



Inspire - Learn - Lead

Application received:  
Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Regular Student   
Fee Paying Student   
OOZ

# PINEHILL SCHOOL

## Enrolment Application

Student Name: \_\_\_\_\_

### Office Use Only

Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_ Year: \_\_\_\_ Male  Female

Teacher: \_\_\_\_\_ Room: \_\_\_\_\_

Admission Number: \_\_\_\_/\_\_\_\_ NSN Number: \_\_\_\_\_

Address Verified:  In-zone: Yes  No  Sibling  \_\_\_\_\_

DOB verified - Birth Certificate:  Passport:  Student Visa:  Work Visa (parent):  Permanent Residency:

Date of Entry to NZ: \_\_\_\_/\_\_\_\_/\_\_\_\_

V&H Form  Dental Form  Vaccination Certificate:

Date of Commencement: \_\_\_\_/\_\_\_\_/\_\_\_\_

1st Visit: \_\_\_\_/\_\_\_\_/\_\_\_\_ 2nd Visit: \_\_\_\_/\_\_\_\_/\_\_\_\_ Visit Letter: \_\_\_\_/\_\_\_\_/\_\_\_\_

Principal Meeting: \_\_\_\_/\_\_\_\_/\_\_\_\_ Time \_\_\_\_\_

Information Pack Given:

Entered E-Tap  Completed: # \_\_\_\_\_ Fee Loaded  Gmail account  Learner Profile

Records Requested  ESOL  ENROL completed

House: Kawau / Motuihe / Rakino / Waiheke

**STUDENT INFORMATION - Legal as per Birth Certificate or Passport**

<b>First Name:</b>		<b>Family Name:</b>	
<b>Preferred Name</b> (Student known as)	<b>Date of Birth:</b> ___/___/___	<b>Gender:</b> <input type="checkbox"/> Male <input type="checkbox"/> Female	
<b>AddressNo./Street</b> jdsjfklsajfkjfdjfl	<b>Suburb/Town</b>	<b>Postcode</b>	
<b>Country of Birth:</b>	<b>Citizenship:</b>	<b>Ethnicity:</b>	
<b>If Maori - Iwi</b>	<b>Home/First Language:</b>	<b>Other Languages:</b>	
<b>Date first started school</b> ___/___/___	<b>Date of arrival in NZ</b> ___/___/___	<b>Birth Certificate and/or passport included</b> <input type="checkbox"/>	
<b>Place in family</b> ___ of ___	<b>Siblings at Pinehill</b> <input type="checkbox"/> Yes <input type="checkbox"/> No	<b>Names:</b>	

**CAREGIVERS INFORMATION**

	<b>Mother or Guardian (please circle)</b>	<b>Father or Guardian (please circle)</b>
<b>Full Names(s)</b>	Ms/Miss/Mrs	
<b>Relationship</b>		
<b>Home phone</b>		
<b>Cell phone</b>		
<b>Work phone</b>		
<b>Email address</b>		
<b>Address</b> No./Street Suburb Town Postcode		
<b>Home Language</b>		
<b>Occupation</b>		

<b>Family Circumstances</b> Access rights, Legal documentation etc (please attach copies)	
<b>Are there any adults that are not authorised to be with your child?</b>	<b>If Yes, please provide details:</b>

**Emergency Contacts** - only used if parent(s) cannot be contacted

	First Contact	Second Contact
<b>Name</b>		
<b>Relationship</b>		
<b>Phone no.</b>		
<b>Cell phone</b>		
<b>Email</b>		
<b>Language</b>		

**HEALTH**

I will advise the school and fill in the relevant permission forms should any medication need to be administered.

<b>Doctor:</b>	<b>Phone:</b>
<b>Medical Conditions/ Allergies:</b>	
<b>Medication:</b>	
<b>Does your child self medicate? (i.e. Asthma)</b>	Yes <input type="checkbox"/> No <input type="checkbox"/>
<b>I give the school permission to give my child paracetamol, Panadol or Pamol (as appropriate)</b>	Yes <input type="checkbox"/> No <input type="checkbox"/>
<b>My child is fully vaccinated</b> (Please provide vaccination certificate)	Yes <input type="checkbox"/> No <input type="checkbox"/>
<b>Any other health issues</b> i.e. sight, speech, hearing or mobility	

**GUIDANCE**

Has your child ever been - Stood down  Suspended  Excluded

If yes: Number of days \_\_\_\_\_ School Name: \_\_\_\_\_

Reason: \_\_\_\_\_

**ADDITIONAL INFORMATION**

Has your child received any learning support in the past? Yes  No

If yes, please indicate:  Teacher Aide  Reading Recovery  ESOL  RTLB  
 Speech Therapy  Occupational Therapy  IEP (Individual Education Plan)  
 Ministry of Education  Education Psychologist Report  
 Other \_\_\_\_\_

Has the student had any assessment for the following:  
 Dyslexia  Dyspraxia  Autism  Asperger's  ADD/ADHD  
 Other (please state) \_\_\_\_\_

\_\_\_\_\_

To assist us in providing support for our students, we request that copies of any reports and documentation indicating learning needs be attached to this enrolment.

