



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

Application for Enrolment

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	2018	2019	2020	2021	2022	2023	2024

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

ENROLMENT CHECKLIST

St Mary's College Enrolment Form	
<input type="checkbox"/> Signed Conditions of Enrolment Mother/Guardian	<input type="checkbox"/> 2 Passport sized photos
<input type="checkbox"/> Signed Conditions of Enrolment Father/Guardian	<input type="checkbox"/> Website Photo Permission Yes / No
<input type="checkbox"/> Signed Conditions of Enrolment Student	
Preference students	Non-Preference students - A reference from your
<input type="checkbox"/> 5.1 Preference Certificate signed by Parish Priest	<input type="checkbox"/> Principal OR Church Community OR Close Friend
<input type="checkbox"/> 5.1 Copy of Catholic Baptismal Certificate and any Sacramental Certificates	
<input type="checkbox"/> 5.2-5.5 Preference Certificate signed by Parish Priest	
<input type="checkbox"/> 5.2-5.5 Copy of supporting parties Baptismal Certificate	
Uses of Devices and Internet agreement (BYOD)	<input type="checkbox"/> School Report (copy of most recent report available)
<input type="checkbox"/> Student has signed uses of devices form	<input type="checkbox"/> Copy of Birth Certificate
<input type="checkbox"/> Parent/Guardian has signed uses of devices form	
FOR NZ RESIDENTS NOT BORN IN NEW ZEALAND	FOR NON NEW ZEALAND RESIDENTS
<input type="checkbox"/> Copy of Passport with residence stamp/label	<input type="checkbox"/> Copy of Passport with Visa/Permit which states the student is a domestic student

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	ST MARY'S COLLEGE AFFILIATIONS:
NAME & YEAR LEVEL:	
SPORTS:	MUSIC:

THIS SECTION IS FOR OFFICE USE ONLY

Special Need Requirements	
<u>LEARNING NEEDS:</u>	
<u>MEDICAL ALERT:</u>	
Notes	
<u>ACADEMIC PROFILE:</u>	
<u>EXTRA CURRICULUM:</u>	
<u>SPECIAL INFORMATION:</u>	
<u>OTHER:</u>	

The enrolment is: PREFERENCE / NON PREFERENCE

The application is: ACCEPTED / DECLINED/ DEFERRED

Signed _____ Date _____



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PHOTO HERE

Application for Enrolment

STUDENT INFORMATION

Surname:		First Names:	
Preferred Name:		Date of Birth:	
Ethnicity groups/s to which you affiliate	1st 2nd 3rd	Which 'iwi'?:	1. 2.
Language at Home:		Country of Birth:	
Present School:		NZ Residency:	
Present Year Level:		NZ Permit No:	
Religion:		Date of Arrival:	
Baptised (place/date):		Confirmed/1 st Holy Communion (place / date):	

STUDENT'S HOME ADDRESS

Street Name and No.		Suburb:	
Town:		Postcode:	
Home Phone:		Student Cell Phone:	

APPLICANT'S PROFILE

Interests and Activities at School: Please include any school responsibilities and leadership responsibilities			
Hobbies and Activities Outside of School: Please include any community or church groups			
Music/Drama			
What instrument/s do you play?			
Number of Years:			
What music exams have you passed?			
Do you sing in a Choir?		How many years?	
Any other Music / Drama involvement:			

Sports Involvement:			
Sport	Name of Club	Years	Special Representation or achievements
SACRAMENTAL INFORMATION			
Baptised Yes/No	Confirmation Yes/No	Eucharist (1 st Communion) Yes/No	Reconciliation Yes/No
Please provide copies of these Sacramental Certificates.			

