



# HUTT VALLEY HIGH SCHOOL

## ENROLMENT FORM

OFFICE USE ONLY

2019 Year Level

ORRS	<input type="checkbox"/>	FFP	<input type="checkbox"/>
Out of zone	<input type="checkbox"/>	Priority	<input type="checkbox"/>
Kamar	<input type="checkbox"/>	Enrol	<input type="checkbox"/>

Out of zone applications for Year 9 2019 will NOT be accepted after 30 July 2018

Out of zone applications for Years 10-13 2019 will NOT be accepted after 18 October 2018

### STUDENT DETAILS

Surname: \_\_\_\_\_  
 First names: \_\_\_\_\_  
 Known as (preferred name): \_\_\_\_\_  
 Address: \_\_\_\_\_  
 \_\_\_\_\_ Postcode: \_\_\_\_\_  
 Home Phone: \_\_\_\_\_ Student cellphone: \_\_\_\_\_  
 DOB: \_\_\_\_/\_\_\_\_/\_\_\_\_ 2018 Year level : \_\_\_\_\_  
 Ethnic group(s): (1) \_\_\_\_\_  
 (2) \_\_\_\_\_  
 If New Zealand Maori: (plus Iwi region if known)  
 Iwi 1: \_\_\_\_\_  
 Iwi 2: \_\_\_\_\_  
 Iwi 3: \_\_\_\_\_  
 Main language spoken at home: \_\_\_\_\_

Country of Citizenship: \_\_\_\_\_  
 Birth country: \_\_\_\_\_  
 Enrolment Category: In Zone  Out of Zone   
 Date of commencement: \_\_\_\_\_  
 Present/previous school: \_\_\_\_\_  
 Sibling(s) presently attending HVHS: Yes  No   
 Name(s): \_\_\_\_\_ Years attended \_\_\_\_\_  
 Sibling(s) previously attending HVHS: Yes  No   
 Name(s): \_\_\_\_\_ Years attended \_\_\_\_\_  
 Parent(s) previously attending HVHS: Yes  No   
 Name(s): \_\_\_\_\_ Years attended \_\_\_\_\_  
 Has this student ever been stood down or suspended? Yes  No

### PRIMARY CAREGIVERS (MAIN RESIDENCE)

### SECONDARY CAREGIVERS / RESIDENCE (if applicable)

**Surname (Mrs/Miss/Ms/Mr/Dr):** \_\_\_\_\_  
 First names: \_\_\_\_\_  
 Student Relationship: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 \_\_\_\_\_ Postcode: \_\_\_\_\_  
 Mailing Address: \_\_\_\_\_  
 Home Telephone: \_\_\_\_\_ Work: \_\_\_\_\_  
 Mobile: \_\_\_\_\_  
 Email Address: \_\_\_\_\_  
 Occupation: \_\_\_\_\_  
 Name of Employer: \_\_\_\_\_

**Surname (Mrs/Miss/Ms/Mr/Dr):** \_\_\_\_\_  
 First names: \_\_\_\_\_  
 Student Relationship: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 \_\_\_\_\_ Postcode: \_\_\_\_\_  
 Mailing Address: \_\_\_\_\_  
 Home Telephone: \_\_\_\_\_ Work: \_\_\_\_\_  
 Mobile: \_\_\_\_\_  
 Email Address: \_\_\_\_\_  
 Occupation: \_\_\_\_\_  
 Name of Employer: \_\_\_\_\_

**Surname (Mrs/Miss/Ms/Mr/Dr):** \_\_\_\_\_  
 First names: \_\_\_\_\_  
 Student Relationship: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 \_\_\_\_\_ Postcode: \_\_\_\_\_  
 Mailing Address: \_\_\_\_\_  
 Home Telephone: \_\_\_\_\_ Work: \_\_\_\_\_  
 Mobile: \_\_\_\_\_  
 Email Address: \_\_\_\_\_  
 Occupation: \_\_\_\_\_  
 Name of Employer: \_\_\_\_\_