**Previous School / Kindergarten / Childcare Centre**

School Name:	Year level:	Copy of last report included <input type="checkbox"/>
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**Note: The Ministry of Education require that you provide the following information**

**Participation in Early Childhood Education**

**Did your child regularly attend Early Childhood Education service(s) in the six months prior to starting school?**

*"Regularly attend" means the child was booked in to a service and generally went to those sessions unless they were sick, or on holiday or had a family occasion, etc.*

- No, did not attend Early Childhood Education.
- Not regularly, only occasionally with no on-going schedule. **Complete Table 1**

**Section 1**

- Attended, but only outside New Zealand
- Attended, but don't know what type of service
- Unable to establish if attended or not
- Yes, for the last \_\_\_ years. **Complete Table 2**

**Section 2**

Please enter the number of **hours per week** for up to three simultaneous services

- Kohanga Reo \_\_\_\_\_ hours per week
- Playcentre \_\_\_\_\_ hours per week
- Kindergarten or Education and Care Centre \_\_\_\_\_ hours per week
- Home based service \_\_\_\_\_ hours per week
- Playgroup \_\_\_\_\_ hours per week
- The Correspondence School – Te Aho O Te Kura Pounamu \_\_\_\_\_ hours per week

**Declaration**

- The information given on this form is true and correct.
- I declare that we reside in the Pinehill School zone unless applying as an out-of-zone applicant and have completed the attached In-Zone Declaration.
- I understand that the information provided may be used for school based activities and be passed to other agencies who work with the school for educational purposes.
- I understand that a 21 day absence requires re-enrolment and I must be living within the Pinehill School's enrolment zone for automatic re-entry.
- I understand that Pinehill will contact my child's previous school to request that they pass on school records and any other information to support my child, and that Pinehill School will pass on any records to my child's subsequent school/s.
- I give authority to the Principal to act on my behalf in any medical emergency.
- I give permission for my child to attend all approved educational visits and trips.
- I give permission for the school to publish images of my child on the school website; school related social media including the school newsletter; and, in newspaper and magazine articles covering school activities in accordance with school policy.
- I give permission for my child to access the internet and hold a school email address in accordance with school policy.
- I give permission for my child to participate in approved university research projects provided it is anonymous.
- I agree to abide by all Board of Trustee policies.

Signature: \_\_\_\_\_ Mother/Father/Guardian (circle one) Date: \_\_\_/\_\_\_/\_\_\_

**Required Documentation / Checklist - Office to complete**

**Parent**

**Office**

- |  |                          |                          |
|--|--------------------------|--------------------------|
| 1. Proof of residence in zone x 2.<br><i>(Rental or Sale &amp; Purchase agreement AND Latest utility bill eg. Power, or letter from Govt agency eg. IRD)</i> | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. NZ Birth Certificate and/or passport and student visa   | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. Parents passport  | <input type="checkbox"/> | <input type="checkbox"/> |
| 4. Immunisation Certificate.   | <input type="checkbox"/> | <input type="checkbox"/> |
| 5. Completed and signed Enrolment and In-Zone Declaration  | <input type="checkbox"/> | <input type="checkbox"/> |
| 6. Copy of latest report from previous school (if applicable) and letter confirming withdrawal from overseas school  | <input type="checkbox"/> | <input type="checkbox"/> |



## ENROLMENT PROCEDURE - IN-ZONE DECLARATION

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The Board of Trustees of Pinehill School has an Enrolment Scheme in place which meets the requirements of the Ministry of Education guidelines for the operation of enrolment schemes. A major factor in the school implementing a scheme is to prevent overcrowding.

Children who live within the school's enrolment zone have right of access to the school. Children from outside the zone must wait until the board applies the scheme.

For in-zone children the board of trustees must be certain of the genuineness of the address to ensure that the scheme is being applied correctly. The board acknowledges that in most cases the in-zone enrolment is not a problem, however, there have been cases where the address given has not been the actual address or a permanent one. To overcome this issue the board requests parents who are enrolling their child as 'in-zone' enrolments read the following statement and sign the declaration form.

**Carla Veldman**  
**Principal**

### DECLARATION OF RESIDENCY: IN-ZONE

To be completed by parents who have given an in-zone address as the student's usual place of residence.

The address given at the time of application for enrolment must be the student's usual place of residence when the school is open for instruction. This means that if you currently live at an in-zone address but move to an out-of-zone address before your child's first day of attendance at the school, your child will not be entitled to enrol at the school.

The Ministry of Education has advised that parents should also be warned of the possible consequences of deliberately attempting to gain unfair priority in enrolment by knowingly giving a false address or making an in-zone living arrangement which they intend to be only temporary e.g.

- renting accommodation in-zone on a short-term basis;
- arranging temporary board in-zone with a relative or family friend;
- using the in-zone address of a relative or friend as an "address of convenience", with no intention to live there on an on-going basis.

Before enrolment takes place (i.e. before attendance begins), if the board has reasonable grounds for believing that the given in-zone address will not be a genuine, on-going living arrangement, the board may withdraw any offer of a place which it may have made on the basis of the given address.

After attendance has begun, if the school learns that a student is no longer living at the in-zone address given at the time of application for enrolment and has reasonable grounds to believe that the temporary in-zone residence has been used for the purpose of unfairly gaining priority in enrolment at the school, then the Board may review the enrolment. Unless the parents can give a satisfactory explanation within 10 days, the Board may annul the enrolment. This course of action is provided for under section 110A of the Education Act 1989.

I confirm that the address which I have provided to the school will be the usual place of residence of

..... (student's name) when the school is open for instruction. I will advise the school of any subsequent change of address.

.....  
(Parents/Guardian Name BLOCK LETTERS)

.....  
(Parents/Guardian Signature)

.....  
(Date)