

ST JOSEPH'S CATHOLIC  
SCHOOL

P.O. Box 1292  
Pukekohe 2340

94 Seddon Street  
Pukekohe 2120

**Application for Enrolment**

Student's Surname: \_\_\_\_\_

Student's First Name: \_\_\_\_\_

Student's Middle Name: \_\_\_\_\_

Student's Home  
Address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Student's Date of Birth: \_\_\_\_\_

Male / Female

For school use only:

Enrolment Number: \_\_\_\_\_

NSN Number: \_\_\_\_\_ Level: \_\_\_\_\_ Date: \_\_\_\_\_

## Application for Enrolment

Country of Birth: \_\_\_\_\_ If NZ, Birth Certificate or Passport required.

If not born in NZ, provide evidence of valid visa or residency permits: \_\_\_\_\_

What date did your child arrive in NZ? \_\_\_\_\_

What languages do you speak at home to each other? \_\_\_\_\_

Has your child received the following Sacraments - please circle:

Baptism: Yes No Reconciliation: Yes No Eucharist(1st Communion): Yes No

Confirmation: Yes No

Parents Name & Address:

Mother's Name &

Address: \_\_\_\_\_

\_\_\_\_\_

Mobile: \_\_\_\_\_ Email Address: \_\_\_\_\_

Mother's Date of Birth (for identification purposes) \_\_\_\_\_

Father's Name &

Address: \_\_\_\_\_

\_\_\_\_\_

Mobile: \_\_\_\_\_ Email Address: \_\_\_\_\_

Father's Date of Birth (for identification purposes) \_\_\_\_\_

Internet Access: Yes / No (please circle one)

Unlimited / Limited (please circle one)

## Conditions of Enrolment

### **PRIVACY ACT 2020**

Our school undertakes to collect, use and store information you provide on this form according to the principles of the Privacy Act 2020. The information may be provided to the Proprietor or Proprietor's agent, the Minister of Education and the Education Review Office, and for administration purposes within the school. I/We agree that this information can be used for the above purposes.

### **PARTICIPATION IN SCHOOL PROGRAMME**

I/We the undersigned, undertake as a condition of enrolment that the above named pupil will participate in the general school programme that gives our school its Special Catholic Character. We agree to abide by the uniform Policy and other school policies. (These may be found on [stjosephspukekohe.schooldocs.co.nz](http://stjosephspukekohe.schooldocs.co.nz))

### **ATTENDANCE DUES**

I/We the undersigned, undertake as a condition of enrolment and attendance, to pay Diocesan Attendance Dues each year as determined by the Proprietor and approved by the Minister of Education.

### **ST JOSEPH'S SCHOOL HOME/SCHOOL RELATIONSHIP**

As a school we work in partnership with parents to provide students with 'An Excellent Education Befitting Our Catholic Character'. As we value the help and support of parents we ask that you complete the following;

I am able to share the following skills/resources/expertise with the school:

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I/We give permission for my phone number to be released to members of St Joseph's Catholic School PTA - Friends of St Joseph's School.

Mother/Guardian

Signature: \_\_\_\_\_

Father/Guardian

Signature: \_\_\_\_\_

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

**Pre-enrolment does not guarantee admission**

**For School Use Only**

**PREFERENCE FOR ENROLMENT**

I have sighted evidence that the Proprietor has stated that

\_\_\_\_\_

Should be given Preference of Enrolment

Preference Criteria: \_\_\_\_\_

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

Principal

The applicant is Non-Preference

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

Principal

Parents/Caregivers notified: Yes/No

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