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ABERDEEN SCHOOL ENROLMENT PACK

Dear Parent

Kia ora – welcome to Aberdeen School. This enrolment form helps us with the legal processes all schools must undertake to enable your child to start school.

You need to provide for us (no evidence no enrolment):

1. A Birth Certificate or Passport.
2. Proof of home address - TWO items required – A utility account AND a purchase/rental Agreement .
(not a bank statement)
3. Health information – immunisations, allergies, special medical information etc...

Please fill out all the details you can, or we can help you do this

Student Details <input type="radio"/> Male <input type="radio"/> Female		Place in Family ____ of ____
LEGAL NAMES as written on Birth Certificate or Passport		
Surname:		First Name/s:
PREFERRED NAMES We will know your child by at our school (often known as alias)		
Surname:		First Name/s:
Date of Birth: / / day/month/year		
Student's Home Address:		
		Post Code:
Phone:	Mobile:	Email:
Ethnicities which ethnic group does your child identify with:		
<input type="radio"/> NZ Maori		Please specify iwi: _____
<input type="radio"/> NZ European		
<input type="radio"/> NZ Pasifika – Please write which island ethnicity:		
<input type="radio"/> Other (please write)		Nationality:
1 st Language spoken at home:		2 nd :
If first language is not English, Parents Country of Birth (Copy of passport required)		
NZ Residency Status - Students not born in New Zealand		
Indicate the category which applies to this application Students not born in New Zealand must present original documentation – passport and visa – to the school office with this enrolment form before the enrolment can be accepted and processed.		
Country of Birth:		Cultural/Ethnic Identity:
Arrival date in New Zealand:		Religion (Optional)
<input type="radio"/> Passport – (Copy)		<input type="radio"/> New Zealand / Australian Birth Certificate
<input type="radio"/> Student Visa (Copy)		<input type="radio"/> Parent Work Visa – (Copy)
<input type="radio"/> Refugee – (Copy)		
OFFICE USE ONLY		Checklist
Year Level :		Date of Birth Verified: Yes/No
Room: Teacher:		Immunisation details Yes/No
Enrolment Number:		In Zone Yes/No
Clan:		Evidence Type sighted:
Date of Entry – Aberdeen:		Out of Zone – Reason -
Date First Entry to School:		Contact details supplied
Previous School attended:		Signed:

Contact Information – please provide 3-4 contacts for your child

1st Contact Person

Surname: _____ Mrs. Miss. Ms. Mr.

First Name: _____

Relationship to student: _____

Address: _____

Postcode: _____

Living with child: Yes No

Phone: _____

Mobile: _____

Email: _____

Occupation: _____

Work Phone: _____

2nd Contact Person

Surname: _____ Mrs. Miss. Ms. Mr.

First Name: _____

Relationship to student: _____

Address: _____

Postcode: _____

Living with child: Yes No

Phone: _____

Mobile: _____

Email: _____

Occupation: _____

Work Phone: _____

Alternate Contacts-Not child's Parents- at least 2 please

Name: _____
Relationship to child: _____
Phone No: _____

Name: _____
Relationship to child: _____
Phone No: _____

Name: _____
Relationship to child: _____
Phone No: _____

Other Family Details (these help us plan for the future)

Names of younger brothers or sisters / whanau likely to be attending Aberdeen School in the future:

1. _____ Birthdate: ___/___/___

2. _____ Birthdate: ___/___/___

Names of older brothers or sisters / whanau who are already attending Aberdeen School:

1. _____ Room: _____

2. _____ Room: _____

Care and Communication

Students will only be released from the school into the care of people listed on this card.

Care Arrangements

Home Situation: Student lives with:

Mother Father Both Other

Is there anybody that is not allowed contact with your child? Yes No

Name: _____

Relationship: _____

Name: _____

Relationship: _____

A copy of any court orders supporting the above information should be supplied to the school to enable us to enforce the order. It is the family's responsibility to inform the school of any change in custodial circumstances.

