



APPLICATION FOR ENROLMENT AS AN INTERNATIONAL STUDENT AT GLENFIELD PRIMARY SCHOOL

Please ensure that all the information is complete and correct. Failure to properly complete the form may result in a delay in processing, or rejection of your application. Failure to provide correct information may result in your child's enrolment being terminated.

Please note that Glenfield Primary School is not permitted to enrol any child who is not living with a parent whilst in New Zealand.

PERSONAL INFORMATION

Please attach the following documentation:

- Passport details (original to be sighted /copy taken)
- Permit/Visa Details
- Birth Certificate (original to be sighted/copy taken)
- Parents passport details
- Parents Visa details
- Health insurance documentation (including dental cover) for the family.
- Health/immunization checklist
- Most recent school reports and examination results
- Administration fee: NZ\$1000 (non-refundable)

Name of Student: _____ (Family name)

_____ (First Name)

Date of Birth: _____ Male / Female

Preferred Name: _____

Address: _____

Ethnicity: _____

Country of Birth: _____

Language spoken at home: _____

Level of English spoken: _____

Date of Entry into New Zealand: _____

Passport Number: _____

Student Visa number and expiry date: _____

Other Visa type and expiry date: _____

Name(s) of any previous school(s) attended in New Zealand:

Dates of Attendance at those schools:

Length of time International Student wishes to enrol for:

from ____/____/____ to ____/____/____

Contact Details of parent/next of kin in home country:

Parents Names: (Mother) _____

(Father) _____

Address in Home Country:

Phone: _____ Email: _____

Details of the parent the international student will live with while attending Glenfield Primary School:

(All students must live with at least one of their biological or adoptive parents while in New Zealand)

Name of Parent: _____

New Zealand Address: _____

Phone: _____ Mobile Phone: _____

Email: _____

Emergency Contact in New Zealand (in case we cannot contact the parents)

Name: _____

Phone; _____ Mobile Phone: _____

MEDICAL AND TRAVEL INSURANCE (see Prospectus for minimum requirements)

Most students are not entitled to publicly funded health services while in New Zealand. Medical and travel insurance is compulsory for international students coming to New Zealand. You will need to provide evidence that you have these policies.

Does the student have a Medical and Travel policy for the duration of his/her time of study in New Zealand.

Yes / No

Insurance company: _____ Policy type: _____

Policy start date: _____ Policy end date: _____

OR (tick)

I have not yet taken out medical and travel insurance, but agree to do so and will provide proof of this to the school on acceptance of this application for enrolment.

Date of entry to New Zealand: _____

HEALTH INFORMATION (PARENTS TO COMPLETE)

International students enrolled at Glenfield Primary School must be in good health.

Does your child have any pre-existing medical conditions or concerns? Yes / No

If Yes please state: _____

New Zealand children are vaccinated against the following diseases. Please circle the ones your child has been vaccinated against and provide immunisation record if available:

Whooping Cough	Diphtheria	Tuberculosis	Tetanus	Measles
Mumps	Rubella (German measles)		Polio	Hepatitis B

Does your child have any allergies or family medical conditions ? (E.g. **food allergies** like peanuts or wheat, or **medical allergies** like penicillin or bee stings): _____

Does your child carry any medication for this allergy? _____

Name any other medication your child requires: _____

Does your child have any other any special health or medical needs?: _____

STUDY INFORMATION

Parents to complete

Please attach your child's most recent school reports **Reports Attached (Please tick)**

Does your child have any specific learning needs or difficulties that could affect their progress?

What is your estimate of your child's level of English? (*Please circle*)

No English

Beginner English

Some English

Fluent

PARENTS TO COMPLETE

STATUTORY DECLARATION

Parent Approvals:

I/We acknowledge that the information supplied is true and correct in every particular and will be relied upon by the School. If found to be false by the School, then the School reserves the right to remove your child.

I/we have read, understood and agree to all conditions of enrolment as stated in the prospectus, and acknowledge that I have received a copy of the conditions of enrolment.

I/we understand that the completion of this application form does not guarantee a place for my child

I/we understand that Glenfield Primary School is a signatory to the Code of Practice, and have read, understood and accept it.

I/we agree that our child shall abide by all School Rules and Regulations and Board of Trustees policies.

I/We agree that all disputes will be dealt with in accordance with New Zealand law.

I/we agree to pay all tuition fees, in advance, as stated in the prospectus, and understand and accept the refund policy of Glenfield Primary School.

Privacy Act – consent:

To meet the requirements of the Privacy Act, we need your permission to manage information about your Child. To assist in this we would like your approval to:

- Authorise a Glenfield Primary School staff member to act on your behalf in any medical/health and safety emergency.
- Authorise Glenfield Primary School to take your child offsite to attend all approved educational visits and trips by charter/private transport.
- Authorise Glenfield Primary School to publish images of your child on the school website, in the school newsletter and year book, and in newspaper and magazine articles covering school activities in accordance with school policy.
- Authorise your child to access the internet in accordance with school policy.
- Collect such data as is relevant to the educational and social needs of your child from the child's previous school or pre-school.
- Pass on such data as is relevant to the educational and social needs of your child to the next school your child attends.
- Collect, whilst your child is attending Glenfield Primary School, such data as is deemed necessary to ensure your child's academic and social needs are met while at this school.
- Allow, with the identity of the individual being protected, such information as is legitimately requested by official government agencies to be passed on to these agencies.
- Allow your child's name and address to be given to the School's Public Health Nurse, Visiting Teacher or other Education/Health agencies in the event that the Principal deems the passing on of this information is in the best interests of the child.
- Allow the educational information gained at the School to be used for research purposes on the condition that the information does not reveal the identity of the individual.
- Authorise Glenfield Primary School to check on the status of your visa using Visa View.(NZ Immigration online service)
- I approve of Glenfield Primary School taking the action listed in the above clauses.

I have read and understood this document

Parent's Signature:_____

Date:_____

Parent's name:_____