

**STUDENT INFORMATION**

Student's family name:	Student's first name(s):	Preferred name:
Date of Birth:	Gender: Girl / Boy	
Country of birth:	Student's ethnicity	
Main Language spoken at home:	Second Language (if applicable):	
Previous school (if applicable):	Current school Year/Level (if applicable):	
Date student started school (if applicable):		
Family Doctor:	Health issues	
Telephone number:	Sight:	
	Speech:	
Immunisations up-to-date? Yes / No	Hearing:	
	Mobility:	
Known allergies/other medical issues:	Any medication needed:	
Sporting / Cultural or Musical interests / Hobbies:		
Additional information offered by parents re learning / behaviour / developmental issues:		

**PARENT / GUARDIAN INFORMATION**

<b>Mother's / Guardian's name:</b>	<b>Father's / Guardian's name:</b>
Ethnic Group (if Maori please state iwi affiliations):	Ethnic Group (if Maori please state iwi affiliations):
Home language:	Home language:
Home address:	Home address (if different from mother's):
Postal Code:	Postal Code:
Home telephone number:	Home telephone number (if different):
Mobile phone number:	Mobile phone number:
Email address:	Email address:
Occupation:	Occupation:
Place of employment:	Place of employment:
Business telephone number	Business telephone number
Email you like to have newsletters sent to:	
Student living with:	

	Mother & Father
	Mother
	Father
	Designated Caregiver / Guardian

Custody arrangements (if applicable) – please provide court order or custody paperwork).

Extra report required? Yes / No

Name and address of person report should be sent to:

### EMERGENCY CONTACT INFORMATION

Name and contact number of an emergency contact (1)	Name and contact number of an emergency contact (2)
Name:	Name:
Telephone number(s):	Telephone number(s):
Email address (if preferred contact method):	Email address (if preferred contact method):
Relationship to student:	Relationship to student:

### Prior Participation in Early Childhood – for Ministry of Education Data Collection

Did your child attend one or more Early Childhood Education services in the six months prior to starting school?

Please complete the table below for the last service(s) attended.

- If the child was attending more than one service **at the same time**, please enter the hours per week for up to three services.
- 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.
- If the child' attendance hours varied, or the parent/caregiver is uncertain, please enter an approximate **average number of hours per week**.

Type of service	Name of Service	Number of hours per week	OR	Please tick the appropriate box		
Playcentre				Attended but only outside New Zealand		
Kindergarten or Education & Care Centre				Attended but don't know what kind of service		
Home based service				Did not attend		
Playgroup				Unable to establish if attended or not		
Kohanga Reo						
The Correspondence School						

## Declaration

### PERMISSIONS:

- I give authority to the Principal/School to act on my behalf in any medical emergency.
- I give permission for my child to be included in photos, videos and to have his/her work published on our school website, schools newsletter or other promotional activities so long as only their first name is used.
- I agree to abide by all Board of Trustees Policies and School Procedures, which are outlined on the school website.
- I give permission for the school to request extra help from Special Education Services and Resource Teachers of Learning and Behaviour. I understand I will be informed if extra help is needed for my child.
- Information given on this form is true and correct. I understand that the information provided may be used for school-based activities and be passed to other agencies who work with the school for educational/health purposes.
- I understand my child's records will be passed to subsequent schools.

### I AGREE TO:

- Work actively and cooperatively to uphold the image of the school.
- Act in accordance with the School's Charter, and Fair Play Code.

I declare all information in this enrolment form to be accurate

Name of Parent/ Guardian: \_\_\_\_\_ Signature: \_\_\_\_\_ Date: \_\_\_\_\_

### Documentation you need to bring to a school interview:

- Proof of residential address.
- Student's original New Zealand birth certificate or New Zealand passport.
- Student's Residency Permit or Student /Visitor Visa.
- Parent/Guardian's passport showing Residence Permit, Student /Visitor Visa or Work Visa.

OFFICE ONLY:		
Residential zone: IN/OUT	Address verified [ ]	Verified as domestic student [ ]
Date of Birth Verified [ ]	Date of Entry to New Zealand : / /	
Starting Date Sherwood Primary: / /	Year Level:	Room:
Teacher:		
Siblings at Sherwood, or younger siblings, with dates of birth:		
Accepted/Declined	Letter/email sent [ ]	Verbal Notification [ ]
Interviewed by:	Date:	