

YEAR 9

ENROLMENT APPLICATION FORM 2025

All documents received: Y / N

Staff Signature: _

Manurewa High School has an approved scheme in place to avoid overcrowding. It is your responsibility to

	and adhere to the In-Zone Enrolment Terms and Conditions to ensure you are aware of our ment process and the documentation required.					
	AN INCOMPLETE APPLICATION WILL NOT BE PROCESSED.					
The f	following documents MUST BE ATTACHED when submitting this application.					
	Full NZ Birth Certificate or NZ Passport - [photocopy only]					
	Parent/Caregivers proof of address must be current – less than 6 months, with your [parent/caregiver] name and address from a Government Department , e.g. IRD, NZTA, Housing NZ, Work & Income or a power or telephone account. If these accounts are emailed to you, you can print them off as most have the address on them. [We do not accept the following - bank or insurance statements, fundraising organisation letters or parcel delivery slips].					
	If you are not the student's biological parent we will require proof that the student is allowed to stay with you e.g. a Statutory Declaration from the Manukau Courts OR an official Court/Oranga Tamariki document.					
	Proof of Residency [non-NZ born] and Passport / Birth Certificate Evidence Resident Visa / Student Visa / Work Visa					
	Medical Form [blue] completed and signed by parent/guardian.					
	The following supporting documents CAN BE ATTACHED when submitting this application if available.					
	Immunisation record. Please let us know if the student is not immunised.					
	Latest school Report [copy only]					
	Out of Zone Application Closing Date					
	Wednesday 11th September 2024					
	Ballot drawn on Wednesday 18th September 2024					
Note : A change of address to an out of zone address before the start of school year can make an in-zone enrolment invalid.						
	An incomplete application will not be included in the Ballot					
An enrolment can be refused/cancelled by Manurewa High School if incorrect information regarding the student is given on this enrolment application.						
to all s	formation on this form is collected and used by the school in educating your child, and for associated school activities. It is available taff of the school and to members of the Board of Trustees. Please advise the school if you have any concerns about disclosure of the information within the school.					
	ve the right to request access and to request correction of information held about you by the school. We would be grateful if you ontact the school office if any details need to be changed, in particular contact details, i.e. address, email and phone numbers.					
	For Office Use Only					

Date Received: __

STUDENT DETAILS				Student No				
Student's Legal First Name/s			Student's Legal Last Name					
Preferred First Name			Preferred Last Name					
Date of Birth			Gender					
Country of Birth			Country of Citizenship					
Previous School				1				
Is this a re-enrolment?			□ Yes / □ No					
Has the student been excluded	d / suspended		□ Yes / □ No					
Siblings currently at Manurewa High School [brothers and sisters - please list names]								
Siblings previously at Manurewa High School [brothers and sisters – please list names]								
Child of former student [paren	t – please list names]							
HOME DETAILS								
The student's Primary Resi	dence is where the stude	nt mo	ostly lives and determines	whether the student is living				
All caregivers [primary and secondary] will be entitled to the same information and access [unless a Court Order is provided]. If there is a 50/50 custody arrangement, the caregivers must decide who to list under the main residence. Caregivers are treated equally, apart from the main residence which will be sent invoices/statements; be sent absence texts; and will usually be contacted first before trying the alternate residence.								
Full Home Address								
Postcode			Home phone number					
The student lives with Par	rent[s] Guardian[s]		Caregiver[s] □					
Mother/Caregiver/Grandparent/Step Parent [please circle]			Father/Caregiver/Grandparent/Step Parent [please circle]					
Full Name [Mrs/Ms/Miss]			Full Name					
Mobile Phone No			Mobile Phone No					
Email address			Email address					
Occupation			Occupation					
Work Phone No			Work Phone No					
Work Place			Work Place					
PARENTS NOT LIVING								
person you wish the school to				ons. Please name here any such an email address is supplied.				
			ther's Full Name					
Home Phone No		Hom	me Phone No					
Mobile No Mob			bile No					
Email address Ema			aail address					
Home Address Hom			me Address					
Workplace Phone No Wo			orkplace Phone No					
Custody/access arrangements which the school should be aware of:								

