

Manawatū College Enrolment Application Form

Student's name First name(s) Surname

Preferred first name Student cellphone number(s) Male Female

Born in New Zealand? Yes No If No, please provide evidence of immigration status. Date of birth Age

Current/previous school Desired starting date

Year Level student being enrolled into (circle one): 9 10 11 12 13 14 Adult

Home address

Home phone number

Parent(s) cellphone number(s)

Would you like a text from the College advising that your son/daughter is absent if you haven't already notified us? Yes No

Parent(s) email address

Would you like newsletters and other communications from the College emailed to you? Yes No

What ethnic groups/cultures does the student identify with? You may tick more than one of the following:

Pakeha/NZ European Maori Asian Pacific Islander Other

If Maori, please state Iwi (where known)

Please list the names and Houses of any brothers and/or sisters and/or relations currently at Manawatū College

What will be the student's usual means of transport to school? Doctor

Please outline any special circumstances the College should know about (e.g.: medical conditions, medication, learning difficulties, special abilities, family circumstances)

PRIMARY CAREGIVER(S) (who live at the same address as the student)

Title(s): Mr Mrs Ms Miss Dr

First name(s) Surname(s)

Relationship(s) to the student

Occupation(s)

SECONDARY CAREGIVER(S) (if relevant)

Title(s): Mr Mrs Ms Miss Dr

First name(s) Surname(s)

Home address

Relationship(s) to the student

Phone numbers

Occupation(s)

EMERGENCY CONTACT DETAILS

Name and address

Relationship to the student Phone number(s)

If the parents are not living together, please provide the College with the following information:

Who has custody of the student? Mother Father Shared Other

Who should the accounts for school fees etc. be sent to?

Is a duplicate set of reports required? Yes No If yes, to whom should they be sent?

OFFICE USE ONLY:	
Mentor Group	<input type="text"/>
Home Class	<input type="text"/>
PELS Class	<input type="text"/>
Yr 9 Arts/Technology Class	<input type="checkbox"/>

Subject Selection to be completed at the enrolment meeting in discussion with the Principal

Information on the subjects available at Manawatū College can be found in this Prospectus (esp. Year 9) and the Senior Subject Information Handbook.

Student's favourite and/or best subjects

Student's least liked subjects

Student's interests/sports etc

Career interests?

Interested in learning a musical instrument(s)? Yes No If Yes, what instrument?

Short-term and medium-term goals?

Is there someone trusted and respected, other than the student's parent(s) or caregiver, who the student would like to be kept informed of his/her progress at College?

If Yes, please provide name(s) and contact details:

YEAR 9 OPTION CHOICES Please choose one full-year subject from the list below by ticking the appropriate box

Te Reo Māori

Introductory Japanese

Introductory Financial Studies

SUBJECT CHOICES FOR YEAR 11, 12, 13, 14 AND ADULT STUDENT ENROLMENTS List preferred subjects & Levels:

1

2

3

4

5

6

YEAR 10 OPTION CHOICES

Please indicate your choices by ticking any four (4) boxes

Art	<input type="checkbox"/>	Design Technology	<input type="checkbox"/>
Dance	<input type="checkbox"/>	Digital Technologies	<input type="checkbox"/>
Drama	<input type="checkbox"/>	Food Technology	<input type="checkbox"/>
Māori Performing Arts	<input type="checkbox"/>	Robotics	<input type="checkbox"/>
Music	<input type="checkbox"/>	Workshop Technology	<input type="checkbox"/>
Ngā Toi	<input type="checkbox"/>		

FULL-YEAR OPTIONS

Any one of:

Financial Studies

Japanese

Te Reo Māori

DECLARATION/CONSENT BY PARENT(S) AND STUDENT

I/We acknowledge that the information on this form will be used by Manawatū College in its normal operation and may be given to any other organisations where it is in the interest of the student. At the discretion of the Principal this information may be supplied to an outside agency. Board members, Staff members and outside tutors and coaches may have access to my/our sons/daughters name, address and phone number for contact purposes. The use, storage and maintenance of the information shall be in accordance with the provisions of the Privacy Act 1993. The College Board of Trustees has appointed a privacy officer to whom you may address any concerns you have about these matters.

I/we consent to any of my son's/daughter's school work, photos etc being stored electronically or digitally by the College and used in any newsletters, College promotional material or on the College website.

I/We agree that our daughter/son/ward shall comply with Manawatū College policy on all matters concerning the College, obey all rules, pay all fees, deposits and other incurred costs and wear the prescribed uniform. Should money owing not be paid within a reasonable time I/we understand the College may involve a debt collecting agency.

I/We consent to our son/daughter travelling in a vehicle driven by an employee of Manawatū College on a school trip or activity.

Signed

(Mother/Guardian)

(Father/Guardian)

(Student)

(Principal)

Date: _____

CYBERSAFETY AGREEMENT

I agree to:

- use my own Username and Password and not to give them to anyone else
- use the Internet only when given permission by a teacher, and not to use proxy sites.
- not view any inappropriate material or use ICT to harass, threaten or bully anyone.
- not bypass security, monitoring or filtering that is in place on the

- school network.
 - not connect any devices such as USB drives, camera or phones to run on school software without permission of the teacher.
 - respect all ICT systems and equipment and report any damage.
- I acknowledge that if any of the above are not followed I will have my log-on and password disabled for a time.

Signed (Student): _____