



Te Hihi School  
**ENROLMENT FORM**

For

Date of Birth



# Important Dates



## **ENROLMENTS OPEN**

Monday 3 September 2018

## **IN ZONE CLOSING DATE**

Friday 31 August 2018

## **OUT OF ZONE CLOSING DATE**

Wednesday 26 September 2018 4:00pm

## **OUT OF ZONE BALLOT DATE**

Monday 22 October 2018

## **ENQUIRIES**

Visit our website [www.tehihi.school.nz](http://www.tehihi.school.nz) for information on all areas of Te Hihi School.

The school office is open Monday to Friday 8:30 a.m. – 3:30 p.m.

If you have any queries please telephone 09 292 7706 or email [office@tehihi.school.nz](mailto:office@tehihi.school.nz)

## In Zone Enrolment Scheme

Each year In Zone applications for enrolment in the following year will be sought by a date which will be published on our website and in a community newspaper local to the school. This enables the Board of Trustees to assess the number of places that can be available to students who live out of zone.

### IN ZONE ADDRESSES

In conjunction with the Enrolment Scheme, Te Hihi School operates a school zone. All students who live in the schoolzone are entitled to attend Te Hihi School.

The School Zone map can be viewed on our website [www.tehihi.school.nz](http://www.tehihi.school.nz) to gain a pictorial idea of the School's zoning boundaries in addition to a detailed Zone Description. Please also refer to the In-Zone Address List below for boundary and address details.

Kingseat Rd from the junction with Irwin Rd to the junction of Linwood Rd, including Sydney Owen Rd and all roads in the Kingseat Village area.

Linwood Rd from the junction with Kingseat Rd to the junction with Walters Rd and all roads to the north of Linwood Rd.

Charles Rd from the junction with Linwood Rd to the junction with Stan Wright Rd, including Galloway Rd.

Batty Rd from the junction with Linwood Rd to the junction with Irwin Rd and all roads off Batty Rd.

Irwin Rd from the junction with Batty Rd to the junction with Kingseat Rd and all roads off Irwin Rd.

# Out of Zone Enrolment Scheme



Each year the board will determine the number of places that are likely to be available in the following year for the enrolment of students who live out of zone. The Board of Trustees will publish enrolment information on our website and in a community newspaper local to 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.

## FIRST PRIORITY

This priority category is not applicable at the school because the school does not operate a special programme approved by the Secretary for Education.

## SECOND PRIORITY

Will be given to applicants who are siblings of current students of the school.

## THIRD PRIORITY

Will be given to applicants who are siblings of former students of the school.

## FOURTH PRIORITY

Will be given to applicants who are children of a former student of the school.

## FIFTH PRIORITY

Will be given to applicants who are children of Board Employees or children of a member of the Board of the School.

## SIXTH PRIORITY

Will be given to all other applicants.

If there are more applicants in the second, third, fourth, fifth or sixth 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.

## PROCEDURES FOR ENROLMENT

1. Enrolment packs will be available for download from the school's website no later than 1 September 2018
2. Monday 3 September 2018  
Enrolments for 2019 open
3. Enrolment applications for 2019 will be received by email, mail or in person at the office 8:30am – 3:00pm Monday to Friday
4. Applications being mailed should be addressed to:  
  
Te Hihi School  
767 Linwood Rd  
RD 1  
Papakura  
Auckland 2580
5. Wednesday 26 September 2018  
Closing date for Out of Zone applications
6. Wednesday 22 October 2018  
Out of Zone Ballot
7. After the ballot Out of Zone applicants will be notified by mail and email of their place at the school or their position on the waiting list

# Enrolment Application

## STUDENT INFORMATION

MALE                       FEMALE  
 IN ZONE                       OUT OF ZONE                      →

LEGAL SURNAME  
  
 LEGAL FIRST NAMES  
  
 PREFERRED NAME  
  
 CURRENT SCHOOL  
  
 STUDENT MOBILE  
  
 STUDENT EMAIL

## APPLYING FOR ENTRY INTO YEAR

1     2     3     4     5     6     7     8  
 OUT OF ZONE PRIORITY (see previous page)  
 1     2     3     4     5

ETHNICITY  
  
 IWI AFFILIATION  
  
 COUNTRY OF BIRTH                      DATE OF BIRTH  
                        
 NZ FIRST LANGUAGE  
  
 OTHER LANGUAGES  
  
 IMMIGRATION STATUS (please select one)  
 NZ Citizen     NZ Residency     Student Visa     Other

