



St Mary's College, Ponsonby
11 New Street, Ponsonby, Auckland 1011

Application for Enrolment

SECTION B - DATE RECEIVED:

PLEASE ATTACH 1
PASSPORT SIZE
PHOTO HERE

Year Level:	Year 7	Year 8	Year 9	Year 10	Year 11	Year 12	Year 13
Year of Entry	2019	2020					

LEGAL FIRST NAME:	LAST NAME:
PREFERRED NAME:	PRESENT SCHOOL: START DATE:
MOTHER'S NAME:	FATHER'S NAME:

ENROLMENT CHECKLIST

Section A has been submitted on line

St Mary's College Enrolment Form signed

- Mother/Guardian
 Father/Guardian
 Student

- 2 Passport sized photos
 Website Photo Permission Yes / No

Preference students

- 5.1-5.5 Preference Certificate signed by Parish Priest
 5.1-5.5 Copy of Catholic Baptismal Certificate and any Sacramental Certificates
 5.2-5.5 Copy of supporting parties Baptismal Certificate

Non-Preference students - A reference from your

- Principal OR Church Community

Uses of Devices and Internet agreement (BYOD) signed

- Student
 Parent/Guardian

- School Report (copy of most recent report available)

- Copy of Birth Certificate

FOR NZ RESIDENTS NOT BORN IN NEW ZEALAND

- Copy of Passport with residence stamp/label
NZ Residency: Yes/No
Date of Arrival into New Zealand:

FOR NON NEW ZEALAND RESIDENTS

- Copy of Passport with Visa/Permit which states the student is a domestic student
NZ Residency: Yes/No
Date of Arrival into New Zealand:

OFFICE USE ONLY

PREFERENCE: 5.1 5.2 5.3 5.4 5.5	KAMAR NUMBER: <input type="text"/>
NON-PREFERENCE: YES/NO	
SISTER AT ST MARY'S COLLEGE: Yes/No NAME & YEAR LEVEL:	ST MARY'S COLLEGE AFFILIATIONS:
SPORTS:	MUSIC:

FAMILY - PRIMARY PARENTS/GUARDIANS

Mother/Stepmother/Guardian (circle as appropriate)		Father/Stepfather/Guardian (circle as appropriate)	
Title:		Title:	
Name:		Name:	
Date of Birth:		Date of Birth:	
Ethnic Group:		Ethnic Group:	
Occupation:		Occupation:	
Place of Work		Place of Work	
Language		Language	
Religion		Religion	

STUDENTS PHONE CONTACT DETAILS

Student Home Phone:		Student Cell Phone:	
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FAMILY - SECONDARY PARENTS/CAREGIVERS

Mother/Stepmother/Guardian (circle as appropriate)		Father/Stepfather/Guardian (circle as appropriate)	
Title:		Title:	
Name:		Name:	
Date of Birth:		Date of Birth:	
Ethnic Group:		Ethnic Group:	
Occupation:		Occupation:	
Place of Work		Place of Work	
Language		Language	
Religion		Religion	

OTHER FAMILY INFORMATION

Custodial Parent/s:	<input type="checkbox"/>	Both Parents	<input type="checkbox"/>	Mother Only	<input type="checkbox"/>	Father Only
	Other (specify name and relationship)					
During the school week the student Lives with:	<input type="checkbox"/>	Both Parents	<input type="checkbox"/>	Mother Only	<input type="checkbox"/>	Father Only
	<input type="checkbox"/>	Guardian (relationship)				
Custody/access arrangements about which the school should be aware (please provide relevant documents):						

DIRECTIONS FOR CORRESPONDENCE

As family structures can vary, the following information is requested to ensure that correspondence is sent to the correct family members:

Send Copy of Reports to:	<input type="checkbox"/>	Both Parents	<input type="checkbox"/>	Father only	<input type="checkbox"/>	Mother only	<input type="checkbox"/>	Other (please specify)
Send Copy of Accounts to:	<input type="checkbox"/>	Both Parents	<input type="checkbox"/>	Father only	<input type="checkbox"/>	Mother only	<input type="checkbox"/>	Other (please specify)
Send Copy of newsletters by email?	<input type="checkbox"/>	Both Parents	<input type="checkbox"/>	Father only	<input type="checkbox"/>	Mother only	<input type="checkbox"/>	Other (please specify)

CONDITIONS OF ENROLMENT

NOTE: The enrolment application must be signed by BOTH parents/guardians and student

I/We the undersigned, accept as conditions of enrolment that:

Please tick the boxes to acknowledge you have read and accept the statements below

- ❖ The student will participate in the general school programme that gives St Mary's College its Catholic Character.
- ❖ **Attendance Dues:** As a condition of attendance, I/We will pay the Attendance Dues as determined by the Proprietor and approved by the Minister of Education under Section 36 of the Private Schools Conditional Integration Act 1975. I/We accept that the school can discontinue attendance of the above named pupil in default of this undertaking.
- ❖ **Subject Fees and Contributions:** I/We agree to pay St Mary's College subject fees and contributions, as determined from time to time by the Board of Trustees and Board of Proprietors.
- ❖ **Uniform:** I/We will ensure that the student will at all times abide by the uniform requirements of the College.
- ❖ **Conduct:** I/We have sighted the Code of Conduct of St Mary's College and will ensure the student abides by the rules provided therein.
- ❖ **Privacy Act:** We acknowledge that the personal information we have supplied on the enrolment form is being collected to assist the College in assessing this application for enrolment, and if successful, providing pastoral care and education for our child. The College is authorised to pass this information to other schools, educational or government authorities when required for the legitimate use of those authorities. Similarly, the College is authorised to obtain whatever personal information it legitimately requires regarding the student from the student's present or previous school/s.
- ❖ It is the responsibility of the parents to keep the school advised of any change in circumstances including contact details, custodial arrangements and matters pertaining to the health and safety of the child.

Decision on Enrolment: Please tick the boxes to acknowledge you have read and accept the statements below

- ❖ I/We acknowledge that enrolment at the College is subject to availability of places within the prescribed allocation and that the final decision on whether a student meets the enrolment criteria and is therefore able to be accepted as a student of St Mary's College rests with the Principal.
- ❖ I/We acknowledge that the information provided in this application is true and correct. I/We understand that if it is found that information provided is false this enrolment will be voided.
- ❖ I/We acknowledge that we have fully disclosed all information regarding my daughters behaviour/learning/mental health/health matters.

Mother or Guardian Name _____ Mother or Guardian Signature _____

Date _____

Father or Guardian Name _____ Father or Guardian Signature _____

Date _____

Student Name _____ Student Signature _____

Date _____