MEREMERE SCHOOL

Heather Green Avenue, RD 2 Mercer 2474

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e-mail: office@meremere.school.nz

ENROLMENT FORM

|  |  |
| --- | --- |
| **STUDENT INFORMATION** | |
| Legal name of student |  |
| Preferred first name |  |
| Preferred surname |  |
| Date of birth |  |
| Gender | Male/Female |
| Age |  |
| Country of Birth |  |
| Ethnicity |  |
| Iwi |  |
| Hapu |  |
| **PARENT/CAREGIVER INFORMATION** | |
| Mother’s Name |  |
| Mother’s Address |  |
| Phone |  |
| Email address |  |
| Father’s Name |  |
| Father’s Address (if different to Mother’s |  |
| Phone |  |
| Email address |  |
| Primary Caregivers name  (if different to either parent) |  |
| Primary Caregivers address |  |
| Relationship of caregiver |  |
| Phone |  |
| Email address |  |
| Name of caregiver 2 |  |
| Relationship of caregiver |  |
| Phone |  |
| Name of emergency contact 1 |  |
| Phone of emergency contact 1 |  |
| Name of emergency contact 2 |  |
| Phone of emergency contact 2 |  |

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| --- | --- | --- | --- | --- |
| **MEDICAL INFORMATION** | | | | |
| Doctor | |  | | |
| Address of Clinic | |  | | |
| Immunisation Certificate | | Yes/No | | |
| Immunisation complete | | Yes/No | | |
| Doctor’s before School check | | Yes/No | | |
| List any health issues | |  | | |
| **INFORMATION ON SIBLINGS** | | | | |
| Number of siblings |  | | | |
| Order in family of this child | / | | | |
| Siblings at this school |  | | | |
|  |  | | | |
|  | | | |
|  | | | |
|  | | | |
| Pre-schoolers | Name | | Age | Birthday |
|  |  | |  |  |
|  | |  |  |
|  | |  |  |
|  | |  |  |
| **LEGAL ORDERS** | | | | |
| Court orders/Protection orders/Access arrangements/CYFS: | | | | |
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|  | | | | |
|  | | | | |
|  | | | | |
| **EDUCATION HISTORY** | | | | |
| Current Year Group |  | | | |
| Previous schools |  | | | |
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|  |  | | | |
|  |  | | | |
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| --- | --- | --- | --- | --- | --- | --- | --- |
| ACADEMIC ACHIEVEMENT AND ASSISTANCE | | | | | | | |
| Learning Needs: | | | | | | | |
| Reading | | Well below | | Below | At | | Above |
| Writing | | Well below | | Below | At | | Above |
| Maths | | Well below | | Below | At | | Above |
| Referrals for Learning | | Yes/No | | | | | |
| RTLB | | Yes/No | | | | | |
| ORs | | Yes/No | | | | | |
| High Learning Needs | | Yes/No | | | | | |
| Behaviour: | | | | | | | |
| Stable | Yes/No | | | | | | |
| Satisfactory | Yes/No | | | | | | |
| Comment: | | | | | | | |
|  | | | | | | | |
|  | | | | | | | |
|  | | | | | | | |
| RTLB | Yes/No | | | | | | |
| SWIS | Yes/No | | | | | | |
| **PRE-SCHOOL EXPERIENCE** | | | | | | | |
| New Entrants: | | | | | | | |
| Years at Pre-School (if any) | | | | | | | |
| Pre-School Centre |  | | | | | | |
|  |  | | | | | | |
| **PERMISSIONS** | | | | | | | |
| I give permission for my child to | | | | | | | |
| * have photos taken at school | | | | | | Yes/No | |
| * have photos published on the school website | | | | | | Yes/No | |
| * use laptops/computers in a sensible fashion | | | | | | Yes/No | |
| * walk to the local library under supervision | | | | | | Yes/No | |
|  | | | | | | | |
| Form completed by: | | | | | | | |
| Name |  | | | | | | |
| Signature |  | | | | | | |
| Date |  | | | | | | |
| Child’s starting day |  | | | | | | |
|  | | | | | | | |
| Office only: | | | | | | | |
| Copy of Birth certificate | | | Yes/No | | | | |
| Copy of passport | | | Yes /No | | | | |
| Overseas Visa-Parents | | | Yes/No | | | | |
| Overseas Visa-Child | | | Yes/No | | | | |
| Date of birth | | |  | | | | |
| Age at 1.1 | | |  | | | | |
| Current age | | |  | | | | |
| Classification | | |  | | | | |
| Room | | |  | | | | |
| Enrolment number | | |  | | | | |
| School entry date | | |  | | | | |
| eTAP entry date | | |  | | | | |
| ENROL entry date | | |  | | | | |
| SNS Number | | |  | | | | |