



Welcome to the Bream Bay College On-line Enrolment Application form. *NB: The completion of this form is not a confirmation of acceptance onto the school roll.*

Once we have received this form, we will contact you to arrange an interview.

Copies of the following are required for the enrolment to proceed:

- **Evidence of address i.e. rates, tenancy agreement, water/power bill (it needs to be a bill for a service to the property or similar).**
- Copy of Birth Certificate/Passport
- Copy of most recent school report
- If you do not have NZ residency we will need to sight passports, student visa, and work permit documentation
- Documentation for any custody or other court arrangements
- Immunisation Information

Enrolment Information

Intended Start Date

Start Year Level

BILINGUAL EDUCATION (Te Reo Māori) at year 7 to 10: Do you wish to be considered for this?
 Yes No

THIS SECTION IS FOR THE STUDENT'S DETAILS ONLY

Please Note: "Legal Name" will be used on your child's reports, NCEA and awards, whereas "Preferred Name" is how your child prefers to be known at school by their peers and teachers.

Student Legal Name:

First Name

Middle Name

Last Name

Preferred (Known) Name:

First Name

Middle Name

Last Name



Date of Birth

(Day/Month/Year)

Gender Male Female Neutral Specified

Country of Birth

Country or Jurisdiction of Citizenship

Language Spoken at Home

Ethnicity

Iwi

Previous School

Residence A / Primary Contact Details

Please note: The address given at the time of application **must be** the student's usual place of residence.

Residence A - Caregiver 1 will be the MAIN CONTACT for communications, such as attendance matters, sickbay, etc. Residence A - Caregiver 2 will be a parent/caregiver's partner who also lives at the same address.

If the student lives at a second residence, respond to the "Does the student have a second residence" question with 'yes' and provide details in the section that appears.

Residence A / Primary Address

Caregiver 1

Full Name

Relationship Mother Father Other:

Email

Phone (Home)

Phone (Mobile)

Occupation

Phone (Work)



Caregiver 2

Full Name

Relationship Mother Father Other:

Email

Phone (Home)

Phone (Mobile)

Occupation

Phone (Work)

Does the student have a second residence?

Yes No

Health Details

Doctor Name

Dentist Name

Does your child have any medical conditions (eg diabetes, allergies, asthma, special conditions)?

Does your child have any physical conditions that might affect classroom learning (eg, hearing loss, need for glasses, loss of motor skills, etc)?

If your child has a medical condition and requires medication during school time (eg, Ritalin, antihistamines for bee/wasp stings, medication for migraines, etc), please arrange a supply of their medication to be left at the Student Office with the sickbay nurse. You will need to complete a separate consent form at that time.

Allow Paracetamol

Yes No 1 tablet 2 tablets

Allow Antihistamine

Yes No



Emergency Contact Details

THIS SECTION IS FOR A BACKUP CONTACT PERSON WHO IS NOT A PARENT/CAREGIVER

In the event of an emergency, we will attempt to contact the Residence A caregivers first. If we cannot reach any of the caregivers from either residence, who else might we contact to collect your child from school e.g. grandparent, family friend, neighbour? (Emergency Contact must live nearby)

Emergency Contact 1

Contact Name

Relationship

Home Phone

Mobile Phone

Emergency Contact 2

Contact Name

Relationship

Home Phone

Mobile Phone

Special Interests

Tell us a bit about your child's interests and achievements.

Academic

Awards

Sports

Cultural Arts

Hobbies

Languages

Has your son/daughter ever been stood-down or suspended from any school

Yes No

If your son/daughter has been stood-down or suspended from any school please give details:



Outside Agencies. Please specify if you have had any previous involvement with:

- | | | |
|--|-----------------------------------|---|
| <input type="checkbox"/> Resource Teacher of Reading | <input type="checkbox"/> Hospital | <input type="checkbox"/> Child Youth and Family Service |
| <input type="checkbox"/> Counsellor | <input type="checkbox"/> CAMHS | <input type="checkbox"/> Educational Psychologist |
| <input type="checkbox"/> Speech / Language Therapist | <input type="checkbox"/> SPELD | <input type="checkbox"/> SES |

Agreements

MEDIA AGREEMENT

Publication of information and images featuring the achievements and activities undertaken by my child. Examples of such publications include, but are not limited to, school website, newspapers, magazines, concert videos and school promotional material.

- Agree Disagree

ADDRESS AGREEMENT

I/we confirm that the address which I/we have provided in this application to enrol will be the usual place of residence for the enrolled student when the school is open for instruction. I will advise the school of any subsequent change.

- Agree Disagree

OUTSTANDING FEES AGREEMENT

As Parent(s)/Caregiver(s)/Guardian(s) of the student named above I/we agree to ensure that our son/daughter meets the minimum competency standards along with other rules of Bream Bay College. The College reserves the right to refer outstanding fees to a debt collector including all charges incurred from the Debt Collection agency. This will apply where an agreed plan has not been put forward by the Debtor, and where the account is more than 90 days overdue.

- Agree Disagree

The following agreements are on our Policies & Procedures page on the Bream Bay College website. Log in details are: Username: breambaycollege Password: petersnellroad

CELLPHONE AGREEMENT

[Click here to read our Cellphone Regulations](#)



I have opened and read the Cell phone regulations and have understood everything that has been outlined.

Agree Disagree

DIGITAL TECHNOLOGY AND ONLINE SAFETY AGREEMENT

[Click here to read our Digital Technology and Online Safety](#)

I have opened and read the Digital Technology and Online Safety Policy and have understood everything that has been outlined.

Agree Disagree

ATTENDANCE PROCEDURES AGREEMENT

[Click here to read our Attendance Procedures](#)

I have opened and read the Attendance Procedures and have understood everything that has been outlined.

Agree Disagree

I AGREE THAT THE INFORMATION ON THIS FORM IS TRUE AND CORRECT:

Signature

Date

Please provide the following to support this enrolment application:

- Your child's birth certificate OR passport.
- If not born in New Zealand, student and parents' passport, Citizenship, Visa, Work Permit and Entry Permit (date of entry stamp into New Zealand).
- Your child's most recent school report (or relevant screenshots of Reading, Writing and Mathematics grades) and an up-to-date NCEA Record of Learning for Year 11, 12, 13.
- Relevant legal documents (e.g., custody agreements, parent orders, etc)
- Proof of permanent resident within our school zone. This needs to be a current long-term tenancy agreement, a sale and purchase agreement or a recent household utilities or rates account. The document needs to clearly show the parent/caregiver's full name and their residential address (not required for out-of-zone applications).

Your enrolment application is not complete until we have confirmed the necessary documents have been provided.