## FAMILY INFORMATION

### PARENT 1

TITLE                      SURNAME  
                        
 HOME ADDRESS  
  
 POST CODE                      PHONE HOME  
                        
 PHONE BUSINESS                      OCCUPATION  
                     

LEGAL FIRST NAMES  
  
 SUBURB                      RELATIONSHIP  
                        
 MOBILE  
  
 EMAIL

### PARENT 2

TITLE                      SURNAME  
                        
 HOME ADDRESS  
  
 POST CODE                      PHONE HOME  
                        
 PHONE BUSINESS                      OCCUPATION  
                     

LEGAL FIRST NAMES  
  
 SUBURB                      RELATIONSHIP  
                        
 MOBILE  
  
 EMAIL

## GUARDIAN / CAREGIVER INFORMATION

### FOR STUDENTS NOT LIVING WITH PARENTS

TITLE                      SURNAME  
                        
 HOME ADDRESS  
  
 POST CODE                      PHONE HOME  
                        
 PHONE BUSINESS                      OCCUPATION  
                     

LEGAL FIRST NAMES  
  
 SUBURB                      RELATIONSHIP  
                        
 MOBILE  
  
 EMAIL

## CUSTODY ACCESS

COURT ORDER ISSUED     YES     NO     N/A

Attach further information as required

# Enrolment Application

## PREVIOUS EDUCATION

### EARLY CHILDHOOD EDUCATION (Pre-school)

Did your child attend one or more Early Childhood Education Centres in the six months prior to starting school  
If your child was attending more than one centre at the same time, please enter the hours per week for **up to three centres**.

If your child attended one centre but changed to a different centre within the six months prior to starting school, please enter the **last centre only**.

#### Type of Centre

Kohanga Reo

Playcentre

Kindergarten or Education Care Centre

Home based

Playgroup

Correspondence School – Te Aho o Te Kura

Pounamu

**ALTERNATIVELY**, please tick the appropriate box

Attended but only outside New Zealand

Attended, but don't know what type of centre

Did not attend

Unable to establish if attended or not

**Centre 1**  
(hrs per week)

**Centre 2**  
(hrs per week)

**Centre 3**  
(hrs per week)

  
  
  
  
  

  
  
  
  
  

  
  
  
  
  

  
  
  


## PREVIOUS SCHOOL

## TE HIHI SCHOOL AFFILIATIONS

### SIBLINGS (CURRENT/FORMER) OR PARENTS WHO ATTENDED TE HIHI SCHOOL

FULL NAME

YEARS ATTENDED



FULL NAME

YEARS ATTENDED



FULL NAME

YEARS ATTENDED



FULL NAME

YEARS ATTENDED



## EMERGENCY CONTACT

### IN EVENT OF EMERGENCY IF PARENT(S) NOT AVAILABLE

TITLE

SURNAME

LEGAL FIRST NAMES




HOME ADDRESS

SUBURB

RELATIONSHIP




POST CODE

PHONE HOME

MOBILE




PHONE BUSINESS

OCCUPATION

EMAIL ADDRESS




## LEARNING / BEHAVIOURAL INFORMATION

DYSLEXIA

ADD/ADHD

AUTISM/ASPERGERS

ANXIETY/DEPRESSION

OTHER LEARNING OR BEHAVIOURAL NEEDS

REGULAR MEDICATIONS

# Medical Information



## IF YOUR SON/DAUGHTER SUFFERS ANY MEDICAL PROBLEMS, PLEASE CONTACT THE SCHOOL TO DISCUSS APPROPRIATE CARE AND TO FORMULATE AN ACTION PLAN.

Has your child had the following vaccinations? If yes, please tick all appropriate boxes.

- M.M.R. (MEASLES, MUMPS, RUBELLA)
  POLIO
  TETANUS  
 HEPATITIS B
  WHOOPING COUGH
  HIB (HAEMOPHILUS INFLUENZA TYPE B)

NAME OF G.P.

