



APPLICATION FOR ENROLMENT 2011

DATE OF APPLICATION:		YEAR LEVEL: <input type="checkbox"/> Year 9 <input type="checkbox"/> Year 10 <input type="checkbox"/> Year 11 <input type="checkbox"/> Year 12 <input type="checkbox"/> Year 13			
STUDENT'S DETAILS:		<input type="checkbox"/> IN ZONE ENROLMENT		<input type="checkbox"/> OUT OF ZONE ENROLMENT	
Family Name:		Date of Birth: / /			
First Names:		Preferred Name:			
Country of Birth:		First Language:			
Address:					
<i>Verification of IN ZONE address must be provided. Include Rates account or a 12-month tenancy agreement, PLUS telephone or electricity account.</i>					
Student's Email:			Mobile Phone:		
Current School:			Current Year Level:		
Ethnic Group/s:	<input type="checkbox"/> European	<input type="checkbox"/> Māori	<input type="checkbox"/> Samoan	<input type="checkbox"/> Asian	<input type="checkbox"/> Other (Please specify):
If Maori, list iwi/s:	1.		2.		3.
Tick ONE Box:	<input type="checkbox"/> NZ Citizen	<input type="checkbox"/> Perm. Resident	<input type="checkbox"/> Other:		
Name and Form of brother currently at Wellington College:					Form:
Name and Year of brother previously at Wellington College:					Years:
FATHER'S DETAILS:					
Title:	First Name:		Surname:		
Living with Son: <input type="checkbox"/> Yes <input type="checkbox"/> No			Access: <input type="checkbox"/> Yes <input type="checkbox"/> No		
Occupation:		Place of Work:			
Telephone (Home):		Work:		Mobile:	
Home Address:					
Email (Home):			Email (Work):		
If you live at a different address from your son, do you wish to receive a copy of the monthly Collegian Newsletter and School Reports? <input type="checkbox"/> Yes <input type="checkbox"/> No					
MOTHER'S DETAILS:					
Title:	First Name:		Surname:		
Living with Son: <input type="checkbox"/> Yes <input type="checkbox"/> No			Access: <input type="checkbox"/> Yes <input type="checkbox"/> No		
Occupation:		Place of Work:			
Telephone (Home):		Work:		Mobile:	
Home Address:					
Email (Home):			Email (Work):		
If you live at a different address from your son, do you wish to receive a copy of the monthly Collegian Newsletter and School Reports? <input type="checkbox"/> Yes <input type="checkbox"/> No					
LEGAL GUARDIAN'S DETAILS: (Where Applicable)					
Title:	First Name:		Surname:		
Relationship to Student:					
Occupation:		Place of Work:			
Telephone (Home):		Work:		Mobile:	
Home Address:					
Email (Home):			Email (Work):		

EMERGENCY CONTACT DETAILS: (Not parent or caregiver)		THIS INFORMATION IS ESSENTIAL	
Title:	First Name:	Surname:	Telephone: (Home)
Relationship to Student:			Telephone: (Work)
Home Email:			Mobile:
STUDENT'S SUBJECT INFORMATION: (Option Subject Choices)			
Year 9	1.	2.	
Year 10 and Year 11	1.	2.	3.
Year 12 and Year 13	1.	3.	5.
	2.	4.	6.
Subjects taken at previous secondary school (Y10-Y13 applications)	1.	3.	5.
	2.	4.	6.
EXTRACURRICULAR ACTIVITIES (Current Involvement):			
Sports	1.	2.	3.
Cultural:	1.	2.	3.
MEDICAL INFORMATION:			
Illness/Allergies:		Medication/s:	
Special Needs: (If applicable)			
COLLEGE DIRECTORY:			
A directory of students, with form classes, addresses, telephone numbers and email addresses is produced by College Mothers and distributed to all students early in the year. Please indicate your consent for this information to be published for the time your son is at Wellington College.			
<input type="checkbox"/> Yes, include our details <input type="checkbox"/> No, do not include any of our details			
SCHOOL FEES:			
If the Caregivers live at a separate address, please advise where the school fees invoice should be mailed to.			
WELLINGTON COLLEGE OLD BOYS' AFFILIATIONS:			
The following information does not enhance your application. It is just to assist with the family links with the WCOBA database.			
Student's Father	Have you had any relations who have attended Wellington College?		<input type="checkbox"/> Yes <input type="checkbox"/> No
Name of Relative:	Relationship:	Years at School:	
Name of Relative:	Relationship:	Years at School:	
Name of Relative:	Relationship:	Years at School:	
Student's Mother	Have you had any relations who have attended Wellington College?		<input type="checkbox"/> Yes <input type="checkbox"/> No
Name of Relative:	Relationship:	Years at School:	
Name of Relative:	Relationship:	Years at School:	
Name of Relative:	Relationship:	Years at School:	

The purpose of collecting this information is to allow Wellington College to carry out the functions required of it as a secondary education provider and information may be disclosed to specified agencies for this purpose or as stated in Part 10, Clause 97 of the Privacy Act, 1993. Wellington College undertakes to comply with the provisions of the Privacy Act, 1993, which relate to collection, storage, usage and disclosure of personal information.

ENROLMENT QUESTIONNAIRE

The Education Act gives a guarantee of enrolment to students who live in the home zone specified in the College's enrolment scheme. The Board needs to be sure that an in zone address is genuine, because it is required to manage the enrolment scheme for the benefit of local students. In addition to specific documents previously supplied showing proof of residence, it will assist the Board if you complete the following questionnaire.

