



ENROLMENT FORM

Start Date (*Office Use*) **Nat. Student No.** (*Office Use*).....

Childs Family Name..... **Given Names**.....

Male / Female Date of Birth / / Birth Certificate Number.....

Residential Address.....Postcode.....

Proof of residential address sighted Yes / No **In Zone Yes / No**

Living with..... Relationship to Child.....

Ph:..... Mobile:..... Email:.....

Ethnic Identification (✓)

European..... Maori Iwi..... Samoan..... Cook Island..... Other.....

Nationality: NZ..... Other..... **Residency:** NZ..... Other.....

Previous School attended:.....**Class Level**.....

Special learning needs we should be aware of.....

.....

ⓘ PARENT INFORMATION

Mothers Surname.....First Name.....

Address.....Occupation.....

Fathers Surname.....First Name.....

Address.....Occupation.....

Others Caregivers Name.....

Address.....Occupation.....

ⓘ EMERGENCY CONTACTS

People that can be contacted to collect your child in emergencies when we cannot contact the primary caregiver:

1. Name..... Phone.....

2. Name..... Phone.....

ⓘ FAMILY CUSTODIAL ISSUES

(Please include custodial or guardianship information)

Is there in place a Custody Order/Protection Order? A copy is to be filed confidentially with the school. If a Protection Order is in place the person who has custody of the child must provide the following information:

Person able to collect the child from school.....

Person with Right of Access to the child.....

Address.....Ph.....

Mobile.....

Who are forbidden by law to have access to your child?.....

Who has right of access to the child under certain conditions?.....

.....

ⓘ HEALTH & MEDICATION INFORMATION

Doctor:..... Phone:.....

Allergies/Conditions.....

Immunisation Details: Are your child's Vaccinations **Complete / Incomplete**

Certificate Shown: Yes / No
(Office to complete)

Details Transferred: Yes / No
(Office to complete)

ⓘ OTHER INFORMATION

- **Permission for Bible in School:** Yes / No
- **Permission to photograph your child, publish their name and/or work:** Yes / No
- **Names of siblings attending the School**.....

Please indicate other children in family intending to be enrolled in the future

Name..... Date of Birth / /

Name..... Date of Birth / /

Cont..

❗ PRIOR-PARTICIPATION IN EARLY CHILDHOOD EDUCATION

Did the child attend one or more Early Childhood Education service(s) in the six months prior to starting school? Please complete the table below for the last service(s) attended.

Instructions:

1. If the child was attending more than one service *at the same time*, please enter hours per week for up to three services.
2. If the child attended one service, but changed to a different service within the six months prior to starting school, please complete the table for the *last service only*, not both.
3. If the child's attendance hours varied, or the parent/caregiver is uncertain, please enter an approximate or average number of **hours per week**.

Please enter the number of hours per week for up to 3 services	Service 1 (hrs/week)	Service 2 (hrs/week)	Service 3 (hrs/week)
1. Kōhanga Reo			
2. Playcentre			
3. Kindergarten <i>or</i> Education and Care Centre			
4. Home Based Service			
5. Playgroup			
6. The Correspondence School – Te Aho o Te Kura Pounamu			

Or

Please tick the appropriate box	
1. Attended, but only outside New Zealand	
2. Attended, but don't know what type of service	
3. Did not attend	
4. Unable to establish if attended or not	

Did the child regularly attend Early Childhood Education?

Instructions: "Regularly attend" means the child was booked in to a service for sessions each week/fortnight, and generally went to those sessions unless they were sick, or on holiday, or had a family occasion, etc.

- Yes, for the last ____ year(s).
- Not regularly, only occasionally with no on-going schedule.
- No, did not attend ECE.

• **Parent Signature**

• **Principal Signature**

Class Level..... **Teachers Name**..... **Room**.....
(Principal to complete)