



Auckland Normal Intermediate School

2018 Enrolment Instructions

DOCUMENTATION REQUIRED

In-Zone Enrolment Applications	Section 1 and Section 3 (see below)
Out-of-Zone Enrolment Applications	Section 2 and Section 3 (see below)

SECTION 1: IN-ZONE ENROLMENT APPLICATIONS

- (a) Applications for students currently living In-Zone should be received by Friday 25 August 2017.
(b) Documents to be submitted with In-Zone Enrolment Application:

PROOF OF ADDRESS:

- Sale and Purchase Agreement or Rates or Current Tenancy Agreement

PROOF OF IDENTITY:

NZ born students:

- Full Birth Certificate or Passport Details Page

Students born outside NZ:

NZ Citizens

- NZ Passport Details Page or Citizenship Certificate

All Other Nationalities

- Passport Details Page and
 Residency Permit or Student Visa together with parents passport details page and Visa/Permit
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SECTION 2: OUT-OF-ZONE ENROLMENT APPLICATIONS

- (a) Applications for students living Out-of-Zone must be received no later than 3:00pm Wednesday 30 August 2017.
(b) Out-of-Zone Ballot:
Opens on Monday 1 May 2017
Closes on Wednesday 30 August 2017, 3:00pm
Drawn on Wednesday 6 September 2017
(c) Documents to be submitted with the Out-of-Zone Enrolment Application:

PROOF OF IDENTITY:

NZ born students:

- Full Birth Certificate or Passport Details Page

Students born outside NZ:

NZ Citizens

- NZ Passport Details Page or Citizenship Certificate

All Other Nationalities

- Passport Details Page and
 Residency Permit or Student Visa together with parents passport details page and Visa/Permit
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SECTION 3: SUBMITTING ENROLMENT APPLICATION

(A) ONLINE

1. Complete online Enrolment Application
2. Email completed form to enrolments@ani.school.nz

(B) HARDCOPY

1. Complete Enrolment Application
2. Bring completed Enrolment Application, original documents and **ONE PHOTOCOPY OF EACH DOCUMENT** to the ANI school office.

All enrolments will be acknowledged by email. We look forward to receiving your 2018 In-Zone enrolment.



Auckland Normal Intermediate School

2018 Enrolment Application

IN-ZONE OUT-OF-ZONE

STUDENT DETAILS Male Female

Year Level in 2018: Year 7 Year 8

Legal Surname:

Date of birth:

Legal First Name:

Country of birth:

Preferred First Name:

Ethnicity:

Middle Name:

Nationality (passport):

Address:

NZ Residency:

Postal Code:

If not NZ born, date of arrival in NZ:

Home Phone:

Language spoken at home:

Present School:

Other languages:

Iwi (NZ Māori):

Date started at Primary School:

IMPORTANT:

Please indicate who the FIRST point of contact is for your child: Caregiver #1 Caregiver #2 (please tick one only)

All communication with caregivers is via email and mobile phone. It is essential that the school is provided with a valid and current email address and mobile phone number where a message can be left.

CAREGIVER #1 DETAILS Living with child: Yes No

Access: Yes No

Relationship to child:

Title: Dr Mr Mrs Ms Miss

Surname:

Home Phone:

First Name:

Mobile Phone:

Address:

Work Phone:

Postal Code:

Company:

Email:

Occupation:

CAREGIVER #2 DETAILS Living with child: Yes No

Access: Yes No

Relationship to child:

Title: Dr Mr Mrs Ms Miss

Surname:

Home Phone:

First Name:

Mobile Phone:

Address:

Work Phone:

Postal Code:

Company:

Email:

Occupation:

MEDICATION CONSENT INFORMATION

In an emergency school may act on behalf: Yes No

School may administer the following pain relief: PANADOL Yes No

ANTI-HISTAMINE Yes No

STREPSILS Yes No

MEDICAL CONDITIONS AND ALLERGIES

Does your child have any medical issues/treatments we need to know about? Yes No

Medical Condition #1:

Severity: (please tick) Hospitalisation Emergency Care required Contact Caregivers Moderate Risk Low Risk

Is medication held at school? Yes No **Name of medication:**

Have you submitted an action plan? Yes No

Medical Condition #2:

Severity: (please tick) Hospitalisation Emergency Care required Contact Caregivers Moderate Risk Low Risk

Is medication held at school? Yes No **Name of medication:**

Have you submitted an action plan? Yes No

OTHER INFORMATION

Please advise if there are any particular needs your child may have, e.g. health and/or academic (e.g. Cognitive or Psychological Report)

EMERGENCY CONTACTS

This information is very important should your child fall ill at school and we are unable to contact you.

PLEASE NOTE: THESE CONTACTS CANNOT BE THE STUDENT'S PARENTS/CAREGIVERS.

Male Female

Surname:

First Name:

Relationship to child:

Male Female

Surname:

First Name:

Relationship to child:

Home Phone:

Mobile Phone:

Work Phone:

Home Phone:

Mobile Phone:

Work Phone:

In the event of the school being unable to contact any of the above I authorise the obtaining on my behalf any medical assistance, (if, in the opinion of the staff, such treatment is necessary), and agree to meet any costs incurred. In the event of a serious accident an Ambulance will be called. Yes

UNIFORM

All children will wear prescribed school uniform as scheduled in the School Prospectus on the school website.

FINANCIAL REQUESTS

In 2018 we will request two financial payments. One is a donation, the other a compulsory cost. The school donation is a voluntary payment and the take home materials and class trips/activities payment is a compulsory cost.

You will be provided with detailed information about what is included in these costs via the website and in our enrolment pack.

By signing this enrolment form you acknowledge that we will be making these requests.

PRIVACY INFORMATION

The information requested by Auckland Normal Intermediate in this form will be used for the following purposes:

- To facilitate the operation and administration of the school
- To maintain contact with parents
- To provide information to the Board of Trustees, Parent/Teacher Association, Ministry of Education, Special Education Services and emergency services
- In an emergency, information from the file may be given to an agency such as the Police or Doctor.

(You have the right to access the information which the school holds about your child)

I give permission for my child's visual image to be used for educational purposes in:

School Publications: Yes No School Website: Yes No

ENROLMENT IS DEPENDENT ON

- Personal details provided at the time of pre-enrolment being accurate
 - Any changes to details in this application have been notified to the school in writing
 - All pre-enrolment procedures have been completed, formally acknowledged and accepted by the School
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IN-ZONE RESIDENCE (COMPLETE ONLY IF YOU LIVE IN-ZONE)

A. I understand that students accepted under the In-Zone criteria will be expected to remain within the In-Zone while attending the school. ANI expects that if children accepted as In-Zone students move Out-of-Zone, they will enrol at their new local school.

B. Auckland Normal Intermediate expects that if parents intend to change their address they will immediately inform the school.

I/We certify that the information given in this application form is correct and I/We have read and understood the conditions of In-Zone Residence. Yes

Note: To make a false declaration is a criminal offence.

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 ongoing basis.

If the 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 of Trustees may review the enrolment. Unless the parents can give a satisfactory explanation within 14 days, the Board may annul the enrolment. This course of action is provided for under section 110A of the Education Act 1989. **The school retains the right to make all inquiries necessary in its opinion to obtain information that may assist it to reach a decision.**

Signed: _____
Parent/Caregiver

Date: _____

Child's Name: _____