

PLEASE RETURN TO WAIMEA COLLEGE OFFICE

Student Details								
Date student is expec	ted to start a	t Waimea College:						
Student will be starting	Student will be starting at Waimea College in Year Level: (please circle one) 9 10 11 12 13					13		
Student's Legal/Last I Eg JONES as per birth certifi								
Student's Legal First I Eg Christopher John	Name(s):							
Student's Preferred N Eg Chris JONES	lame:		1					
Date of Birth:		///	Gender:					
Confirmation of R	esidency							
The College is require	ed to confirm	the residency of all students.						
• Were you born in	New Zealand	1?	Yes 🗖	No □	If n	o please	e state where	-
Have you attende	d a New Zeal	and school?	Yes 🗖	No 🗖				
Are you a New Zea	aland citizen	?	Yes 🗖	No 🗖				
If you have answered Documents	NO to any o	f these questions, please provide	Passport/Bi	rth Certifica	ite, Stu	dent Vi	isa and/or Residency	
Country of Citizenship	o:	First Language	(Spoken at ho	ome):				
Ethnicity								
An Ethnic Group is re	quired by the	Ministry of Education for statist	ical purposes	s. Please tio	k one	or more	e.	
□ Maori I	wi 1	2			_ 3.			
		know the name of your Iwi, tick						
(There is a copy o	f the 'Iwi Affiliation Reference Sheet' at th	ne College Recep	tion if you nee	ed assista	ince).		
□ NZ European /	Pakeha	☐ Pacific Island	☐ Other	· (please state)):			
Previous School								
								_
Contact Informati	on							
		Dootel Address						-
		Postal Address						
	Num/Stree	et:						
Postal Address:	Rural Deliv	ery:						
(If Different to	Suburb:							-
Physical Address)								
	Town:							
	Postcode:							

Primary Caregivers (Main Residence) – student mainly lives h	ere			
All correspondence will be sent to these contact details unless	the College is notified otherwise.			
Title:	Title:			
Name:	Name:			
Relationship:	Relationship:			
Phone Home:	Phone Home:			
Phone Cell:	Phone Cell:			
Email:	Email:			
Physical Address	Physical Address			
Num /	Num /			
Rural	Rural			
Suburb:	Suburb			
Town:	Town:			
Postcode:	Postcode:			
Phone Work:	Phone Work:			
Please record name and number of Caregiver that is to be co	ntacted via txt if student is absent:			
Name				
Contact Number				
	with the Primary and Secondary caregiver; that is regularly caregivers will receive a copy of newsletters, reports and			
Secondary Caregivers (Secondary Residence) – If app	licable			
Title:	Title:			
Name:	Name:			
Relationship:	Relationship:			
Phone Home:	Phone Home:			
Phone Cell:	Phone Cell:			
Email:	Email:			
Physical Address	Physical Address			
Num /	Num /			
Rural	Rural			
Suburb:	Suburb:			
Town:	Town:			
Postcode:	Postcode:			
Phone Work:	Phone Work:			

Health Details					
Medical Treatment					
First Aid Training. Waimea College will give n situations only. A register is kept of the	Parents/Caregivers enrolling a student at Waimea College give permission for the administration of first aid by staff with First Aid Training. Waimea College will give non-prescribed medication (according to the dosages specified) in emergency ituations only. A register is kept of the medication and treatment given. Students who require non-prescription nedication on a semi-regular basis are encouraged to provide their own supply which will be held in the College Reception or their use only.				
Medical Centre:		Doctor:			
Medical Conditions List any medical issues of which the school sl	hould be aware.				
Condition e.g. Asthma	Trea	tment e.g. Carries own inhaler (self-controlling)			
Medication Do you require the College to hold and/or ac If 'Yes' the College will make contact to confirm					
Learning Concerns List any learning difficulties of which the school supporting documentation.	ool should be aw	are eg. autism, dyslexia and attach copies of any relevant			
Emergency Contact – Other Caregiver	– If we can't get hold	of Primary or Secondary Caregiver			
Name:		Relationship:			
Phone Home:		Phone Cell:			

Enrolment Scheme Section

The Ministry of Education requires the College to ensure that all students meet the requirements of the Waimea College enrolment scheme. Details of the scheme are available from the College Reception. The College may require supporting evidence relating to the student's address, and/or the siblings identified at the top of the previous page.

Please tick the option below that applies to you.

