specify)

Title

Surname

First Names

Home Address

Postal Address

Telephone Numbers: Home
Business
Cellphone

EMERGENCY CONTACT INFORMATION

In cases of emergency if the caregivers **cannot be reached** the emergency contact **must be available** to collect the child

What relationship is the person to the student eg: Aunt, Friend, other (specify)

Title

Surname

First Names

Telephone Numbers: Home
Business
Cellphone

OTHER DETAILS

Is there any other information that may be helpful for us in knowing, understanding and assisting your child/ren/family (eg. Adopted child, blended family, protection orders)?

Please give names and addresses of parent/guardians not residing with your child who would like to receive student's school report:

STUDENT'S HEALTH RECORD

Doctor:		Surgery Phone Number:
Has your child ever suffered from?		Medication or Action Required:
Asthma	Yes / No	
Epilepsy	Yes / No	
Diabetes	Yes / No	
Hepatitis B	Yes / No	
Allergies	Yes / No	
Rheumatic Fever	Yes / No	
Does she/he suffer from any other medical condition or disability (specify)		

IMMUNISATION STATUS

Hepatitis B	Yes / No	Poliomyelitis	Yes / No
Meningitis B	Yes / No	Tetanus booster aged 11 (DTAP)	Yes / No
Measles, Mumps & Rubella (MMR)	Yes / No	Meningitis C	Yes / No

In Case of Illness, Accident or Emergency

1. I/we give permission for my child to receive appropriate treatment when necessary from school First Aid and for my child to be given Panadol as deemed necessary.
2. If the school is unable to contact me or if the accident is serious, I give permission for the school to either take my child to the Maungaturoto Medical Centre or call an Ambulance. If an Ambulance is needed for a non-accident incident I agree to meet any cost incurred.
3. I will inform the school if my child is on any prescription medication that requires to be administered during the day

Parent/Guardian Name: _____ Signature: _____

AGREEMENT FOR USE OF COMPUTERS AND THE INTERNET

As a prerequisite for using computers and the internet at Otamatea High School I agree:

- Not to load any programs onto school computers, via the internet or any other means
- To use storage media only with network administrator permission and to have these virus checked at school before using
- Not to interfere with settings or alter programs on school computers
- Not to reveal my own password to others or use other students' passwords or other personal details such as phone number or address
- Not to use unsuitable, inappropriate, offensive or illegal material
- To use electronic mail or enter chat rooms only with teacher permission each time
- To use appropriate language when sending emails
- Not to order, sign-up or give out email address for anything online without teacher permission
- Not to use any method to bypass school internet security.
- Not to engage in any activities that might cause harm to others: cyber bullying, inappropriate messaging and commenting and uploading or using unapproved photographs or images.
- To take full responsibility for chromebooks and other school devices I use and to report any damage or problems to the teacher as soon as I become aware of them.

I understand that inappropriate use of the internet or computers may result in withdrawal of their use at school.

Student's Name: _____ Signature: _____

STUDENT DECLARATION

- I agree to support the rules and regulations of the school in particular:

I agree to wear the correct school uniform, with pride, every day (including to and from school).

I will demonstrate the highest respect for all people in everything I do. I/We will also respect and care for the school environment.

I agree to work hard and complete all work expected of me, to a high standard, so that I am successful while at Otamatea High School. This also involves having all the correct equipment for every lesson and completing homework.

I realize that offensive language toward staff and other students at school is not tolerated. I shall use appropriate language at all times.

- I understand the agreement for use of Computers and the Internet.
- I agree to observe all of the rules and regulations that the school may from time to time publish.
- I will only bring a cell phone or other electronic equipment to school for educational purposes.
- I understand that there is a requirement to attend all classes unless a justified reason is supplied by my parent/caregiver which may include a medical certificate.

Student Name: _____ Signature: _____ Date: _____

PARENT DECLARATION

In the event of fraudulent information being given the application will be annulled.

- I/We understand that making a false declaration is an offence.
- I/We confirm that the address provided to the school is the student's usual place of residence when the school is open for instruction. I will advise the school of any subsequent change of address.
- I/We have read the statement on Personal Information and the Privacy Act (1993).
- I/We agree to support the rules and regulations of the school:
- I/We agree to ensure my child wears the correct school uniform, every day (including to and from school).
- I/We understand the agreement for use of Computers and the Internet.
- I/We understand that my child will be allocated a 'gmail account'.
- I/We shall meet all of the charges relating to classroom materials and all other curriculum and co-curriculum charges.
- I/We understand that there is a requirement to attend all classes unless a justified reason is supplied by the parent/caregiver which may include a medical certificate.
- I/We declare that all of the information on this form is true and correct

In support of my child's application for enrolment at Otamatea High School I/We agree to see that s/he abides by the rules, regulations and dress code of the school.

I/We give permission for the Principal of Otamatea High School, or her nominee to obtain from previous schools and to forward to an on-going school, or any other relevant agency, information pertinent to my child's enrolment.

I/We consent / do not consent (circle one) to the publication of information and images featuring achievements and activities undertaken by my child.

Caregiver 1 Name: _____ Signature: _____ Date: _____

Caregiver 2 Name: _____ Signature: _____ Date: _____

(Where practicable both signatures are required)

(Filling and returning this form does not guarantee you a place. Further processes are necessary to complete full enrolment procedure.)