** PUPIL ENROLMENT FORM**

**Please note all enrolments must provide a passport or birth certificate.**

**This enrolment form must be completed in full.**

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| **PUPIL INFORMATION** | | | | | | | |
| **LEGAL PUPIL SURNAME** | | **BIRTHDATE**  **/ /**  ***Copy of birth certificate required*** | **GENDER** | | | **CURRENT CLASS LEVEL**  **YEAR:** | |
| **LEGAL FIRST NAMES** | |
| **PREFERRED FIRST NAME** | | **ELDEST CHILD AT THIS SCHOOL:** YES / NO | | | | | |
| **IWI/ HAPU** | | **PLACE IN FAMILY** | | | | | |
| **ETHNICITY** | | **PREVIOUS SCHOOLS** | | | **LANGUAGES SPOKEN** | | |
| **PRIMARY CAREGIVER’S NAME AND ADDRESS (including postcode)** | |
| **PHONE** | |
| **MOBILE** | |
| **WORKPLACE** | |
| **EMAIL** | |
| **CITIZENSHIP** YES / NO | | **Names of brothers/sisters (including step/half siblings) likely to attend Hampden Street School in the future.** | | | | | |
| **RESIDENCY** YES / NO | |
| If no *(please bring passport / visa with you)*:  **DATE OF NZ ENTRY: / /** | | **NAME** | | | | | **BIRTHDATE** |
|  | | | | | **/ /** |
| **COUNTRY OF BIRTH:** | |  | | | | | **/ /** |
|  | | | | | **/ /** |
| **Residency Permit Provided**  YES / NO | |  | | | | | **/ /** |
| **Domestic Student Visa Provided** YES / NO | |  | | | | | **/ /** |
|  | |  | | | | |  |
| **ADDITIONAL PARENT / CAREGIVER CONTACT INFORMATION** | | | | | | | |
| **SURNAME** |  | **NAME/S of LEGAL GUARDIANS: (1)**  **(2)** | | | | | |
| **FIRST NAMES** |  | **CUSTODY / ACCESS ARRANGEMENTS** *(If applicable)* | | | | | |
| *If different from above, please complete:* | |
| **ADDRESS** |  | **CUSTODY ORDER ISSUED:**  **Please provide a copy.** | | YES / NO | | | |
| **PHONE** *(landline)* |  | **PROVIDE TWO ADDITIONAL EMERGENCY CONTACTS** | | | | | |
| **MOBILE** |  | **NAME** | | **NAME** | | | |
| **WORKPLACE** |  | **RELATIONSHIP** | | **RELATIONSHIP** | | | |
| **EMAIL** |  | **PHONE** | | **PHONE** | | | |
|  | | **MOBILE** | | **MOBILE** | | | |

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **HEALTH** | | | | | | | |
| **ALLERGIES** | |  | | | **SERIOUS PROBLEMS** | | |
| **MEDICATION** | |  | | |
| **SPEECH** | |  | | |
| **HEARING** | |  | | |
| **VISION** | | **I consent to my child’s vision being tested YES / NO** | | |
| **IMMUNISED** | | **YES / NO** | | | **DOCTOR:** | | |
| **IMMUNISATION CERTIFICATE:** *Please supply a copy with this enrolment form.* | | | | | | | |
|  | | | | | | | |
|  | | | | | | | |
| **LEARNING SUPPORT** | | | | | | | |
| **EARLY CHILDHOOD EDUCATION** | | | | | **OTHER DETAILS** *(if applicable)* | | |
| Centre attended before starting school: | | |  | | **SPECIAL NEEDS**  (Funding/background eg –ELL, ORRS) |  | |
| **YES / NO** | ***Attended a type of early childcare education*** | | | |
| **Circle one** | ***Kindergarten, Playcentre, Education & Care/ Home based service, Pre-school, Kohanga Reo, Pacific Islands EC Group or Playgroup, other*** | | | | **LEARNING NEEDS**  (If yes please explain) | **YES / NO** | |
| **How many hours per week did your child attend Early Childhood Education*?\_\_\_\_\_\_\_\_\_\_\_*** | | | | |
| **How long did they attend Early Childhood Education?**  **( eg. 1 year)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** | | | | | **BEHAVIOUR**  **ISSUES**  (If yes please explain) | **YES / NO** | |
|  | | | | | | | |
| **PARENT APPROVALS AND PERMISSIONS** | | | | | | | |
| I give permission for my child to visit places within walking distance of Hampden Street School. | | | | | | | **YES / NO** |
| Images of our students (photographs, video clips, etc), and examples of their schoolwork, are sometimes published in our newsletters, on our school website, in our school magazine and other online channels such as the school/class blogs, Facebook page, YouTube, etc. The purposes of publishing student material are to educate our students according to the national curriculum, to encourage students to participate in our school community, and to promote the school. We believe it is important to celebrate children’s achievement but are aware of the potential risks when such personal information or material is published on a global information system such as the Internet. In the interest of safety and security we require parents to give permission for their child’s name, image, or work to be made public. With consent, we share no more than a student’s first name with their image, or work in the school newsletter, on the school website, or in the wider online community. We will share full names of students who receive awards without an image.  I give permission for my child’s first name and image, full name or work to be published in the school newsletter and school magazine, on the school website, or the wider online community. | | | | | | | **YES / NO** |
| I have signed the attached Digital Citizen Treaty for my child. | | | | | | | **YES / NO** |
| I give permission for paracetamol to be administered for pain relief if required. | | | | | | | **YES / NO** |
| I agree that the school will take action on my behalf in case of sudden illness or injury. | | | | | | | **YES / NO** |
| I agree to abide by school policies (these are accessible on our website). | | | | | | | **YES / NO** |
| ***Parent Signature:*** | | | | *To be signed when you arrive at the school* | | | **/ /** |
| ***Privacy Statement****: the information collected will be used by the school for enrolment and forms and essential part of the information held by the school on your child. The records made from this information may be viewed on request at the school.*  *The information collected may be disclosed to appropriate education, health and welfare authorities, and for data-gathering purposes by the New Zealand Ministry of Education, in accordance with the principles of the Privacy Act. It will not be disclosed to any other person or agency unless such disclosure is authorised or required by law.* | | | | | | | |

**Please email to the School Office:** [**office@hampdenstreet.school.nz**](mailto:office@hampdenstreet.school.nz)

**OFFICE USE ONLY**

**Xero Emergency Folder In Zone Custody / Parenting Order Birth Certificate/Passport Digital Citizen Treaty**

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| --- | --- | --- |
| **NSN:** | **ROOM:** | **ENROLMENT NUMBER:** |
| **TEACHER:** | | **START DATE: / /** |