4	_					
I		Saction	Λ C+	dent live	· INICIDE (tha zana
ı	•	Section	A - Stu	ueni nive:	S HINDIDE I	me zone

I confirm that:-

- a. The "home address" which I have provided under "Student Details" will be the "usual place of residence" of the named student when the school is open for instruction. If the "home address" is not yet known (or is different to the usual place of residence) go to **Section B**.
- b. This address is inside the zone described in the Waimea College enrolment scheme.
- c. The student will be living at that address (when the school is open for instruction) with a person who is the parent or legal guardian of the named student. If the student is boarding in the zone, go to **Section B**.

	Section B - Student live	s INSIDE the zone	hut circumstances a	ro different to thes	a licted above
ш	Section B - Student live	es inside the zone	e put circumstances a	re airrerent to tnos	e iisted above

In this situation, a parent or legal guardian must make an appointment for an interview with the Principal or a designated staff member.

Date of interview:	
Signed notes from the interview attached to this enrolment form by:	on / /

☐ Section C - Student lives OUTSIDE the zone

Indicate below which of the following priorities (one to six) applies to you. If you require more information on this, please contact the College Reception. You can also arrange for an interview if you are likely to be 'in-zone' by the date of first attendance.

Priority	Description	
1	Applicant for enrolment has Special Education (ORS) funding.	Special Education
2	Applicants who are siblings of current students.	Tick here and make sure that the siblings are named in the space on the previous page.
3	Applicants who are siblings of former students.	Tick here and give names(s) of siblings and year(s) enrolled:
4	Applicant is a child of a former student.	Tick here and give former student's name and years attended:
5	Applicants who are children of board employees.	Tick here and give name of the employee:
6	All other applicants.	Tick here

Living Arrangements

If there are any special circumstances or information that we need to know, please record it in this box. This could include access arrangements by another parent, family circumstances. Please supply any custody documents if required.

Siblings at Waimea College		
If the student being enrolled will have siblinclude brothers, sisters, stepbrothers, stethis form are correct for all older siblings in College Reception.	epsisters and any children of 'blended' fan	nilies. We will assume that the details on
1.	2.	3.
BYOD (Bring Your Own Device) an	d Learning from Home	
Tick if your child currently has:		
An internet connection at hor	ne to school (laptop or tablet with keyboa me r online learning (might be a shared devic	,

Computer Network and BYOD Agreement

The school's computer network, internet facilities, computers and other school ICT equipment/devices bring great benefits to the teaching and learning programmes at Waimea College, and to the effective operation of the school.

The school's computer network, internet access facilities, computer and other school ICT equipment/devices are for educational purposes appropriate to the school environment.

As a responsible user of ICT, students will help keep themselves and other people safe by following these rules:

- 1. Each student will have their own username and will log on only with that username. Students will not tell anyone else their password.
- 2. While at school or a school-related activity, students will not have any involvement with any ICT material or activity which might put themselves or anyone else at risk (e.g. bullying, harassing, or disrespecting someone's privacy personal information includes name, address, phone numbers, photos and videos).
- 3. Students can only use the internet and school network for appropriate educational purposes. If in doubt students will seek advice or ask a teacher.
- 4. If students accidentally access inappropriate material, they will report the incident to a teacher or staff member immediately.
- 5. Students must not download any files such as music, videos, games or programmes without the permission of a teacher. This makes sure the school complies with the Copyright Act 1994 including amendments. Anyone who infringes copyright may be personally liable under this law.
- 6. These rules apply to Waimea College equipment and any privately owned ICT equipment that is brought to school or on a school activity e.g. camp. Any images taken must be appropriate to the school environment.
- 7. Students will not connect any device or attempt to run any software on school ICT equipment without a staff member's permission. This includes all wireless technologies.
- 8. Students will respect all ICT systems in use at Waimea and treat all ICT equipment/devices with care.
- 9. The school may monitor or check traffic and any material sent, received and stored on our networks. The school may use filtering and/or monitoring software to restrict access to certain sites and data, including email.
- 10. If these rules are broken, the school may inform the student's parents or caregivers. In serious cases, the school may take disciplinary action against students. There may be some charge for repair costs. If illegal material or activities are involved, it may be necessary for the school to inform the police.

Disclaimer: Waimea College is not responsible for student-owned devices of any kind and is not liable for any personal device stolen or damaged. Responsibility to keep the device secure rests with the individual owner.

Blanket Consent for Education Outside the Classroom (EOTC)

Education Outside the Classroom (EOTC) is the name given to all events/activities that occur outside the classroom, both on and off the school site. This includes sport, performing arts and curriculum related trips.

- Our school believes in using a range of environments and experiences to enhance our students' learning.
- We have ready access to the beach, rivers, mountains, and the bush in our area and beyond. We are also
 close to various built environments in our community. These areas are rich learning environments for our
 students both in and out of school. They need to learn how to be safe. Our school also values the concept
 of providing students with opportunities. Some of the learning for students occurs beyond the school site
 and this document is seeking your consent for your student to participate in such learning.