**Surname (Mrs/Miss/Ms/Mr/Dr):** \_\_\_\_\_  
 First names: \_\_\_\_\_  
 Student Relationship: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 \_\_\_\_\_ Postcode: \_\_\_\_\_  
 Mailing Address: \_\_\_\_\_  
 Home Telephone: \_\_\_\_\_ Work: \_\_\_\_\_  
 Mobile: \_\_\_\_\_  
 Email Address: \_\_\_\_\_  
 Occupation: \_\_\_\_\_  
 Name of Employer: \_\_\_\_\_

- Living with Student     Access to student     Shared Care  
 Correspondence to be sent to both households

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 Correspondence to be sent to both households

### EMERGENCY CONTACT (other than Caregivers detailed above and who reside in the Wellington area)

Name: \_\_\_\_\_ Relationship to student: \_\_\_\_\_  
 Home telephone : \_\_\_\_\_ Work phone: \_\_\_\_\_ Mobile: \_\_\_\_\_

## FOR STUDENTS WHO WERE NOT BORN IN NZ

Date of Arrival in NZ: \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

Passport No: \_\_\_\_\_

or Permanent Residence No: \_\_\_\_\_

or Residence Visa No: \_\_\_\_\_

or Certificate of Identification No: \_\_\_\_\_

Refugee Quota Yes  No

Refugee Family Reunification Yes  No

## STUDENT HEALTH DETAILS

Are there any health problems, disabilities, allergies, prescription medicines or an Epi-Pen requirement of which the School should be aware?

Name of Doctor/Health Centre: \_\_\_\_\_ Ph: \_\_\_\_\_

Allowed Panadol:  Yes  No Allowed Ibuprofen:  Yes  No

Allowed Antihistamine:  Yes  No Is the student a competent swimmer?  Yes  No

Would the student be limited in any way, in taking part in physical activities?  
If yes, please specify:  Yes  No

## LEARNING SUPPORT

Has the student been involved with any learning support programmes, eg: RTLB support, Teacher Aide  Yes  No

Does the student have any specific learning needs, eg: Dyslexia, ADHD, Dyspraxia etc:  Yes  No

Has the student been involved with any English Language Learning Support (ESOL):  Yes  No

Does the student have ORRS funding:  Yes  No

## PERMISSIONS

Publication of student's name and photograph on the Hutt Valley High School website or in publications:  Yes  No

Placement of student name/address on alumni database (only accessible by HVHS):  Yes  No

Newsletters to be received by email only to the home email stated on this enrolment form:  Yes  No

Consent for us to obtain academic and pastoral information from previous school/s:  Yes  No

## DECLARATION BY PARENT/S OR CAREGIVERS

I/We hereby declare the information supplied to the School is correct and my/our son/daughter/ward shall be subject to all rules, regulations and expectations of the School as stated in the Code of Conduct.

I/We have read and discussed the Digital Citizenship Agreement with our student and we have signed the agreement.

The information requested is retained by the School and will be used for the following purposes:

- To provide information to the Ministry of Education
- To maintain contact with Parents and Caregivers
- To facilitate the operation and administration of the School
- To enable contact and appropriate treatment in the event of emergency or student illness.

I/We authorise Hutt Valley High School to use the information set out in this enrolment form for the purposes set out above.

Signature: \_\_\_\_\_ Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Relationship to Student: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Relationship to Student: \_\_\_\_\_

*Address and phone number details are collected at the time of enrolment and during the student's time at school so that the school can contact the parent or student as necessary. When a student leaves school these contact details may also be passed to the Ministry of Social Development (MSD) by the Ministry of Education via ENROL and roll returns. This is so young people who may have difficulty finding future employment, training or further education can be identified and offered support by organisations contracted by MSD to help re-engage young people in education or training when they leave school.*

## ZONING DECLARATION

The address given at the time of application for enrolment must be the student's usual place of residence when the school is open for instruction. If a pre-enrolled applicant has a change of address, they must advise the school immediately, as this may affect their eligibility for enrolment.