Ministry information we are required to collate:

Early childhood centre attended:

Type	Hours/week
Kohanga Reo	
Playcentre	
Kindergarten or Edu-Care Centre	
Home-based Service	
Playgroup	
Correspondence School-Te Aho o Te Kura Pounamu	
Attended, but only outside New Zealand	

No of years attended : _____

Additional Support

Are there any agencies involved in supporting your child?
 Yes No

Agencies Involved: _____

Health Information:

<p>Does your child have any health issues?</p> <p><input type="radio"/> Yes (Complete separate form)</p> <p><input type="radio"/> No</p>	<p>Will medication need to be kept at school?</p> <p><input type="radio"/> Yes – Separate form</p> <p><input type="radio"/> No</p>
<p>Name of Doctor: _____</p> <p>Medical Centre: _____</p>	<p>Immunisation/Inoculation (Photocopy required)</p> <p><input type="radio"/> Yes <input type="radio"/> No</p> <p>Verified by: _____</p>

4 Km Approval to Leave School Grounds

The school would like your approval for your child(ren) to leave the school grounds, at the school's discretion, for supervised class and/or school activities that are within a short distance of the school (4km radius). This would cover activities such as Dinsdale Library visits, cross-country training, Year 6 visits to local intermediate schools, walking to local parks and sports venues, and observing local events of interest.

All activities will comply with the school's Risk Management requirements.

I understand that my child(ren) will be supervised at all times and that all activities will comply with the School's Risk Management requirements.

I understand that this permission is valid for the time my child(ren) attend Aberdeen School.

We need permission for the following:

1. <input type="radio"/> Yes <input type="radio"/> No	<u>Internet Use</u> I give permission for my child(ren) to use the school's internet and email under the conditions set out in the school's Acceptable Use Agreement
2. <input type="radio"/> Yes <input type="radio"/> No	<u>Web/Facebook Page Images</u> I give permission for my child's(ren's) image to appear on the school's web/facebook page. (No names will be attached to any image.)
3. <input type="radio"/> Yes <input type="radio"/> No	<u>Web/Facebook Page Names</u> I give permission for my child's(ren's) first name to appear on the school's web/facebook page. (No last names will be used)
4. <input type="radio"/> Yes <input type="radio"/> No	<u>Performance Permission</u> I give permission for my child(ren) to appear in any DVD production with class/school activities.
5. <input type="radio"/> Yes <input type="radio"/> No	<u>Public Health Nurse Access</u> I give permission for Aberdeen School to access the services of our Public Health Nurse in the interests of your child's health.
6. <input type="radio"/> Yes <input type="radio"/> No	<u>Free School Milk</u> I give permission for Aberdeen School to provide free milk to my child.
<u>This agreement is effective from entry to Aberdeen School and will be effective until the child(ren) leaves or until more permission is sought.</u>	

Parent Declaration:

- I/we will support school rules (kawa), Values and discipline procedures as developed by the school.
- I/we understand the school uniform is a compulsory requirement for attendance at Aberdeen School
- I/we give permission for essential information to be requested from previous schools and to be given to another school as required.
- I/we understand that the school will take action on my behalf in case of sudden illness or injury to my child(ren).
- I/we agree to abide by school policies.
- My/our child is not currently suspended from a school.

In terms of the Privacy Act, I understand that the information on this form is collected to form part of the essential information the school holds on my child. The records made from this information may be viewed on request at the school. I approve the forwarding of information when my child transfers to another school. I also approve the forwarding of my child's name and address on request to a potential Intermediate School.

Signature of Parent/Guardian Enrolling Student: _____ Date ___ / ___ / ___

Signature of Aberdeen School Senior Manager: _____ Date ___ / ___ / ___

Thanks so much for completing this paperwork ☺
We hope you and your family have a wonderful association with our fantastic school.