ALTERNATIVE CONTACT							
Please nominate <u>another</u> contact person in case we cannot get in touch with any of the caregivers listed previously.							
Name			Relation	nshi	p to student		
Home			Mobile				
CULTURAL IDENT	ITY - This information	is required by t	he Minist	ry o	f Education		
Specify where indicate	ted – e.g. Samoan		Born in	Ne	w Zealand?	□ Yes / □	No
□ Maaori			If the s	tud	ent was NOT	born in New 2	Zealand, please answer
□ NZ European/Pakeha			the foll	owi	ng questions:		
☐ Other European	Specify		Appro	xim	nate date of	arrival in Ne	w Zealand:
□ Pasifika	Specify						
☐ Asian	Specify		Is the s	stud	lent a: [please	e tick]	
□ Other	Specify		□ Perm	nane	ent Resident		
If New Zealand Maaori,	please list Iwi [up to thre	ee]	☐ Hold	er c	of a domestic	student visa	
Iwi:					•		or holder of a current
Iwi:			domest	tic s	student visa p	lease complete	e these questions:
Iwi:			Passpo	rt N	lo:		
Languages used at he	ome:						
□ Maaori			VISA INC); _			
□ NZ European/Pakeha			Expiry	Date	e [student vis	sas only]:	
☐ Other European	Specify						
□ Pasifika	Specify						f NZ in the last five
□ Asian	Specify		years?	L	□ Yes / □ No	,	
□ Other	Specify		If ves.	whe	ere?		
	,		/ /				
MEDICAL & LEAR	NING DETAILS						
Family Doctor			Family	Der	ntist		
Health/Medical Needs:			☐ Yes	/	□ No	Specify:	
Sensory Needs:			☐ Yes	/	□ No	Specify:	
Physical Needs:			☐ Yes	/	□ No	Specify:	
Learning Needs:			☐ Yes	/	□ No	Specify:	
Has the student had an	IEP/ILP or similar?		☐ Yes	/	□ No	Specify:	
	I SCHOOL – SCHOO						
The meals that will be s	will be providing school served will meet the Mini	stry's health an	d nutritio	nal	standards an	nd guidelines.	_
care on site. If your Cr	nild requires a special	uicidi y illedi	hicase II	iiul	cate DelOW:		
☐ No special dietary red	quirements	☐ Halal			☐ Gluten Fr	ree	☐ Dairy Free
		□ Vegan					
☐ Food Allergies	Specify:						
	regarding the school lur						ool.nz advising us and

MANUREWA HIGH SCHOOL – MAAORI WHAANAU CLASS			
Has your child attended Kura Kaupapa or Maaori Bilingual?	☐ Yes	/	□ No
If yes, when was their last year and what was the name of the Kura Kaupapa or Maaori Bilingual?			
Do you want your child to be placed in a Maaori Whaanau Class?	☐ Yes	/	□ No
If yes, you must select at least one of the following options to participate in:			
☐ Te Reo Maaori ☐ Waananga			
☐ Mau Rakau			
COLLECTION OF DATA 2025			
I am aware that Manurewa High School will request information and data about my child from their assist with the transition and induction process, and also pass on to relevant future schools. Manurewa Ministry of Education Te Rito software integrated with our own student management system to keep and well-being of your child. This system includes the standardised Learning Support Register [sLSR learning information and personal details of your child. This can be shared with other schools as appropriate the duration of their educational journey. If you would like to view your child's information or ensu see the Principal.	High will a record a	also d of cont l will	use the learning ains the be kept
Parent/Caregiver: Date:			
IN ZONE ENROLMENT TERMS AND CONDITIONS			
The in-zone address given at the time of application must be the student's usual place of residence a and during the student's time attending the school. The Ministry of Education advises that parents possible consequences of deliberately attempting to gain unfair priority in enrolment by knowingly of making an in-zone living arrangement that they intend to be only temporary. Examples include: Renting in-zone accommodation on a short-term basis; Arranging board in zone with a relative or friend who is not a legal guardian; Using the in-zone address of a relative or friend to gain entry to the school. If the school has reasonable grounds for believing that the in-zone address is not a genuine, ongoing a parent or legal guardian, the school may decline to offer a place. If the school learns that a stude zone and has reasonable grounds to believe that a temporary in-zone residence has been used for gaining priority in enrolment, then the Board of Trustees may review the enrolment. Unless the parent explanation within ten days, the Board may annul the enrolment. This course of action is provided for the Education and Training Act 2020.	should be giving a factoring are living are to the purpose to can give	rang ongoose ve a	ement with er living in- of unfairly satisfactory
I understand the above terms and conditions.			
Parent/Caregiver: Date:			
STUDENT & PARENT/CAREGIVER COMMITMENT			
If accepted, we commit to attend daily and abide by the school rules and regulations. We understand t will be discussed with, and revealed to the student's parent/guardian/caregiver who will support the sc to ensure student success at this school.			
We agree that any images of me and/or my work can be used by the school for internal and external not limited to the school website, social media, school publications, promotional material and the school I consent to my/my child's photo and/or name/achievements being recognised on electronic signage of	ol yearbo	ok.	In addition,
Student: Date:			
Parent/Caregiver: Date:			