

Application for Enrolment – Section A

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MARANATHA
CHRISTIAN SCHOOL

Student Details

Legal First Names: _____

Legal Surname: _____

Preferred First Name: _____

Preferred Surname: _____

Male/Female _____ Date of Birth: _____

Requested Start Date: _____

Ethnicity: 1 _____

2 _____

3 _____

Iwi Affiliation: 1 _____

2 _____

3 _____

Citizenship: _____

Main language: _____

Other languages spoken: _____

Siblings who are past or present pupils: _____

Names and date of birth of younger siblings: _____

Checklist for Completion

For each student one copy of Section A completed

For each family one copy of Section B completed

Confidential reference form forwarded to Pastor/Minister for completion

Latest school report (for students who have attended a previous school)

Pre-school report (for New Entrants)

NZ Citizen: copy of NZ Birth Certificate or Passport

Non-NZ Citizen/Permanent Resident of NZ: copy of Residency Visa and Residency Permit

Applicants born 1995 or later must provide a copy of Immunisation

Certificate signed by a doctor

For Office Use			
Received		Enrolled	
Receipt		Start Date	
Interview		Class/Year	
Approved			

180 Hill Road, Belmont, Lower Hutt 5010 / Ph: 04 5650749 / Fax: 04 5650747 / Email: maranatha@maranatha.school.nz / www.maranatha.school.nz

New Entrant Details

Prior-participation in Early Childhood Education

Did the child attend one or more Early Childhood Education service(s) in the six months prior to starting school? Please complete the table below for the last service(s) attended.

1. If the child was attending more than one service *at the same time*, please enter hours per week for up to three services.
2. 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.
3. If the child's attendance hours varied, or the parent/caregiver is uncertain, please enter an approximate or average number of **hours per week**.

Please enter the number of hours per week for up to three services:	Service 1 (hrs/week)	Service 2 (hrs/week)	Service 3 (hrs/week)
a. Kōhanga Reo			
b. Playcentre			
c. Kindergarten <i>or</i> Education and Care Centre			
d. Home based service			
e. Playgroup			
f. The Correspondence School – Te Aho o Te Kura Pounamu			

Did the child regularly attend Early Childhood Education?

“Regularly attend” means the child was booked in to a service for sessions each week/fortnight, and generally went to those sessions unless they were sick, or on holiday, or had a family occasion, etc.

- Yes, for the last ____ year(s).
- Not regularly, only occasionally with no on-going schedule.
- No, did not attend ECE.

Please include a pre-school report

Other Level Student

Present School: _____

Present Year Level: _____

Reason for Leaving: _____

Please include a copy of the latest school report.

Student Medical Details

Family Doctor's Name: _____

Phone: _____

Doctor's Surgery Name: _____

Doctor's Surgery Address: _____

Medical History

Allergies: _____

Conditions: _____

Treatment: _____

Sight: _____

Hearing: _____

Other health factors the school should know about:

Special Learning Requirements

Consents

Please tick the consents that you agree with for your child:

Sudden Injury

I give permission for the school to contact a local doctor in the case of sudden illness or injury of my child.

Paracetamol

I give permission for the school to administer paracetamol to my child without needing to contact me first.

Publication of Photo

I give permission for the school to publish un-named photos of my child in any school publication:

Class List

I give permission for my child's name, phone, physical address, the name of my child's primary contact and other contact details to be recorded in a class list.

Before and/or after interview, do you give Maranatha Christian School permission to contact the applicant's school for additional information? YES / NO (please circle answer)

Transport arrangements

Do you intend to use the school bus service? YES / NO (please circle answer)

Application for Enrolment – Section A

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Introduction to our child

If your child is under 4 years of age, this page may be required to be re-submitted closer to interview date.

Student's Name: _____

I/we consider our child has particular strengths in the following areas: (eg, academic, creative, social, spiritual)

I/we are aware of learning difficulties in the following areas:

I/we would like our child to participate in or be especially encouraged in the following areas:

I/we believe our child's temperament to be:

I/we have found that our child responds best to discipline that is:

For Older Students

Hobbies/Areas of Interest

Community Involvement:

Sports Background:
