

Westburn Te Kura O Hereora

Student Enrolment Form

OFFICE USE ONLY			
ROOM:		YEAR:	

310	DENI	DETAIL	>

FULL LEGAL NAME:		DATE OF BIRTH:		
PREFERRED NAME:		GENDER	MALE / FEMALE / OTHER	
CURRENT YEAR LEVEL:		START DATE:		
CURRENT SCHOOL:				
HOME ADDRESS:		ZONING:	IN ZONE / OUT OF ZONE	
HOME PHONE:				
COUNTRY OF BIRTH:				
CITIZENSHIP/RESIDENCY:				
LANGUAGES SPOKEN:				
ETHNICITY:	If the student is NZ Māori, please list their iwi or state 'Don't know'.			
EARLY CHILDHOOD CENTRE:				
YEARS ATTENDED:		HOURS ATTENDED:		
SIBLINGS LIKELY TO ENROL AT WESTBURN TE KURA O HEREORA:				
NAME:		D.O.B.		
NAME:		D.O.B.		
NAME:		D.O.B.		
PARENTS AND CAREGIVER DETAILS				
PARENT 1 - FULL NAME:		TITLE:		
		HOME PHONE:		
HOME ADDRESS:		MOBILE PHONE:		
		OCCUPATION:		
PLACE OF WORK:		WORK PHONE		
RELATIONSHIP TO CHILD:		EMAIL:	,	
TICK BOX IF THIS PERSON SHOULD RECEIVE INVOICES/STATEMENTS OF THE CHILD'S ACCOUNT:				

PARENT 2 - FULL NAME:		TITLE:		
HOME ADDRESS:		HOME PHONE:		
		MOBILE PHONE:		
		OCCUPATION:		
PLACE OF WORK:		WORK PHONE		
RELATIONSHIP TO CHILD:		EMAIL:		
TICK BOX IF THIS PERSON SHOU	ILD RECEIVE INVOICES/STATEMENTS OF THE CHILD'	S ACCOUNT:		
EMERGENCY CONTACTS				
CONTACT 1'S FULL NAME:		HOME PHONE:		
RELATIONSHIP TO CHILD		MOBILE PHONE:		
CONTACT 2'S FULL NAME:		HOME PHONE:		
RELATIONSHIP TO CHILD		MOBILE PHONE:		
LIVING ARRANGEMENTS				
PLEASE NOTE ANY RELEVANT CUSTODY/ACCESS ARRANGEMENTS:				
IF THERE IS A COURT ORDER IN PLACE, PLEASE PROVIDE A COPY. COURT ORDER ISSUED? YES / NO				
HEALTH, LEARNING AND BEHAVIOUR				
PLEASE NOTE ANY HEALTH OR LEARNING ISSUES INCLUDING ALLERGIES, MEDICATION, AND SPECIALIST SUPPORT/AGENCIES:				
FAMILY DOCTOR:	no	OCTOR'S PHONE NUMBER:		
		CION 3 PHONE NUMBER:		
DOCTOR'S PRACTICE ADDRESS:				
I CONSENT TO MY CHILD'S HEARING AND VISION BEING TESTED:			YES / NO	

PROMOTIONAL MATERIAL

We regularly display students' work and photographs on our school website, in the newsletter and in other online and print environments, including wider media. This may include:

- Photographs or videos selected by the school for use in publicity and/or promotional material;
- Being selected for an item for print media print, radio, television or web-based media; and/or
- · Having their work and/or photograph published in the school newsletter and/or on the school website.

I agree that my child's work and/or image may be published by the school as detailed above, aligned to school policy.

YES / NO

DOCUMENTATION REQUIRED	

☐ Birth Certificate/Passport to be sighted	Additional documents required for students who are not NZ citizens:
☐ Copy of Rental Agreement or Rates Invoice	☐ Residency permit/Permanent Resident Visa
☐ Copy of electricity account	☐ Student visa, parents' passports and parents' visas
☐ Copy of another account pertaining to the address attached	
☐ Immunisation Certificate copy attached (5yr olds only)	

PARENT/CAREGIVER APPROVALS

Privacy Statement:

All information collected will be used by the school for enrolment, and forms an essential part of the information held by the school on your child. The records made from this information may be viewed on request at the school. The information collected may be disclosed to appropriate education, health and welfare authorities and for data-gathering purposes by the New Zealand Ministry of Education, in accordance with the principles of the Privacy Act. It will not be disclosed to any other person or agency unless such disclosure is authorised or required by law.

Parent Approvals:

- · I/we agree that the school will take action on my behalf in case of sudden illness or injury to my/our child;
- I/we agree that the school charges for some items of stationery and uniform purchased from school and for children's participation in activities that support their education. I/we agree that we are liable for payment of this and my/our child's account;
- I/we consent to the disclosure of personal information to agencies that demonstrate a statutory right to obtain it including use of contact details by Westburn Te Kura O Hereora, the School Board and the Westburn School Community Association (WSCA). I/we acknowledge this includes receiving the school's newsletter and notices;
- I/we agree to abide by all of the school's policies and regulations;
- I/we agree that school uniform, as specified by the School Board, is compulsory; and
- I/we agree that the information above is true and correct and acknowledge that if it is not, my/our child may be removed from the school's roll.

Parent/Caregiver Signature:	Date:	

OFFICE USE ONLY

ENROL NSN:	School Admission Number:	
Start Date:	Westburn Year Level:	
House:	Room:	
Custody issue recorded:	Health/Hauora recorded:	
HERO data entered:	ENROL data entered:	