



LEVEL ENROLLING FOR:  Year 10  Year 11  Year 12  Year 13

The following priorities for Out-of-Zone enrolment apply as directed by the Ministry of Education guidelines.  
Please indicate which priority you are applying under (tick only one).

- SE Student accepted for enrolment in a special programme  
 SC Sibling of student currently enrolled at Avondale College  
 SP Sibling of former student of Avondale College  
 CP Child of former student of Avondale College  
 BE Child of employees of the Avondale College BOT  
 OZ All other applicants.

Return this completed form, together with photocopied documents  
**NO LATER THAN 4:00pm**  
**Wednesday 29 Aug 2018**

**1. STUDENT DETAILS**

Last Name \_\_\_\_\_ NSN number \_\_\_\_\_

Official First Name \_\_\_\_\_ Gender (circle one) Male / Female

Official Middle Name(s) \_\_\_\_\_ Country of Citizenship \_\_\_\_\_

Preferred Name \_\_\_\_\_ Country of Birth \_\_\_\_\_

Date of Birth \_\_\_\_\_ Ethnic Group *(If NZ Maori you must request and fill in the Iwi Declaration Form)*

*NB: If you are living with a Caregiver you must also request and fill in the Supplementary Enrolment Application Form.*

Street Address \_\_\_\_\_ First Language \_\_\_\_\_

Suburb \_\_\_\_\_ Permanent Residence in New Zealand Yes / No

City \_\_\_\_\_ Postcode \_\_\_\_\_ Date of Arrival in New Zealand \_\_\_\_\_

Home Telephone \_\_\_\_\_ Refugee Status Yes / No Quota / Other

Current School \_\_\_\_\_

Brother/Sister currently at Avondale College \_\_\_\_\_

Brother/Sister previously at Avondale College \_\_\_\_\_

**2. FATHER/GUARDIAN DETAILS**

First Name \_\_\_\_\_ Occupation \_\_\_\_\_

Last Name \_\_\_\_\_ Home Telephone \_\_\_\_\_

Street Address \_\_\_\_\_ Mobile Telephone \_\_\_\_\_

Suburb \_\_\_\_\_ Email Address \_\_\_\_\_

City \_\_\_\_\_ Postcode \_\_\_\_\_ Business Telephone \_\_\_\_\_

**3. MOTHER/GUARDIAN DETAILS**

First Name \_\_\_\_\_ Occupation \_\_\_\_\_

Last Name \_\_\_\_\_ Home Telephone \_\_\_\_\_

Title (circle one) Mrs / Miss / Ms \_\_\_\_\_ Mobile Telephone \_\_\_\_\_

Street Address \_\_\_\_\_ Email Address \_\_\_\_\_

Suburb \_\_\_\_\_ Business Telephone \_\_\_\_\_

City \_\_\_\_\_ Postcode \_\_\_\_\_

**4. EMERGENCY DETAILS** *(Alternative contact if parents can't be reached)*

First Name \_\_\_\_\_ Home Telephone \_\_\_\_\_

Last Name \_\_\_\_\_ Mobile Telephone \_\_\_\_\_

Relationship to Student \_\_\_\_\_ Business Telephone \_\_\_\_\_

## 5. COMMUNICATIONS

Correspondence and reports to be posted to: (choose one):  Both parents  Mother  Father  Caregiver

Email address for accounts/statements (Please list one only) \_\_\_\_\_

Mobile number for SMS texts should there be an unexplained absence or College emergency: \_\_\_\_\_

## 6. OPTION SELECTION 2018 Use the Academic Programme booklet to choose the subjects you wish to study:

| SUBJECT | YEAR LEVEL | CODE |
|---------|------------|------|
|         |            |      |
|         |            |      |
|         |            |      |
|         |            |      |
|         |            |      |

## 7. SPECIALIST LEARNING

Has your child ever been part of a specialist learning programme? Gifted/Talented  RTLB  ESOL  Other

Details \_\_\_\_\_

## 8. DECLARATIONS AND SIGNATURES

1. Has the student ever been stood down/suspended/excluded or expelled from another school? Yes  No

2. If the answer is yes, please provide further information: \_\_\_\_\_

3. I agree to all details listed, in sections 1-3, being given to the New Zealand Qualifications Authority for examination purposes.

4. I wish to make an application for my child to enrol at Avondale College. I understand the conditions in the Prospectus and agree to abide by them. In particular I/we agree that:

- i) The College uniform will be worn fully and correctly
- ii) The behavioural expectations of the College will be upheld
- iii) All course fees, curriculum related fees and co-curricula fees will be paid
- iv) My child will play his/her sport for the College

8. I consent to this information being made available as necessary for related education purposes in terms of the Privacy Act 1993.

9. The family and student confirm that all of the information provided in this application is true and correct

10. The family and student confirm they have been advised that any false or misleading information that is provided may result in an offer of enrolment being withdrawn, or enrolment terminated, or the matter being referred to the Board of Trustees.

Mother / Guardian Signature \_\_\_\_\_ Father / Guardian Signature \_\_\_\_\_

Student's Signature \_\_\_\_\_ Date \_\_\_\_\_

## 9. COMPLETING THE ENROLMENT FORM

These attachments must be supplied with the enrolment form. We prefer to sight original documents when this application is lodged with Avondale College's receptionist. **If mailing this application, please ensure all documents are CERTIFIED PHOTOCOPIES as we are unable to return any items.**

- Latest school report
- Proof of in-zone address (a power bill)
- Birth Certificate
- Passport page showing student's name, date and place of birth (if not born in New Zealand)
- Evidence of Permanent Residency or Citizenship (if not born in New Zealand)
- Student Visa (if applicable)
- Evidence of refugee status (if applicable)

### OFFICE USE

|                                     |       |
|-------------------------------------|-------|
| Enrolment Officer:                  | _____ |
| Expiry Date of Work Visa/Permit:    | _____ |
| Expiry Date of Student Visa/Permit: | _____ |
| Date of Arrival in New Zealand:     | _____ |
| Entry Date to Avondale College:     | _____ |
| Signature of Enrolment Officer:     | _____ |
| Date:                               | _____ |