



ENROLMENT FORM FOR INTERNATIONAL STUDENTS

PERSONAL DETAILS OF STUDENT			
Student Name			
<i>Surname</i>	<i>Given Names</i>	<i>Name usually called</i> <small><i>This name will appear on certificates</i></small>	
Student address in New Zealand			
<i>Street number and name</i>			
<i>Suburb</i>			<i>Post Code</i>
Date of Birth	Gender	<input type="checkbox"/> Girl	<input type="checkbox"/> Boy
Nationality		Country of Birth	
Permanent Resident of		First Language	
<p>Has the student attended another school in NZ? Yes No (circle one)</p> <p><i>If yes, please advise which school</i> _____</p> <p>What date would you like your child to commence at Mellons Bay School? _____</p> <p>What is the duration of enrolment? From _____ To _____</p> <p>Have you used an Agent? Yes No</p> <p><i>If yes, please complete section xx</i></p> <p>Is the student living with a legally appointed guardian? Yes No</p> <p><i>If yes, please complete section xx below and provide proof of the legally appointed guardian.</i></p> <p>Who is the student's next of kin? Parents Legally appointed guardian (circle one)</p> <p>Who is the emergency contact? Parents Legally appointed guardian Other</p> <p><i>If "other" please complete section xx below</i></p> <p>Who should correspondence be sent to? Parents Legally appointed guardian Other</p> <p><i>If "other" please complete section xx below</i></p>			



MEDICAL DETAILS OF STUDENT

Do you give permission for the child to be given Panadol for a simple headache whilst at school?

Yes

No

If "no" who should we contact to gain permission? _____

Does the student have medical and travel insurance? You must provide proof of insurance at the time of enrolment.

Yes

No

Medical Information

Please list any relevant medical information or special learning/behavioural needs we should be aware of.
For example - Asthma, Allergies, ADHD

Well being information.

Are there any learning or behaviour needs that the school needs to be aware of?

Student needs.

Any questions about the information provided or how we can support the student and family while at Mellons Bay School?

An interpreter can be provided if you require.



PARENT CONTACT DETAILS

Note - One of these addresses must be the same as the student’s address on page one, unless living with a legally appointed guardian. (Please provide full address details including country codes for telephone numbers.)

Important - Any change of address or contact details must be advised to the school immediately.

Father’s Name		
<i>Surname</i>	<i>Given Names</i>	<i>Name usually called</i>
Address		
<i>Street number and name</i>		
<i>Suburb</i>	<i>Post Code</i>	
<i>City</i>	<i>Country</i>	
Phone		
<i>Home</i>	<i>Mobile</i>	<i>Work</i>
Email		

Mother’s Name		
<i>Surname</i>	<i>Given Names</i>	<i>Name usually called</i>
Address		
<i>Street number and name</i>		
<i>Suburb</i>	<i>Post Code</i>	
<i>City</i>	<i>Country</i>	
Phone		
<i>Home</i>	<i>Mobile</i>	<i>Work</i>
Email		



NEXT OF KIN DETAILS		
Next of Kin's Name		
<i>Surname</i>	<i>Given Names</i>	<i>Name usually called</i>
Address		
<i>Street number and name</i>		
<i>Suburb</i>	<i>Post Code</i>	
<i>City</i>	<i>Country</i>	
Phone		
<i>Home</i>	<i>Mobile</i>	<i>Work</i>
Email		
LEGAL GUARDIAN DETAILS		
Legal Guardian's Name		
<i>Surname</i>	<i>Given Names</i>	<i>Name usually called</i>
Address		
<i>Street number and name</i>		
<i>Suburb</i>	<i>Post Code</i>	
<i>City</i>	<i>Country</i>	
Phone		
<i>Home</i>	<i>Mobile</i>	<i>Work</i>
Email		



EMERGENCY CONTACT DETAILS – only used if parent or guardian cannot be contacted

Emergency Contact Name		
<i>Surname</i>	<i>Given Names</i>	<i>Name usually called</i>
Address		
<i>Street number and name</i>		
<i>Suburb</i>		<i>Post Code</i>
<i>City</i>	<i>Country</i>	
Phone		
<i>Home</i>	<i>Mobile</i>	<i>Work</i>
Email		



ACCEPTANCE OF TERMS

Before the student's application can be considered, the following acknowledgements must be signed by a parent or legal guardian of the student:

1. I agree to abide by the rules and policies of the school at all times.
2. I accept the right of the school to determine an appropriate course of instruction and change this course if this is considered to be in the student's best interests.
3. I have read, understood and signed the attached tuition agreement which shall apply if my application is successful.

Signed _____ Date _____

Full Name _____

Relationship to Student _____

Address _____

Phone _____ Email _____

Please Note:

An offer of course placement will be based on an assessment by the School of the extent to which the proficiencies and aspirations of the Student are matched by the educational opportunities offered by the School. Should your application be successful, you will receive a letter of offer ("Offer of a Place"). However you will need to pay the necessary fees before a visa will be granted. If you accept the offer of a place then this application for tuition and the attached tuition agreement shall be the terms and conditions of agreement by which tuition shall be provided to the student. The terms must be signed by a parent or guardian as the student is under the age of 20 years. The parent or guardian shall be bound by these terms and conditions.

Please hand or post to:

Mellons Bay School
140 Mellons Bay Road
Howick, 2014,
Auckland
New Zealand
Phone 0064 9 534 4363
Email helenc@mellonsbay.school.nz

Check List

- I have enclosed the following:
- Passports
 - Signed Tuition Agreement
 - Fees
 - Proof of Medical and travel insurance
 - Proof of Legal

Office Use Only

Class Level _____ Year _____ Room No _____ Starting Date _____

Amount Paid \$ _____ (GST incl) for the period: _____ Receipt No: _____ Date pd: _____

Amount Paid \$ _____ (GST incl) for the period: _____ Receipt No: _____ Date pd: _____

Enrolment No: _____

Visa/permit verified and copies retained