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):						

PRIMARY PARENTS/GUARDIANS – MAIN RESIDENCE			
Mother/Stepmother/Guardian (circle as appropriate)		Father/Stepfather/Guardian (circle as appropriate)	
Title:		Title:	
Surname:		Surname:	
First Names:		First Names:	
Date of Birth:		Date of Birth:	
Relationship:		Relationship:	
Home Phone:		Home Phone:	
Cell Phone:		Cell Phone:	
Email:		Email:	
Home Address:		Home Address:	
Suburb		Suburb	
City:		City:	
Postal Code:		Postal Code:	
Ethnic Group:		Ethnic Group:	
Occupation:		Occupation:	
Place of Work		Place of Work	
Work Phone		Work Phone	
Work Address		Work Address	
Language		Language	
Religion		Religion	

SECONDARY PARENTS/CAREGIVERS - SECONDARY RESIDENCE

Mother/Stepmother/Guardian (circle as appropriate)		Father/Stepfather/Guardian (circle as appropriate)	
Title:		Title:	
Surname:		Surname:	
First Names:		First Names:	
Date of Birth:		Date of Birth:	
Relationship:		Relationship:	
Home Phone:		Home Phone:	
Cell Phone:		Cell Phone:	
Email:		Email:	
Home Address:		Home Address:	
Suburb		Suburb	
City:		City:	
Postal Code:		Postal Code:	
Country:		Country:	
Occupation:		Occupation:	
Place of Work		Place of Work	
Work Phone		Work Phone	
Work Address		Work Address	

EMERGENCY CONTACT (other than Parent)

EMERGENCY CONTACT (other than Parent)			
The person nominated should be a person who is available to come and collect your child at short notice if the need should arise and a parent is not available.			
First Name:		Surname:	
Relationship to student:			
Home Phone		Cell Phone	

DIRECTIONS FOR CORRESPONDENCE

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:		Both Parents		Father only		Mother only	Other (please specify)
Send Copy of Accounts to:		Both Parents		Father only		Mother only	Other (please specify)
Send Copy of newsletters by email?		Both Parents		Father only		Mother only	Other (please specify)

HEALTH DETAILS

Has your daughter ever suffered from?							
Asthma	Yes / No	Diabetes	Yes / No	Epilepsy	Yes / No	Rheumatic Fever	Yes / No
Permission to take Panadol			Yes / No				
Doctor's Name:							
Doctor's Contact Details:							
Does she suffer from any allergies, notifiable disease, medical condition or disability?					Vaccination History		
					Yes/No	Hepatitis B	
					Yes/No	Measles	
					Yes/No	Mumps	
					Yes/No	Rubella	
					Yes/No	Tetanus	

ACADEMIC/PASTORAL DETAILS

Has your daughter been referred for assistance with behaviour/learning/mental health/health matters? If yes please provide details	

ST MARY'S COLLEGE AFFILIATIONS

Sisters attending St Mary's College	Name:	Year Level:	
Sisters previously attended St Mary's College	Name:	Last Year Attended:	
	Name:	Last Year Attended:	
Mother who previously attended St Mary's College	Maiden Name:	Last Year Attended:	
Other Affiliations			

WEBSITE PHOTO PERMISSION

<p>I _____ (full name) DO/DO NOT give permission for a photograph including my daughter _____ to be included in the St Mary's College newsletter, website or other promotional material.</p> <p>Signed _____ Date _____</p>	
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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.

Mother or Guardian Name _____ Mother or Guardian Signature _____

Date _____

Father or Guardian Name _____ Father or Guardian Signature _____

Date _____

Student Name _____ Student Signature _____

Date _____



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USE OF DEVICES & INTERNET AT ST MARY'S COLLEGE

As BYOD (Bring Your Own Device) is being implemented at St Mary's College it is vitally important that we address the safety issues which are involved.

Currently devices that provide internet access are prevalent throughout the school in the form of cellphones, tablets, laptops and desktop computers. In the last few years these devices have grown in number which has prompted the production of a standalone Anti-bullying/Cyber Safety Policy by the Board of Directors.

The Rationale for the Cyber Safety Policy States:

St Mary's College seeks and affirms each person's worth, dignity and vocation. Bullying/ Cyberbullying (including harassment) strikes at the basis of these. The college is **committed to ensuring that all staff and students are able to work and learn in an environment free** from bullying/cyberbullying or the consequences thereof. At this point we need to now remind ourselves of the core Mercy values which underpin our standing as a Catholic College for girls in the Mercy tradition. The values are **Faith, Respect, Excellence, Justice and Service**.

