



YEAR 9

ENROLMENT APPLICATION FORM 2027

Manurewa High School has an approved scheme in place to avoid overcrowding. It is your responsibility to read and adhere to the In-Zone Enrolment Terms and Conditions to ensure you are aware of our enrolment process and the documentation required.

AN INCOMPLETE APPLICATION WILL NOT BE PROCESSED.

The following documents **MUST BE ATTACHED** when submitting this application.

- ☐ Birth Certificate *[copy only]*
- ☐ Parent/Caregiver's 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, tenancy agreements or medical correspondence.
- ☐ 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 OR an official Court / Oranga Tamariki document.
- ☐ Proof of Residency *[non-NZ born]* and Passport / Birth Certificate / Resident Visa / Student Visa
- ☐ Medical Form completed and signed by parent/guardian.
- ☐ Manurewa High School Student Cybersafety Use Agreement completed and signed by student and 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 2nd September 2026

Ballot drawn on Wednesday 9th September 2026

Note: A change of address to an out-of-zone address before the start of the 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 provided on this enrolment application.

The information on this form is collected and used by the school in educating your child, and for associated school activities. It is available to all staff of the school and to members of the Board of Trustees. Please advise the school if you have any concerns about disclosure of any of the information within the school.

*You have the right to request access and to request correction of information held about you by the school. We would be grateful if you could contact 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

All documents received: Y / N

Date Received: _____

Staff Signature: _____

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			
Is this a re-enrolment?		☐ Yes / ☐ No	
Has the student been excluded / 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 [parent – please list names]			
HOME DETAILS			
The student's <u>Primary Residence</u> is where the student mostly lives and determines whether the student is living in or out of zone. <i>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.</i>			
Full Home Address			
Postcode		Home phone number	
The student lives with Parent[s] ☐ Guardian[s] ☐ Caregiver[s] ☐			
Mother/Caregiver/Grandparent/Step Parent <i>[please circle]</i>		Father/Caregiver/Grandparent/Step Parent <i>[please circle]</i>	
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 AT THE SAME ADDRESS AS THE STUDENT			
<i>A natural mother or father not living with a child is entitled to vote in Board of Trustees elections. Please name here any such person you wish the school to recognise. Please note school reports may be sent via email if an email address is supplied.</i>			
Mother's Full Name		Father's Full Name	
Home Phone No		Home Phone No	
Mobile No		Mobile No	
Email address		Email address	
Home Address		Home Address	
Workplace Phone No		Workplace 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	Relationship to student
Home	Mobile
CULTURAL IDENTITY – This information is required by the Ministry of Education	
Specify where indicated – e.g. Samoan ☐ Maaori If New Zealand Maaori, please list Iwi [up to three] Iwi: _____ Iwi: _____ Iwi: _____ ☐ NZ European/Pakeha ☐ Other European Specify _____ ☐ Pasifika Specify _____ Village/Nu'u: _____ Village/Nu'u: _____ ☐ Asian Specify _____ ☐ Other Specify _____ Languages used at home: ☐ Maaori ☐ NZ European/Pakeha ☐ Other European Specify _____ ☐ Pasifika Specify _____ ☐ Asian Specify _____ ☐ Other Specify _____	Born in New Zealand? ☐ Yes / ☐ No If the student was NOT born in New Zealand, please answer the following questions: Date of arrival in New Zealand: _____ Is the student a: [please tick] ☐ Permanent Resident ☐ Holder of a domestic student visa If the student is a permanent resident or holder of a current domestic student visa please complete these questions: Passport No: _____ Visa No: _____ Expiry Date [student visas only]: _____ Have you attended a school outside of NZ in the last five years? ☐ Yes / ☐ No If yes, where? _____
MEDICAL & LEARNING DETAILS	
Family Doctor	Family Dentist
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: _____
MANUREWA HIGH SCHOOL – SCHOOL LUNCH PROGRAMME 2027	
Manurewa High School will be providing school lunches through the Ministry of Education School Lunch Programme for 2027. The meals that will be served will meet the Ministry's health and nutritional standards and guidelines. The school also runs a café on site. If your child requires a special dietary meal please indicate below: ☐ No special dietary requirements ☐ Halal ☐ Gluten Free ☐ Dairy Free ☐ Vegetarian ☐ Vegan ☐ Food Allergies Specify: _____ <i>If you have any queries regarding the school lunches, please email schoollunches@manurewa.school.nz advising us and we will get back to you. Please include the student's full name and a contact phone number.</i>	

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

I am aware that Manurewa High School will request information and data about my child from their previous school[s] to assist with the transition and induction process, and also pass on to relevant future schools. Manurewa High will also use the Ministry of Education Te Rito software integrated with our own student management system to keep a record of learning and well-being of your child. This system includes the standardised Learning Support Register [sLSR], which contains the learning information and personal details of your child. This can be shared with other schools as appropriate and will be kept for the duration of their educational journey. If you would like to view your child's information or ensure it is correct, please see the Principal.

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 at the time of application and during the student's time attending the school. The Ministry of Education advises that parents should be aware 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 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 living arrangement with a parent or legal guardian, the school may decline to offer a place. If the school learns that a student is no longer living in-zone and has reasonable grounds to believe that a temporary in-zone residence has been used for the purpose of unfairly gaining priority in enrolment, then the Board of Trustees may review the enrolment. Unless the parents can give a satisfactory explanation within ten days, the Board may annul the enrolment. This course of action is provided for under Schedule 20:12 of the Education and Training Act 2020.

I understand & agree with 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 that educational progress will be discussed with, and revealed to the student's parent/guardian/caregiver who will support the school's endeavours to ensure the student's 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 purposes, including but not limited to the school website, social media, school publications, promotional material and the school yearbook. In addition, I consent to my/my child's photo and/or name/achievements being recognised on electronic signage on the school grounds.

Student: _____

Date: _____

Parent/Caregiver: _____

Date: _____