



Te Waotu School out of zone expression of interest

A big welcome from all of us at Te Waotu School!

Please provide us with the following information so we can give your child the best start possible at our school.

ABOUT YOUR CHILD

Legal surname:	Legal first name/s:	
Preferred surname:	Preferred first name:	
Eldest child at Te Waotu School:	Boy / Girl	Date of birth:
Place in family: of	Current year level:	
Residency/citizenship: Yes / No*	Previous school/centre:	
*If no, date of NZ entry:	Ethnicity:	Iwi / Hapu:
*If no, country of birth:	1.	1.
	2.	2.
	3.	3.

ABOUT YOU

Title: Legal surname:	Legal first name:
Address:	Relationship to pupil:
Country of birth:	Occupation:
Phone work: Phone home:	
Mobile:	Email:

Title: Legal surname:	Legal first name:
Address:	Relationship to pupil:
Country of birth:	Occupation:
Phone work: Phone home:	
Mobile:	Email:

EMERGENCY CONTACTS

Name:	Relationship to child:	Phone home:	Mobile:
Name:	Relationship to child:	Phone home:	Mobile:
Doctor:	Phone:	Dental clinic:	Phone:

ADDITIONAL DETAILS

Is there a court order issued? Yes / No / NA Please attach further information as required

Would you like your child to attend bible in schools classes (30 minutes per week) Yes / No

Are there younger members of your family likely to attend Te Waotu School in the future? Yes / No

1. Birthdate:	2. Birthdate:	3. Birthdate:
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EARLY EDUCATION AND MEDICAL

Was Early Childhood Education attended?

Yes, for _____ years

Yes but not regularly

No, did not attend ECE

Which of the following was attended in the six months prior to entering school? How many hours per week? _____

Please tick

Kohunga reo	Playcentre	Kindergarten	Ed centre	Home based	Playgroup	Correspondence
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Has your child had a B4 school check?

Yes / No

Are there health or behavioural matters we should be aware of?

Yes / No

Please provide details below

Vision:	Hearing:	Allergies:	Medication:	Speech:	Learning or behaviour:	Other:

Other information that may be relevant (relating to the above):

SOMETHING TO SIGN

I consent to my child's vision and hearing being tested

Yes / No

Privacy Statement: *The 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 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 agree that the school will take action on my behalf in case of sudden injury or illness, to abide by the school's policies, that my child's work and image may be used in accord with the school's online publishing policy/procedures and that the school may forward my child's name and address to potential secondary schools.*

Parent/Caregiver Signature: _____

Parent/Caregiver name: _____

Date: _____

WE NEED TO SEE

Immunisation Certificate

Birth certificate
Number:

or Passport
Number:

OFFICE ADMINISTRATOR TO COMPLETE

Records/information requested:		Records/information received:	
Year level:	Class:	Bus route:	
School admission number:		Data entered:	
NSN number:			

Flagged by enrol:	Additional information:	Date of entry: <i>School stamp</i>
Academic:		
Attendance:		
Behavioural:		
Custodial:		
Health:		
Personal:		

Te Waotu School enrolment zone: out of zone places

Each term the Board will determine the number of places which are likely to be available in the following term for the enrolment of students who live outside the home zone. The Board will publish this information by notice in a daily or community newspaper circulating in the area served by the school. The notice will indicate how applications are to be made and will specify a date by which all applications must be received.

Applications for enrolment will be processed in the following order of priority:

1. First priority must be given to students who have been accepted for enrolment in a special programme(s) run by the school and approved by the Secretary for Education. *This priority category is not applicable at Te Waotu School because the school does not run a special programme approved by the Secretary.*
2. Second priority must be given to applicants who are siblings of current students.
3. Third priority must be given to applicants who are siblings of former students.
4. Fourth priority must be given to any applicant who is a child of a former student of the school.
5. Fifth priority must be given to any applicant who is either a child of an employee of the board of the school or a child of a member of the board of the school.
6. Sixth priority must be given to all other applicants.

If there are more applicants in the second, third, fourth, or fifth priority groups than there are places available, selection within the priority group will be by a ballot conducted in accordance with instructions issued by the Secretary under Section 11G(1) of the Education Act 1989. Parents will be informed of the date of any ballot by notice in a daily or community newspaper circulating in the area served by the school.

Applicants seeking second or third priority status may be required to give proof of a sibling relationship.