



**INTERNATIONAL STUDENTS ENROLMENT FORM**

**Please supply with this enrolment form**

Copy of your child's passport

**Student's Details:**

First Name	Family Name	Preferred Names
Date of Birth	Gender Male/Female	Place in Family out of
Address  Post Code	Home Phone Number	
Mother's Name  Address:  Home Phone  Mobile Phone  Work Phone  Email address	Father's Name  Address:(If different from Mother's)  Home Phone  Mobile Phone  Work Phone  Email address	Caregiver's Name (if applicable)  Address:  Home Phone  Mobile Phone  Work Phone  Email address

**OFFICE USE**

<b>Year:</b>	<b>House:</b>	<b>Start Date At Ilam:</b>
<b>Room:</b>	<b>NE Party:</b>	<b>Previous School &amp; Start Date:</b>
<b>1<sup>st</sup> Visit:</b>	<b>2<sup>nd</sup> Visit:</b>	<b>NSN:</b>

**Living Arrangements:**

**Child lives with** (please circle one)      Both Parents      Mother      Father      Caregiver

**Name of person responsible for paying billing account:**

**Email address to send invoices/statements to:**

Are there Custody/Access arrangements the school needs to be aware of?  
(Please supply copy of court order or agreement)

**Possible Future Attendees to Ilam School**

Name	M/F	DOB
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**Ethnicity:** (Please circle up to three ethnicities or write in boxes below if ethnicity is not listed)

- |                                                         |                                                |                                                |                                         |
|---------------------------------------------------------|------------------------------------------------|------------------------------------------------|-----------------------------------------|
| <input type="checkbox"/> NZ European                    | <input type="checkbox"/> NZ Maori              | <input type="checkbox"/> Tongan                | <input type="checkbox"/> Samoan         |
| <input type="checkbox"/> Australian                     | <input type="checkbox"/> Cook Islands Maori    | <input type="checkbox"/> Greek                 | <input type="checkbox"/> Fijian         |
| <input type="checkbox"/> British                        | <input type="checkbox"/> Irish                 | <input type="checkbox"/> Japanese              | <input type="checkbox"/> Polish         |
| <input type="checkbox"/> Italian                        | <input type="checkbox"/> Chinese               | <input type="checkbox"/> Korean                | <input type="checkbox"/> Dutch          |
| <input type="checkbox"/> German                         | <input type="checkbox"/> Vietnamese            | <input type="checkbox"/> Indian                | <input type="checkbox"/> Sri Lankan     |
| <input type="checkbox"/> African                        | <input type="checkbox"/> Filipino              | <input type="checkbox"/> Cambodian             | <input type="checkbox"/> Latin American |
| <input type="checkbox"/> Middle Eastern                 | <input type="checkbox"/> Other Pacific Peoples | <input type="checkbox"/> Other Southeast Asian | <input type="checkbox"/> Other Asian    |
| <input type="checkbox"/> Tokelauan                      | <input type="checkbox"/> Niuean                |                                                |                                         |
| <input type="checkbox"/> Other Ethnicity (Please state) |                                                |                                                |                                         |

**If NZ Maori:** (please list up to three iwi)

**Country of Origin:**

**Status:**

Country of Birth

Country of Citizenship

Languages spoken at home with child (Please circle most used language)

NZ Citizen (If born outside NZ proof of Citizenship is required)

Permanent Residency (Passport proof required)

Student Visa/Permit (Passport proof required)

Permit expiry date

**Back Up Contact**

(We will contact these people if we cannot contact you in an Emergency or if your child needs to be collected from school.)

Name Phone Relationship	Name Phone Relationship
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**Tell Us About Your Child**

Does your child have any learning or behaviour needs that we should know about?

Has your child received any early intervention support at their Early Childhood Centre? If so please state the support they have received for their needs?

**Medical Information:**

Doctor	Phone
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Does your child have allergies / medical conditions / requirements that we should know about?

Is your child fully immunised?                      Yes/No  
**(Please supply immunisation certificate if yes)**

**Prior-participation in Early Childhood Education**

Did the child attend one or more Early Childhood Education service(s) in the six months prior to starting school? Please complete the table below for the last service(s) attended.