The Ministry of Education has advised that parents/guardians 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 eg:

- renting accommodation in zone on a short-term basis
- arranging temporary board in zone with a relative or family friend
- using the in zone address of a relative or friend as an 'address of convenience', with no intention to live there on an ongoing basis.

If the school 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 school, then the board may review the enrolment. Unless the parents/guardians can give a satisfactory explanation within 10 days, the board may annul the enrolment. This course of action is provided for under section 110A of the Education Act 1989.

I confirm that the address supplied to the school in this enrolment form will be the usual place of residence of \_\_\_\_\_ (student name) when the school is open for instruction. I will advise the school of any subsequent change of address.

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

## ENROLMENTS CHECKLIST

Applications for In Zone places can only be accepted once the student is living in the school zone with his/her parent(s) or legal guardian.

Please note that living 'in the school zone' means that a student has their main residence in the school zone. Please also note that the school will not accept the temporary transference of guardianship to someone living in zone as evidence that a student is living in zone.

**Please check you have provided the following documents (originals only, from which copies will be taken):**

**Proof of identity:**

- Students born in New Zealand: An original Birth Certificate or Passport
- Students born outside New Zealand: Passport and Residency Permit or Student Visa or NZ Passport or Citizenship Certificate

**PROOF OF ADDRESS:** we will only accept the following evidence of residence in zone:

**Either:** A recent (less than two months old) **electricity bill** for an in-zone property indicating residence of at least one month, in the name(s) of the Parent or legal guardian of the applicant

**Or:** A completed **tenancy agreement** for an in-zone property in the name(s) of the parent or legal guardian of the applicant **PLUS**

A recent **additional utility bill**, such as telephone bill, SkyTV bill or home and contents insurance.

**Please note:**

- Further documentation may be requested at any time
- Applications will only be processed once all documentation is received
- The School may actively collect information and make all enquiries necessary in its opinion to ensure that enrolment details contained in this application are accurate
- If possible, please bring in your child's latest report for the Deans interview.

# OPTIONS - 2019

Student name: \_\_\_\_\_ Current Year level: \_\_\_\_\_

Please indicate the **SUBJECTS** your child wishes to take at school in 2019.

Information for each subject can be found at <https://huttvalley.schoolpoint.co.nz/>

## Year 9

There are eight essential learning areas at Year 9. Students will study English, Mathematics, Science, Social Sciences and Physical Education and Health plus a selection of courses from the following three areas:

The Arts (half year courses)	Languages (full year courses)	Technology (half year courses)
Art Dance Design and Visual Communication Drama Music Music Band	French Japanese Spanish Te Reo Māori English Language Literacy Support Numeracy Support	Product Design Technology Digital Technology Food Technology

Each student should select one course from each of the three areas above and then two more from The Arts or Technology areas.

1. _____ (Arts)	2. _____ (Language)	3. _____ (Technology)
4. _____	5. _____	

This choice is indicative only at this stage.

## Year 10

At Year 10 students will study English, Mathematics, Science, Social Sciences and Physical Education and Health plus a selection of two full year courses from below.

Art Dance Design and Visual Communication Digital Technology Drama English Language	Food Technology French Japanese Literacy and Numeracy Support Music	Music Band Product Design Technology Spanish Sport Te Reo Māori
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Please select in order of preference, two options (plus one alternative).

Option 1	
Option 2	
Alternative	

Year 11: At Year 11 students will study English and Mathematics plus a selection of four full year courses. Choose <b>four</b> options (plus one alternative)	Year 12: All students will study a selection of five full year courses. Choose <b>five</b> options (plus one alternative)	Year 13: Choose <b>five</b> options (plus one alternative)
1. _____	1. _____	1. _____
2. _____	2. _____	2. _____
3. _____	3. _____	3. _____
4. _____	4. _____	4. _____
Alternative	5. _____	5. _____
	Alternative	Alternative

A limited number of students will be allowed to take six subjects with the approval of their Dean.

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