



Enrolment Discussion Form

Year:

Start Date:

Room / Teacher:

In Zone

Out of Zone

Document Verification: Proof of Address Identification Visa Immunisation

Student Name:

Date of Birth

Health Notes

Vision:

Hearing:

Speech:

Medical Condition:

Symptoms:

Treatment/ Medication:

Medical Permissions

First Aid Treatment

Yes / No

Vision and Hearing Testing

Yes / No

Medical Assistance

Yes / No

Health Professional Consent

Yes / No

Parent/Guardian Details

Caregiver's Name:

Caregiver's Name:

Relationship to child:

Relationship to child:

Country of Birth:

Country of Birth:

Custody:

Live with both parents? Yes / No

Court / Legal documents? Yes / No

Notes:

ESOL Supplemental Support

Home Language/s:

ELL Eligible Yes / No

Previous Education NZ / Overseas

Pre School

Primary

English proficiency (oral)

None at all

A little

Fluent

Verbal Comprehension in own language

Not at all

A little

Fluently

Respond verbally in own language

Not at all

A little

Fluently

Read in own language

Not at all

A little

Fluently

Write in own language

Not at all

A little

Fluently

Food / School Lunches

Food restrictions for medical or religious reasons? Yes / No

School lunch option: Core Vegetarian Halal Dairy Free Gluten Free
 Special Diet Home Provided

Related notes:

Stadium day involvement Yes / No diet option _____
Fruit in Schools Yes / No

Strengths / Interests:

Expected Behaviours

Confident / Shy
Talkative / Quiet
Takes risks / Wait and watch
Inside / Outside
Social play / Independent

Learning / Behaviour Notes:

Consent Confirmation

Internet Usage Yes / No

Photo Publication Yes / No

EOTC / trips / activities Yes / No

School lunches Yes / No

Parent/ Caregiver Declaration

Enrolment Disclosure: The information set out on this Enrolment Application is required by the school for administrative and educational purposes. This information is confidential and only shared with necessary school related agencies and staff. Applications cannot be finalised or processed until all documentation has been supplied and completed.

I, _____ have contributed to, understood and accept the information recorded above is accurate as part of my child's enrolment.

Signed: _____ Date: _____

Office Use

Enrolment completed by:

Date:

- Dietary Note
- Sensitive Note
- Medical Note / Health Plan
- Learning Support Note

Other notes related to enrolment