



# Auckland Normal Intermediate School

## 2021 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 September 2020. (*Note: Applications submitted early assist us with class placement*)
- (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

### SECTION 2: OUT-OF-ZONE ENROLMENT APPLICATIONS

- (a) Applications for students living Out-of-Zone must be received no later than 3:00pm Wednesday 2 September.
- (b) Out-of-Zone Ballot:  
Closes on Wednesday 2 September, 3:00pm  
Drawn on Wednesday 9 September
- (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

All applications for enrolment from students who live Out of Zone will be processed in the following order of priority **(please tick which Priority you are applying under):**

- First Priority  
Will be given to applicants who are siblings of current students of the school
- Second Priority  
Will be given to applicants who are siblings of former students of the school
- Third Priority  
Will be given to applicants who are children of former students of the school
- Fourth Priority  
Will be given to applicants who are children of Board employees or children of a member of the Board of Trustees at the School
- Fifth Priority  
Will be given to all other applicants

Comments (full names of those who have studied or are studying at ANI):

### SECTION 3: SUBMITTING ENROLMENT APPLICATION

#### (A) ONLINE

1. Complete online Enrolment Application
2. Email completed Enrolment Application and documents to [enrolments@ani.school.nz](mailto:enrolments@ani.school.nz)

#### (B) HARDCOPY

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

All enrolments will be acknowledged by email. We look forward to receiving your 2021 enrolment.

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## UNIFORM

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

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## FINANCIAL REQUESTS

In 2021 we will request three financial payments. The first is a school donation and this is a voluntary payment. The second request is payment for class trips/activities and Education Perfect. The final request we ask for is a contribution to the take home materials your child will use in technology. You will be provided with detailed information via the website and in our enrolment pack. By signing this enrolment form you acknowledge that we will be making these requests.

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## 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

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## 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 having 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: \_\_\_\_\_



# Auckland Normal Intermediate School

## 2021 Enrolment Application

IN-ZONE  OUT-OF-ZONE

**STUDENT DETAILS**  Male  Female

**Year Level in 2021:**  Year 7  Year 8

Legal Surname: \_\_\_\_\_

Legal First Name: \_\_\_\_\_

Preferred First Name: \_\_\_\_\_

Middle Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Postal Code: \_\_\_\_\_

Home Phone: \_\_\_\_\_

Present School: \_\_\_\_\_

Date started at Primary School: \_\_\_\_\_

Language spoken at home: \_\_\_\_\_

Date of birth: \_\_\_\_\_

Country of birth: \_\_\_\_\_

Ethnicity (up to 4 allowed): \_\_\_\_\_

Iwi (NZ Māori) (up to 3 allowed): \_\_\_\_\_

Nationality (passport): \_\_\_\_\_

NZ Residency: \_\_\_\_\_

If not NZ born, date of arrival in NZ: \_\_\_\_\_

Verification Document: \_\_\_\_\_

Document Expiry Date & Serial No.: \_\_\_\_\_

Eligibility Criteria: \_\_\_\_\_

Other languages: \_\_\_\_\_

### 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

Underline those Applicable: Legal Guardian / Emergency Contact / Notice Recipient / Data Access / Bill Payer / Voting Right

Relationship to child: \_\_\_\_\_

Surname: \_\_\_\_\_

First Name: \_\_\_\_\_

Address: \_\_\_\_\_

Postal Code: \_\_\_\_\_

Email: \_\_\_\_\_

Title:  Dr  Mr  Mrs  Ms  Miss

Home Phone: \_\_\_\_\_

Mobile Phone: \_\_\_\_\_

Work Phone: \_\_\_\_\_

Company: \_\_\_\_\_

Occupation: \_\_\_\_\_

**CAREGIVER #2 DETAILS** Living with child:  Yes  No Access:  Yes  No

Underline those Applicable: Legal Guardian / Emergency Contact / Notice Recipient / Data Access / Bill Payer / Voting Right

Relationship to child: \_\_\_\_\_

Surname: \_\_\_\_\_

First Name: \_\_\_\_\_

Address: \_\_\_\_\_

Postal Code: \_\_\_\_\_

Email: \_\_\_\_\_

Title:  Dr  Mr  Mrs  Ms  Miss

Home Phone: \_\_\_\_\_

Mobile Phone: \_\_\_\_\_

Work Phone: \_\_\_\_\_

Company: \_\_\_\_\_

Occupation: \_\_\_\_\_

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## SCHOOL TRIPS AND ACTIVITIES

During term time, as part of the school's curriculum programme, trips, cultural activities and sporting events are organised by the school. On these occasions, students will travel either by bus, van, private car or by foot. For each event, risk management assessments are completed and if additional supervision is required, the school arranges parent helpers to ensure student safety. The school is required to have written permission from parents and caregivers for their child to attend a school trip or activity. In place of obtaining parent/caregiver permission for each individual excursion and to allow some flexibility for the occasional brief impromptu local outing, we request your generic permission approval to cover all locally based trips and activities. This would provide permission for your child to attend events held in the local and Auckland area.

I have read the above statement and give permission for school trips and activities and I agree to these policies and conditions.

Student name \_\_\_\_\_

Parent /caregiver name \_\_\_\_\_

Signed \_\_\_\_\_

Date \_\_\_\_\_

## MEDICAL CONSENT FORM

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

### EMERGENCY CONTACTS

Please provide TWO emergency contacts other than parents/caregivers, which we already have on your enrolment form.

Emergency contact #1

Gender:

Full name:

Relationship to the child:

Phone number:

Emergency contact #2

Gender:

Full name:

Relationship to the child:

Phone number:

### MEDICAL INFORMATION

Doctor's Name:

Medical Centre & Address:

Doctor's Phone No.:

### OTHER INFORMATION

Please advise if there are any particular needs your child may have, e.g. health and wellbeing (Note: Academic information and needs will be collected at the one-on-one interview with a member of the Senior Leadership Team)