

PARENT DETAILS

Father: Surname _____ First name(s) _____ Occupation _____

Postal Address: _____

Tel. No. (Home) _____ Tel. No. (Work) _____

Fax No. _____ Email address: _____

Mother: Surname _____ First name(s) _____ Occupation _____

Postal Address: _____

Tel. No. (Home) _____ Tel. No. (Work) _____

Fax No. _____ Email address: _____

DESIGNATED CAREGIVERS IN NEW ZEALAND i.e. the person(s) who the student will live with in NZ. **IF YOU ARE APPLYING FOR HOMESTAY THEN DO NOT FILL IN THIS SECTION.**

Surname: _____	Surname: _____
First Names: _____	First Names: _____
Relationship to student: _____	Relationship to student: _____
Address: _____	Address: _____
Occupation: _____	Occupation: _____
Workplace: _____	Workplace: _____
Home Tel: _____	Home Tel: _____
Business: _____	Business: _____
Mobile: _____	Mobile: _____
* Email: _____	* Email: _____

* N.B. E-mail address for receipt of school correspondence/report

Are there any specific access / custody orders that the school should be aware of? Yes / No
If "yes" please provide details: _____

EMERGENCY CONTACT
Contact (for emergencies) who can be phoned when parent / caregivers cannot be reached

Surname: _____	Phone Number (Work): _____
First Name: _____	(Home): _____
Relationship to student _____	(Mobile): _____

AGENT / GUARDIAN DETAILS

If you are represented by an agent or guardian, provide their details below:

Name: _____ **Phone Number (Work):** _____
Name of Agency: _____ **Mobile:** _____
Email: _____ **Home:** _____

INSURANCE DETAILS

The New Zealand government requires that the student has full Travel & Medical Insurance.

**Do you wish Botany Downs Secondary College to arrange insurance on your behalf?
YES/NO**

If YES, select insurance company: Uni-Care / Southern Cross: 'Max' / 'Essentials'

If NO, state name of your insurance provider: _____

Please attach a copy (with English translation) of policy details.

The student cannot be enrolled until insurance details have been provided.

BACKGROUND INFORMATION

Name of brothers / sisters who are / were at Botany Downs Secondary College

Name(s) _____ **House** _____ **Year** _____

Do you wish your child to be in the same House? YES / NO (please circle)

(The school will make every endeavour to meet this request, but it is dependent on class numbers).

Interests and Activities

Music / Drama / Dance

Are you currently learning an instrument? Yes No

Indicate instrument and level / years

Do you currently sing in a choir? Yes No

Other music / drama / dance involvement

What would you like to participate in at BDSC?

Sports

What sports do you currently play?

What sport would you like to participate in at BDSC?

Other Achievements (Certificates, Awards etc)

School or Club Responsibilities (Prefect, Librarian, Monitor, Captain etc. Indicate school/club and year)

Family: List your brothers/sisters and their ages

Pets: Do you have any pets? Give details.

Should your application be successful, you will receive an "Offer of Place".

There is a registration fee of \$NZ500.00 which must be paid when an "Offer of a Place" is made. This is not refundable if you decide against coming, but is deducted from your school fees if you accept our "Offer of a Place". You will need to pay the year's fees before a visa will be granted.

If you accept the offer of a place then this application for tuition and the attached tuition agreement shall be the terms and conditions of agreement by which tuition shall be provided to the student, and the parent and guardian shall be bound by these terms.

Immigration: Full details of visa and permit requirements, advice on rights to employment in New Zealand while studying, and reporting requirements, are available through the New Zealand Immigration Service, and can be viewed on their website at <http://www.immigration.govt.nz>

PLEASE REMEMBER that your student permit is issued by the Immigration Service on the condition that you attend Botany Downs Secondary College. If you attempt to enrol at another school you are acting illegally and risk having your student permit withdrawn.

PARENT DECLARATION

I/We hereby undertake to the Botany Downs Secondary College Board of Trustees to observe the conditions and expectations as outlined in the School Code of Conduct and Enrolment Documentation, so far as they affect me and the student enrolled.

I/We, accept as a condition of enrolment that the student named in this application will participate in the general school programme that gives Botany Downs Secondary College its special character.

I/We agree that the student will be living with their parent, a designated caregiver or with a school-approved homestay family, while in New Zealand and attending Botany Downs Secondary College.

I/We agree to inform the school of any changes in my/our contact details and/or residential address, and of any change to the student's living arrangements.

I/We agree that all travel by the student outside of Auckland will be approved in advance by Botany Downs Secondary College.

I/We agree that the student will not own or drive a motor vehicle while a student at Botany Downs Secondary College.

I / we agree to the use (including disclosure) of the above information by the staff of the college for any purpose related to the education and well-being of the student concerned.

I/We declare that the student does not have any special educational or behavioural needs that would require additional educational provisions or special equipment or specialist services in New Zealand.

I / we declare that the information provided on this enrolment application is true and correct.

Signature:

Mother

Father

Office Use Only

Date:	
--------------	--

Enrolled by:	
---------------------	--