From these values comes our vision as we believe that:

Students are at the **centre** of the learning process

High quality learning requires **high quality teaching**

All students should have the **opportunity** to achieve **Excellence**

A wide range of learning opportunities should be provided which will **enhance** student **connection, involvement learning and achievement**

(See St Mary's College Charter 2015)

Over the next few years the introduction of BYOD is well aligned and sits beside our vision for St Mary's College. It is important that the school provides a safe physical and emotional environment. Currently all students' sign an Internet Agreement acknowledging that their use of the internet is for school purposes only. With BYOD and in keeping in line with the schools new Cyber Safety Policy a new student agreement will target in particular the use of the device that is being used for learning.

St Mary's College Computing and Cyber Safety Rules:

As a responsible and safe user of the school and my own ICT equipment I will keep myself and other people safe by following these rules:

I cannot use school ICT equipment until my parent/s and I have read and signed my use agreement form and returned it to school

If I have my own user name, I will log on only with that username. I will not allow anyone else to use my username

I will not tell anyone my password

While at school or on a school related activity, I will not have any involvement with any ICT material or activity which might put myself or anyone else at risk. (eg: bullying or harassing)

While at school, I will not access or attempt to access, inappropriate, age restricted or objectionable material

I will not make any attempts to bypass security, monitoring and filtering that is in place at the school

I understand that I can only use the internet at school when a teacher gives permission and there is staff supervision

I understand that I must not at any time use ICT to upset, offend, harass, threaten or in any way harm anyone connected to the school or the school itself, even if it is meant as a joke

I understand that these rules also apply to my mobile phone or any other device that connects to the internet

St Mary's College Cyber Safety / Internet Agreement Form

We understand that St Mary's will:

- Do its best to keep the school cyber safe, by maintaining an effective cyber safety programme. This includes working to restrict access to inappropriate, harmful or illegal material on the internet or school ICT equipment and devices
- Keep a copy of the signed agreement on file
- Respond quickly and appropriately to any breaches of this agreement
- Provide members of the school community and students with cyber safety education designed to complement and support the agreement initiative
- Welcome enquiries from students and parents about cyber safety issues

As a student of St Mary's my responsibilities include:

Reading this cyber safety agreement carefully

Following the internet and cyber safety rules of the school whenever I access the schools internet. (See St Mary's College Computing and Cyber safety rules above)

I understand that this includes any privately owned device on the school site or at any school related activity.

Student:

My responsibilities include the following:

- I will avoid any involvement with material or activities which could put at risk my own safety, or the privacy, safety and security of the school or other members of the school community
- I will take care of the school ICT devices and/or my own and any damage to school ICT may result in my family having responsibility for the cost of repairs. I also understand that damage to my own device is my and my family's responsibility
- I will keep a copy of this agreement safe so I can refer to it in the future
- I will ask the relevant staff member if I am not sure about anything to do with this agreement

I have read and understood my responsibilities and agree to abide by this cyber safety use agreement. I know that if I breach this use agreement there may be serious consequences.

Name of Student: _____

Form Class: _____

Signature: _____

Date: _____

Parent/ Caregiver:

My responsibilities include the following:

- I will read this agreement and discuss it with my daughter so we both have a clear understanding of our role in the school's work to maintain a cyber-safe environment
- I will ensure that this agreement is signed by my child and by me, and returned to the school
- I will encourage my daughter to follow the cyber safety rules and instructions
- I will contact the school if there is any aspect of this agreement I would like to discuss
- I have read this cyber safety agreement document and am aware of the school's initiatives to maintain a cyber-safe environment, including my daughter's responsibilities

Name of Parent/Caregiver _____

Signature: _____

Date: _____

Please note: This agreement will remain in force for the length of time that your daughter is enrolled at St Mary's. If it becomes necessary to add or amend any information or rule, parents will be advised in writing.