Instructions:

1. If the child was attending more than one service *at the same time*, please enter hours per week for up to three services.
2. If the child attended one service, but changed to a different service within the six months prior to starting school, please complete the table for the *last service only*, not both.
3. If the child's attendance hours varied, or the parent/caregiver is uncertain, please enter an approximate or average number of hours per week.

Please enter the number of hours per week for up to three services:	Service 1 (hrs/week)	Service 2 (hrs/week)	Service 3 (hrs/week)
a. Kōhanga Reo			
b. Playcentre			
c. Kindergarten <i>or</i> Education and Care Centre			
d. Home based service			
e. Playgroup			
f. The Correspondence School – Te Aho o Te Kura Pounamu			

Or

Please tick the appropriate box

g. Attended, but only outside New Zealand	
h. Attended, but don't know what type of service	
i. Did not attend	
j. Unable to establish if attended or not	

Did the child regularly attend Early Childhood Education?

“Regularly attend” means your child was booked in to a service for sessions each week/fortnight, and generally went to those sessions unless they were sick, or on holiday, or had a family occasion, etc.

- Yes, for the last \_\_\_\_ year(s).
- Not regularly, only occasionally with no on-going schedule.
- No, did not attend ECE.

**Other information:**

Is there anything else you would like us to know about your child?

**Education Outside the Classroom:** I give permission for my child to attend Education Outside the Classroom (EOTC) activities. This covers events and activities at school or near the school, e.g. The University. It also covers low risk events e.g. walks, visits to the Art Gallery, Museum or similar, sports events, etc. that occur off the school grounds at a venue in Canterbury. It does not cover events that finish after 3.30pm or events that are deemed to be medium or high risk (rock climbing, surfing, etc) or events that involve an overnight stay.

Yes/No

**Medical Permission:** I give permission for the school to sanction any required emergency medical treatment

Yes/No

**Parent Teacher Association (PTA):** I give permission to the school to release contact information to the PTA for fundraising purposes and class activities only

Yes/No

**Student Information:** I give permission for my child's first name, image, or work to be published in the school newsletter, on the school website, or the wider online community.

Yes/No

**School Newsletter:** I give permission for the school to subscribe us to the school newsletter.

Yes/No

**Class Contact Lists:** I give permission for the school to annually give out our contact details to other children within my child's class to arrange play dates.

Yes/No

**Current Pre-School attending:** (if applicable)

**Previous School:** (if applicable)

Year Level:

## Conditions of Enrolment at Ilam School

### 1. Standards of conduct

The student and family are bound by the rules of the school and the policies of the Board.

### 2. Attendance

The school requires punctual and regular attendance from all students. You are asked to contact the Principal about any overseas travel before any travel commitments are made.

### 3. Emergency or incapacity

In the event of illness, accident or emergency the school will seek to contact parents/caregivers or any other back up contacts in accordance with the details completed by you on the enrolment form for the student. In the event that no contact can be made or if urgent medical or other attention is required you agree to allow the school to take the necessary steps.

### 4. Uniform

The student will wear the uniform of the school in accordance with the uniform guidelines provided by the Board of Trustees.

### 5. Student information

The parent(s) and caregiver(s) will notify the school of any change in information contained in this form and the enrolment form. For the purpose of the Privacy Act 1993, this information and any other information held or acquired by the school relating to the student's education, health, welfare or safety may be released to parties outside the school at the discretion of the Principal or any person lawfully delegated on his/her behalf.

The school is sometimes obliged by law to give information to Government Departments (e.g. Ministry of Education, Ministry of Health) but it will not otherwise be disclosed without your authorisation.

### 6. School Accounts

The only charges on the School Accounts for 2020 will be for Senior Class Camps and any extra-curricular activities that children opt into. Examples are: Choir, ICAS, Sport held outside of school time etc. Such activities MUST be paid for prior to the event for children to be able to participate.

### Please complete

I/We acknowledge the information given on this enrolment form is true and correct and we accept the above conditions of enrolment for:

Child's Name:

Signed:

Name:

Date: