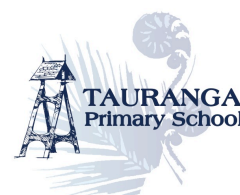


# TAURANGA PRIMARY SCHOOL ENROLMENT APPLICATION



In Zone / Out of Zone

2016

Legal Last Name:	Preferred Last Name:
Legal First Name:	Preferred First Name:
Legal Middle Name:	Date of Birth:
Gender:(please circle) Male / Female	Current Year Level:
Main Language spoken at home: (please circle) English      Maori      Other (please state): _____	
<b>Child's Ethnicity:</b> _____	
<b>Child's Iwi Affiliations (parents can select up to three Iwi that they affiliate to:</b> _____	

<b>Main Caregiver 1:</b>	Lives with <input type="checkbox"/>	Send Invoices: <input type="checkbox"/>	Send copy of Report <input type="checkbox"/>
--------------------------	-------------------------------------	---	--

Mr / Mrs / Miss / Ms	Last Name:
First Name:	Relationship to Student:
Home Address:	Post Code:
Email Address:	
Home Phone:	Mobile:      Work No:
Occupation:	Employer:

<b>Main Caregiver 1:</b>	Lives with <input type="checkbox"/>	Send Invoices: <input type="checkbox"/>	Send copy of Report <input type="checkbox"/>
--------------------------	-------------------------------------	---	--

Mr / Mrs / Miss / Ms	Last Name:
First Name:	Relationship to Student:
Home Address:	Post Code:
Email Address:	
Home Phone:	Mobile:      Work No:
Occupation:	Employer:

<b>Names of eldest brother / sister currently at our school:</b>
Place in Family: (eg) 1 of 4 children:

<b>For school use:</b>	
Birthdate / Passport validated: _____	sighted    yes / no
Enrol: _____	Immunisations completed    yes / no
Etap Enrolment No: _____	zone
House: _____    Year Level: _____    Room: _____	Priority
	start date:

<b>Step Parent:</b>		Lives with <input type="checkbox"/>	Send Invoices: <input type="checkbox"/>	Send copy of Report <input type="checkbox"/>
Last Name:		Mr / Mrs / Miss / Ms		
First Name:		Relationship to Student:		
Home Address:				
Email Address:				
Home Phone:		mobile:	work:	
<b>Non Custodial Parent:</b>		Send Invoices: <input type="checkbox"/>	Send copy of Report <input type="checkbox"/>	
Last Name:		Mr / Mrs / Miss / Ms		
First Name:		Relationship to Student:		
Home Address:				
Home Phone:		mobile:	work:	
<b>Emergency contact 1: (other than parent/step-parent above) Living in Tauranga</b>				
Name:		Relationship to Student:		
Home Phone:		mobile:	work:	
<b>Emergency contact 2: (other than parent/step-parent above) Living in Tauranga</b>				
Name:		Relationship to Student:		
Home Phone:		mobile:	work:	
<b>STUDENTS ENROLLING FROM ANOTHER SCHOOL</b>				
Previous Primary School				
Date / Yr level - Started:		Date / Yr level - Left:		
Reason for Leaving:				
<b>ETHNICITY / ELIGIBILITY</b>				
Child's Country of Birth (name country): _____				
New Zealand Citizen: Yes / No		Birth Certificate No:		
New Zealand Resident: Yes / No		Passport No:		
Australian Citizen: Yes / No		Residency Permit No:		
New Zealand Student Permit: Yes / No		Date of entry to NZ		
<b>Custody Details</b>		<b>Court Details</b>		
Yes / No		Yes / No		
Please provide any custody details that may impact on your children at this school. Attach relevant documentation to this form. Without this documentation the school has limited powers to assist.		Please provide any Court Order Issues that affect your child/ren at this school. Attach relevant documentation to this form. Without this documentation the school has limited powers to assist.		
<b>Access Details:</b> Please provide any access details that impact on your child and Tauranga Primary School.				

