

# BAYFIELD HIGH SCHOOL

## ENROLMENT FORM



Enrolling in Year 9 10 11 12 13

Start Date: .....

### STUDENT

Legal Surname ..... Legal First Names .....  
(Block letters) (Including middle names)

Preferred Name ..... Date of Birth ..... Male  Female

Address .....  
(Street) (Suburb)

.....  
(City) (Post Code) (Phone)

Student Lives with: Both Parents  Mother  Father  Caregiver

### CAREGIVER 1 DETAILS

Mother / Father / Step-Mother / Step-Father / Other .....

Surname ..... First Name .....(Dr / Mr / Mrs / Miss / Ms)

Street Address .....

Suburb ..... City ..... Post Code .....

Home Phone ..... Work Phone .....

Cellphone ..... Email .....

Occupation .....

### CAREGIVER 2 DETAILS

Mother / Father / Step-Mother / Step-Father / Other .....

Surname ..... First Name .....(Dr / Mr / Mrs / Miss / Ms)

Street Address .....

Suburb ..... City ..... Post Code .....

Home Phone ..... Work Phone .....

Cellphone ..... Email .....

Occupation .....

**EMERGENCY CONTACT** (If Caregiver 1 and Caregiver 2 unavailable)

Relationship to student .....

Full Name .....

Home Phone ..... Work Phone .....

Cellphone ..... Email .....

**OTHER STUDENT DETAILS**

A copy of your child's birth certificate / passport must be provided with your enrolment form.

Previous School ..... Class Teacher .....

Ethnicity (up to 3): NZ European  Maori  Pacific Island  Cook Island  Other .....

If Maori, please state Iwi if known (i) ..... (ii) ..... (iii) .....

Residency / Citizenship? Yes  No  If No, what date did you enter New Zealand .....

Country of birth: .....

A copy of the student's passport, and a parent's passport, must also accompany the application.

What is the main language spoken at home: English  Other .....  
(Please specify)

**FAMILY HISTORY**

Brothers / sisters who are attending or who have attended Bayfield High School Yes  No

Name(s) ..... House: .....  
Anderson/Begg/Herron/Ross/Somerville

Are there any specific access / custody orders that the school should be aware of? Yes  No

Are there any other community agencies, e.g. CYFS, Mirror Counselling, Youth Specialty Services, Youth Aid, involved in supporting this student. Yes  No  If yes, please give details or attach a separate letter.

**MEDICAL DETAILS**

Allowed Panadol: Yes  No  Please list any medical problems and information the school should be aware of:

Doctor ..... Medical Centre ..... Phone .....

**EDUCATIONAL INFORMATION**

Please attach a copy of your child's latest school report, or complete the following:

Place a 'x' on the line to indicate your estimate of your child's ability for reading, writing, and mathematics.

Reading Ability: Needs Support \_\_\_\_\_ Avid Reader  
Writing Ability: Needs Support \_\_\_\_\_ Articulate Writer  
Mathematics: Needs Support \_\_\_\_\_ Talented Mathematician

Are there any identified learning needs, e.g. ADHD, dyslexia, dysgraphia? Yes  No   
If Yes, please provide a copy of any specialist reports.

**CO-CURRICULAR INVOLVEMENT**

Which sports has this student been involved with prior to enrolling at Bayfield High School?

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Level of Achievement .....

Which sports would they like to be involved with at Bayfield High School?.....

.....

What music, dance, drama or other performing arts activities has this student been involved with prior to enrolling at Bayfield High School?

.....

Level of Achievement .....

Which music, dance, drama or other performing arts activities would they like to be involved with at Bayfield High School?

.....

**STUDENTS ENROLLING FROM ANOTHER HIGH SCHOOL**

Name of School ..... NSN Number .....

Copies provided of previous reports and credits achieved from your previous school Yes  No

Subjects currently taken at previous school .....

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## FINANCIAL AND ADMINISTRATIVE INFORMATION

Invoices / Accounts are to be sent to: Both parents  Father only  Mother only  Caregiver only  Other

Other (Please give details) .....

If accounts are to be split for payment, please state how you would like this to be done:

.....

Reports / Newsletters are to be sent to: Both parents  Father only  Mother only  Caregiver only  Other

Other (Please give details) .....

## STUDENT UNDERTAKING

Please tick:

- I request that I be admitted to Bayfield High School.
- I agree to abide by the school's expectations for behaviour, work completion, attendance, and uniform.

Signed ..... Date .....

## PARENT / CAREGIVER UNDERTAKING

Please tick:

- I agree to support the school's expectations for behaviour, attendance, homework, uniform and all other matters concerning the welfare of my son / daughter at Bayfield High School.
- I give consent to my child's photograph and / or school work being used by the school for the purpose of promotion within the school newsletter, newspaper, magazine, website or other promotional advertising.
- I agree to pay all compulsory fees associated with selected course and take home components. I agree that minor school related costs such as for travel to Athletic Sports or the cost of a Student Diary may be added to my account when applicable. All compulsory school fees and charges are to be paid in full before the end of term one, unless alternative arrangements have been agreed to by the school. Unpaid accounts will be referred to a collections agency. All costs incurred in the collection of overdue accounts will be payable by the parents / caregivers.

Address and phone number details are collected at the time of enrolment and during the student's time at school so that the school can contact the parent or student as necessary. These contact details, students' qualifications, career aspirations and / or tertiary study plans may also be passed on to the Ministry of Education, the Ministry of Social Development (MSD) or other relevant agencies. This is so young people who may have difficulty finding future employment, training or further education can be identified and offered support by organisations contracted by MSD to help re-engage young people in education or training when they leave school.

Have other agencies, other than school, assisted your child's learning? e.g. RTLB service, Special Education, Kip McGrath, SPELD, Number Works n Words.

Family circumstances may change in the course of a year. The more up-to-date information we have, the better. Please notify the school of any changes to a living arrangement, address, contact number or health issue AS SOON AS POSSIBLE by a note or email to the school.

Signed ..... Date ..... Relationship to Student .....