STUDENT'S NAME:	
1	What school is the student currently attending?
2	What will be the address of the student's place of residence when the College opens in 2011?
3	Will the student be living at this address for 12 months after the College opens? <input type="checkbox"/> Yes <input type="checkbox"/> No
IF THE STUDENT WILL BE LIVING WITH HIS PARENT/S OR LEGALLY APPOINTED GUARDIAN/S:	
4	Have you lived at this address for more than one year? <input type="checkbox"/> Yes <input type="checkbox"/> No
5	Do you intend to live permanently at this address (for the next 12 months?) <input type="checkbox"/> Yes <input type="checkbox"/> No
6	Do you own the property? <input type="checkbox"/> Yes <input type="checkbox"/> No
7	If you are the guardian, do you have documentation showing legal guardianship? <input type="checkbox"/> Yes <input type="checkbox"/> No
8	If separated/divorced, do you share custody? <input type="checkbox"/> Yes <input type="checkbox"/> No
IF THE STUDENT WILL BE BOARDING IN ZONE:	
9	I confirm that _____, with whom my son is boarding, will have the primary duty of care and therefore should be the College's first contact in matters related to discipline and progress at the College <input type="checkbox"/> Yes <input type="checkbox"/> No
10	How long has the boarding arrangement been in place? ____ Years ____ Months
11	Is it a permanent boarding arrangement? <input type="checkbox"/> Yes <input type="checkbox"/> No
12	What is the reason for the boarding arrangement?
13	What is your home address?

If any issues arise from the above information, the Board may wish to interview you to ensure the genuineness of the application. If your application for enrolment is declined, you may appeal the Board's decision by asking the Ministry of Education to direct the Board to enrol the student. Application forms are available from the Ministry's local office. (Ref: Education Act s11.O, 11.OA and 11.P).

The Ministry of Education has advised that parents should be warned of the possible consequences of deliberately attempting to gain unfair priority in enrolment by knowingly giving a false address or making an in zone living arrangement which they intend to be only temporary, for example:

- Renting accommodation in zone on a short-term basis or
- Arranging temporary board in zone with a relative or family friend.

The College may actively collect information to ensure that enrolment data provided is accurate.

If the College learns that a student is no longer living at the in zone address given at the time of application for enrolment, and has reasonable grounds to believe that a temporary in zone residence has been used for the purpose of unfairly gaining priority in enrolment at the College, then the Board may review the enrolment. Unless the parents can provide a satisfactory explanation within 10 days, the Board may annul the enrolment. This course of action is provided for under Section 11.OA of the Education Act 1989.

The address given at the time of application for enrolment must be the student's usual place of residence when the College is open for instruction. From time to time, parents who live outside the College's home zone, submit enrolment applications that dishonestly claim residence in the zone. Some people think that there is no crime if what is involved is school enrolment, and others think that the conduct is no more than making a false declaration. In fact, dishonest applications could constitute offences under the Crimes Act that carry maximum sentences of many years' imprisonment. For example, using a forged document, such as a doctored tenancy agreement, is a crime for which the maximum term of imprisonment is 10 years.

DECLARATION:

I/we confirm that the information contained in this enrolment application and enrolment questionnaire is true and correct in every respect and my/our son (ward) shall be subject to all rules, regulations and expectations of the College as stated in the Prospectus.

The address which I/we have provided to the College will be the usual place of residence of _____ (student's name) when the College opens in 2011, and I/we intend to live at this address permanently. I/we confirm that I/we will advise the College if for any reason there is a subsequent change of address.

I/we also agree to give the earliest possible advice to the College of a decision to withdraw this application.

Signed: Date: / / Relationship to the Student:

Signed: Date: / / Relationship to the Student:
(At least one parent to sign)

CHECKLIST:**REQUIRED FOR IN ZONE APPLICATIONS**

LIVING IN OWN HOME:	Two recent original documents showing residence in zone:
	<input type="checkbox"/> Rates account or <input type="checkbox"/> a 12-month tenancy agreement PLUS one of the following:
	<input type="checkbox"/> Telephone Account <input type="checkbox"/> Electricity Account
	PLEASE NOTE THAT PO BOXES ARE NOT PROOF OF RESIDENCE IN ZONE.
LIVING IN RENTED HOME:	Two recent original documents showing residence in zone:
	<input type="checkbox"/> Signed Copy of your Tenancy Agreement. <i>A current rental agreement is acceptable to the Board for an IN ZONE application. The address must clearly show that this will be the student's residential address <u>for one year from the time the student starts at the College.</u></i>
	PLUS one of the following: <input type="checkbox"/> Telephone Account <input type="checkbox"/> Electricity Account
ALSO TO BE INCLUDED:	1 <input type="checkbox"/> Copy of Birth Certificate
	2 <input type="checkbox"/> Copy of Passport if student was born overseas and date of entry into New Zealand
	3 <input type="checkbox"/> Copy of New Zealand Residency (if applicable)
	4 <input type="checkbox"/> Copy of Approved Refugee Status (if applicable)
NOTE:	If parent's are studying for a PhD at a New Zealand University as an International Student, a copy of parent/s passport, study visa and enrolment acceptance for PhD is required.
	If parent/s are in New Zealand on a Work Permit, a copy of parent/s passport work visa is required.

OFFICE USE ONLY:

<input type="checkbox"/> Birth Certificate
<input type="checkbox"/> Confirmation of Application
<input type="checkbox"/> Letter
<input type="checkbox"/> Residential Verification
<input type="checkbox"/> Subjects
<input type="checkbox"/> Y9 Contributing School Form
RECEIVED:
<input type="checkbox"/> Completed Acceptance
<input type="checkbox"/> Withdrawn Notification
<input type="checkbox"/> Y9 Contributing School Form
<input type="checkbox"/> Other