PHONE NUMBER

HAS/DOES THE STUDENT SUFFER FROM?			SEVERITY	MEDICATION
Asthma	Yes	No		
Diabetes	Yes	No		
Migraine	Yes	No		
Epilepsy	Yes	No		
Allergy If the answer is yes, what allergies does the student suffer from (e.g. hay fever, food allergies, pet allergies, other?) Requires Epipen?	Yes	No		
	Yes	No		
Any condition that we should know about? If the answer is yes, please explain, e.g. dietary, physical or emotional condition	Yes	No		
I give permission for the school to administer 1 Panadol tablet or liquid if necessary	Yes	No		
I give permission for the school to administer antihistamine tablets if necessary	Yes	No		

## IN CASE OF ILLNESS, ACCIDENT OR EMERGENCY

- If the school is unable to contact me, or if the accident is serious, I give permission for the school or delegate to take my child to Accident and Emergency or doctor.
- I give permission for the school to make such arrangements as are necessary for the treatment of my son/daughter in an emergency and agree to meet any costs incurred.
- I accept that while my child is a student at Te Hihi School it is my responsibility to inform the school of any important medical condition acquired by my child.

NAME OF PARENT/LEGAL GUARDIAN/CAREGIVER

SIGNATURE

DATE



# Authorisations



## PUBLIC USE OF IMAGES

In order to keep our website current, we would like to be able to display photographs of recent school events which may also be included in the newsletter. We need the permission of parents and caregivers to use photographs that may show an image of your child. In most cases, photographs will be of groups.

I GIVE PERMISSION       I DO NOT GIVE PERMISSION

SIGNATURE (PARENT/LEGAL GUARDIAN/CAREGIVER)

DATE

## CODE OF CONDUCT

I/We accept that our child while a student at Te Hihi School will comply with and respect the school's regulations, attendance and uniform requirements and standards of behaviour as set out by the Board of Trustees.

SIGNATURE (PARENT/LEGAL GUARDIAN/CAREGIVER)

DATE

## COLLECTION AND USE OF INFORMATION

I agree to Te Hihi School collecting personal information on

FULL NAME OF STUDENT

Te Hihi School advises that the information I provide may be used for:

Student records for Ministry of Education purposes	Ministry of Social Development purposes to identify possible future employment training or education needs.
Accounting purposes of the Te Hihi School Board of Trustees	Friends of Te Hihi School
NZ Qualification Authority (NZQA)	Special Education Services

I agree that this information may later be used for statistical and/or research purposes and agree to its use for that purpose, provided that if the information is published in any way it will not identify me or the individual concerned. I understand that the information that I provide will be held at the offices of Te Hihi School, 767 Linwood Rd, Karaka, Auckland. I am aware of the rights of access to and correction of this information.

SIGNATURE (PARENT/LEGAL GUARDIAN/CAREGIVER)

DATE

# In Zone Statutory Declaration

(to be completed by in zone applicants only)



You are reminded that to make a false declaration is a criminal offence. 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. The Ministry of Education has advised that parents should 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. For example:

- 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

If Te Hihi 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 a 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 provide a satisfactory explanation within 10 days, the Board will annul the enrolment. This course of action is provided under Section 110(A) of the Education Act 1989. Te Hihi School may actively collect information to ensure that enrolment data provided is accurate.

I  do solemnly declare as follows:

1. That the information contained in this application is true and correct in every respect
2. I confirm that the address which I have provided to Te Hihi School School will be the usual place of residence of

(Student's name) when the school is open for instruction. ie. First day of term 1.

I will advise the school of any subsequent change of address.

I make this solemn declaration conscientiously believing the same to be true and by virtue of the Oaths & Declarations Act 1957.

Declared at Auckland this

SIGNATURE (PARENT/CAREGIVER)

JUSTICE OF PEACE OR SOLICITOR

DAY MONTH YEAR

Details of the above person authorised to make a Statutory Declaration (please tick one)

Justice of the Peace

Solicitor

FULL NAME

ADDRESS

STAMP

# Application Checklist



## ALL APPLICANTS

- Completed Enrolment Application Form
- Copy of Latest School Report (not required for New Entrants)
- Birth Certificate or Passport
- For non-New Zealand students: Passport showing residency or Child and Parent(s) passports with student and work visas

## IN ZONE APPLICANTS

- Statutory Declaration

### Owner Occupied Properties

- Rates/Valuation or Sale & Purchase Agreement, and
- Latest Power Account

### Rental Properties

- Tenancy Agreement showing the date the tenancy commenced and the period, and
- Latest Power Account

## WE REQUIRE ALL DOCUMENTATION TO PROCESS APPLICATIONS

### OFFICE USE ONLY

RECEIVED BY

EMAIL  OFFICE  MAIL

Verification Document

Serial Number

Expiry Date

ENTERED IN E-TAP

ENROL

NSN NUMBER

SIGNATURE

DATE