Health Issues	
Doctor & Practice:	
Phone No:	All Immunisations completed    yes / no    Certificate attached?
Allergies / Medication etc:	
Behaviour Concerns:	
Learning Difficulties:	

EDUCATIONAL - SPECIAL NEEDS INFORMATION : Your child's strengths, eg; Plays, piano, strong swimmer. Academic area / Second language
Any other information parents wish to disclose or wish noted: (also please advise if any family members were past pupils)
Pre-schoolers whom you intend to enrol at Tauranga Primary School
Name: _____ Name: _____ DoB: ____/____/____ Male / Female    DoB: ____/____/____ Male / Female

Early Childhood Education (ECE) For New Entrants Only			
Did your child regularly attend an ECE?			
a: <input type="checkbox"/> Yes, for the last _____ years.			
b: <input type="checkbox"/> Not regularly, only occasionally with no on-going schedule			
c: <input type="checkbox"/> No, did not attend ECE			
Name of pre-school / kindergarten / Kohanga etc: _____			
Please enter the number of <b>hours per week</b> for up to 3 services	Service 1 (hrs/week)	Service 2 (hrs/week)	Service 3 (hrs/week)
a. Kohanga Reo			
b. Playcentre			
c. Kindergarten or Early Childhood Care Centre			
d. Home based service			
e. Playgroup			
f. The Correspondence School			
g. Attended, but only outside New Zealand			

## PARENT/CAREGIVER PERMISSION STATEMENTS - Required Agreements

### **Procedures**

I/we agree to abide by the Guidelines of the school, copies of which are in the school office.

Parent/Caregiver:

Date:

### **School Uniform**

I/we understand that the wearing of school uniform is a condition of enrolment at Tauranga Primary School. I will ensure my child is suitably dressed in regulation school uniform and wears the uniform with pride

Parent/Caregiver:

### **Child's Property**

I/we understand the school will take all reasonable steps to ensure the safekeeping of my child's property but the school will not accept liability for such loss.

Parent/Caregiver:

### **Behaviour Management Plan**

I/we understand that the school has a Behaviour Management Plan that makes our school a safe place for all students and staff. I will support the school's behaviour initiatives.

Parent/Caregiver:

### **School Trips and Visits**

I/we give permission for my/our child/ren to attend school trips and visits during their time at this school. I understand I will be notified of any such trips/events and I understand that I have the right to send a note exempting my child from a school trip/event. I understand the school has in place an EOTC (Education outside the classroom) guidelines.

Parent/Caregiver:

### **School Donation**

I/we agree to pay for costs that are detailed in the school donation as set by the Board of Trustees. I/we also agree to pay for any intentional or willful damage that my child causes at the school.

Parent/Caregiver:

### **Attendance and Punctuality**

I/we agree to ensure our child attends school every day. In the event of illness/approved family commitments we will contact the school on the morning of the first day of absence to report their non-attendance and expected return date.

I/we agree our child will be at school by 8:40am each day ready for their learning and picked up no later than 3:10pm each afternoon.

Parent/Caregiver:

### **Cyber Safety and IT Use:**

I/we give permission for my/our child to use the school's IT equipment and access the internet for learning purposes. We will support the school should my child engage in unsafe online behaviour that is harmful to others or our school reputation.

Parent/Caregiver:

### **Other**

- I/we give permission for my child's school work to be used in school displays or publicity material including online publication e.g. class blogs and the school website.
- I/we give permission for my child to take part in school programmes that involve the preparation of food.
- I/we give permission for photos, my child may be in, to be on our school website, blogs and Facebook page.
- I/we give permission for my child's photo to be used in the promotion of the school.
- I/we give permission for the school to take action on my behalf in the case of sudden illness or injury that affects my child.

Parent/Caregiver:

Date:

**For school use:**

**Imm Verified:** \_\_\_\_\_ **Dental Consent:** \_\_\_\_\_ **ORRS Status:** \_\_\_\_\_ **ESOL:** \_\_\_\_\_