The Ministry of Education's **EOTC guidelines** identify four EOTC activity types, each with recommended types of parental/caregiver consent. In brief they are:

Type of event	Description	Type of consent
	On-site: Activities on the school grounds (i) Lower risk environments e.g. house sports,	(i) None required
A	measuring for mathematics, painting (ii) Higher risk environments e.g. school pool,	(ii) Blanket consent
	or climbing wall	
	Off-site: Short visits in the local community during school time	
	(i) Lower risk environments e.g. Action Indoor	(i) Blanket consent
В	Sports, Science trips, Easby Park (ii) Higher risk environments e.g. aquatic environments (river, beach), cross-country	(ii) Blanket consent
	run, mountain biking	
	Off-site: Activities after school finishes (i) Lower risk environments e.g. Farm visits,	(i) Blanket consent
С	day hikes, movie theatre excursions (ii) Higher risk environments e.g. rock climbing skiing, kayaking, swimming in natural	(ii) Separate consent for each event or programme
	environments (river, sea) All off-site: Overnight or multiday	
D	(i) Lower risk environments e.g. sport tournaments	(i) Separate consent for each event or programme
	(ii) Higher risk environments e.g. Outdoor Education camps, mountain biking, alpine environments	(ii) Separate consent for each event or programme

All EOTC activity categories require staff to undertake an analysis of the risks, and to identify the management strategies required to eliminate, isolate and minimise the risks. Emergency procedures are also in place.

Signing the Enrolment form automatically gives your child cover for all blanket consent activities.

Waimea College requires that the following undertakings be agreed to by the parent/s or legal guardian on behalf of themselves and the enrolling student.

- Information provided on the page relating to the College Enrolment Scheme is correct and complete.
- I will advise the College of any subsequent change to this information.
- I have read and been given a copy of the sheet titled 'Enrolment Scheme Information for Parents'.
- I hereby undertake with the Waimea College Board of Trustees to observe the conditions and expectations outlined in the Handbook and this Enrolment Application, so far as they affect us.
- I will be a responsible user of the Information and Communication Technology (ICT) network.
- I am aware that there are costs associated with a number of College activities. I undertake to pay these costs before the activity takes place, unless I have made other arrangements with the Resource Manager.
- For the purposes of the Privacy Act 2020, I hereby acknowledge and understand that:-
 - The information collected will be used for the following purposes: enrolling my child, Waimea College assessing the education needs of my child and ensuring that education services and resources in respect of my child are provided to the school and Ministry of Social Development (MSD) as part of the Youth Service initiative.
 - The school collects and uses your child's information in accordance with the Privacy Act. The school sends some of your child's information to the Ministry of Education and other education and health agencies. The school will not provide your child's information to any other people or organisation without your authorisation, except in accordance with the Privacy Act.
 - Students' work and/or photographs may appear in school publications and **unless advised otherwise**, it is understood that the school has consent to the publication of work and/or photographs of the student that may appear in such school publications including newsletters, prospectus, magazine, some social media sites and advertising material.
- I agree to the participation of ______ in *lower risk* category **A** and **B** and **C** EOTC events while they are a student at Waimea College.
- I have provided the school with up to date medical, supervision and learning information in the enrolment form, and will make every endeavour to keep this information current.
- I accept that physical restraint may be used if the school reasonably believes the safety of my child or of any other person is at serious or imminent risk.
- If applicable, I have read and accepted the School Transport Safety and Behaviour information within the following link: http://www.education.govt.nz/school/running-a-school/school-transport/safety-and-behaviour
- I confirm that the residency information provided is true and correct (*Documents are attached if applicable*)

I confirm	that the	e address that I have provided to	the sch	ool will be the us	ual place	of residence of	
		(studen	t's name	e) when the scho	ol is open	for instruction.	
		I will advise the school of any s	subseque	ent change of add	dress.		
Name of Parent/L	egal Gua	ardian:					-
Signature of Pare	nt/Legal	Guardian:			Date	://	
Signature of Stud	ent:				Date	://	
or completion by des	ianated V	Vaimea College staff member					
	_	taff member):			on	//	
Student enrolled as a	(tick one):	☐ Regular Student ☐ Fee P Copies of supporting documentation			ange stude	ent: Scheme	
Out of Zone priority: 1	2 3	4 5 6 Ballot Numl	oer: 🔃				
Enrolment approved by:		Zoning approved:		Initial data entry:		Letter sent:	
Enrolled by:		Residency approved (documents attached):		KAMAR entry:		Portal letter:	
Data and a				ENDOL deteless			