



2023 Enrolment Application

If you are applying for enrolment for the start of 2023 we ask that enrolments are received in our school office by Friday 30 September 2022, being the end of Term 3. This ensures we have time to give careful consideration to the placement of your child and the subsequent make up of our classes.

Year Level in 2023

Year 7

Year 8

Student Details

Legal Surname:

Legal First Names:

Preferred Surname:

Preferred First Names:

Date of Birth:

Male: Female:

Country of Birth:

Last School Attended:

Residency Status: NZ Citizen Permanent Resident Student Visa Other

Students ethnic origins:

Iwi your child belongs to:

Language/s spoken at home:

Students Primary Residential Address (*where do they normally live*)

Student has a sibling attending WIS

Yes No

Sibling Name:

Student has a sibling who previously attended WIS

Yes No

Sibling Name:

Years attended:

What cluster/house have siblings or whanau who previously attended WIS belonged to?



MANAAKITANGA



AKO



WHANAUNGATANGA

Contact Details

Most communication with caregivers is via email and mobile phone. You **MUST** provide a current email address and mobile phone number. **We MUST have at least two contacts with current phone numbers. It is your responsibility to keep us updated with any changes to contact details.**

Shared Living Arrangements

Does the student live with different caregivers at different addresses?

Yes No

In the case of regular shared care, please advise what days student stays at what address?

Are there any custody/access arrangements?

Please provide a copy of any court orders. We must have a copy of any orders that are in place in order to act upon them.

Note we need two contacts details for at least 2 people who live in Whanganui and can be contacted during the day.

Primary Caregivers - Parent /Caregiver with whom the student lives

Title: Mr Mrs Ms Miss

Title: Mr Mrs Ms Miss

Name:

Name:

Relationship to student:

Relationship to student:

Mobile:

Mobile:

Email:

Email:

Home Phone:

Work Phone:

Home Phone:

Work Phone:

Place of Employment:

Place of Employment:

Secondary Caregivers - Parent /Caregiver if different from Primary Caregivers above

Title: Mr Mrs Ms Miss

Title: Mr Mrs Ms Miss

Name:

Name:

Relationship to student:

Relationship to student:

Address:

Address:

Mobile:

Mobile:

Email:

Email:

Home Phone:

Work Phone:

Home Phone:

Work Phone:

Place of Employment:

Place of Employment:

Emergency Contact Details - In an emergency who else can we contact?

Name:

Name:

Relationship to student:

Relationship to student:

Mobile:

Mobile:

Home Phone:

Work Phone:

Home Phone:

Work Phone:

Medical Conditions & Allergies

Separate forms will need to be completed for the administration of medication.

Does your child have any medical issues/treatments we need to know about?

Yes No

Medical Condition:

Severity (please tick):

Emergency Care required:

Contact Caregivers:

Moderate Risk:

Low Risk:

Is medication held at school?

Yes

No

Medical Name:

In an emergency school may act on behalf: Yes

No

Dr Name:

If the need arises, do you permit the school to administer Paracetamol to your child?

Yes No

Cell Phone Agreement

Our students do not use cellphones as a learning device at Whanganui Intermediate school. If a student brings a cellphone to school they must hand it in to their homeroom teacher at the start of the day. We provide a phone in the school office that students may use for essential calls at breaktimes and before and after school.

I understand W.I.S. accepts no responsibility for loss or damage to student cellphones

Signed Parent/Caregiver

Date

Student

Date

Uniform Agreement

I understand that the wearing of the full and proper Whanganui Intermediate Uniform is a condition of enrolment and I will support the school by providing this uniform for my child and I will ensure my child wears it at all times.

Signed Parent/Caregiver

Date

Student

Date

Photography & Media Agreement

Images of students and/or their work are published to recognise student achievement, report on learning to the school and wider community, and to promote the school. Occasionally student work or photographs are used in publicity material e.g. Prospectus, Website, Facebook Page, external publications, in displays, or in filming work.

I agree that Whanganui Intermediate School can use this material and that they will own those photos/footage and can edit and use them indefinitely in any media.

Signed Parent/Caregiver

Date

When enrolled, I understand and accept that:

1. My child will meet the expectations and regulations of the school as defined by the Senior Leadership Team and the Board of Trustees. This includes the correct wearing of school uniform and adherence to school policies and procedures regarding possession and use of cell phones and digital devices.
2. Costs of trips, sports and other special events are charged as and when they occur.
3. I undertake to provide all information and particulars relating to guardianship and legal access where relevant, and to allow the school to share such information as necessary to meet the needs of my daughter/son.
4. I understand that digital learning is part of the learning experience and that my daughter/son will be required to participate using a digital device.
5. I confirm that the address I have provided to the School will be the usual residence of my son/daughter during school terms.
6. I will promptly advise the School of any subsequent change of address, phone number, email or personal details.

Signed Parent/Caregiver

Date

PRIVACY INFORMATION

The information collected will be used by the school for enrolment and forms an essential part of the information held by the school on your child. The records made from this information may be viewed on request at the school. The information collected may be disclosed to appropriate education, health and welfare authorities and for data-gathering purposes by the New Zealand Ministry of Education, in accordance with the principles of the Privacy Act. It will not be disclosed to any other person or agency unless such disclosure is authorised or required by law.

I/We certify that the information given in this application form is correct and I/We agree that my son/daughter will abide by the school rules and policies and procedures of Whanganui Intermediate.

Signed Parent/Caregiver

Date

Food in Schools

Whanganui Intermediate is part of the Ministry of Education's Food in Schools programme and every student can receive a free school lunch. Please indicate if your child has any particular needs.

Food Allergies Yes No If yes please specify

Religious or cultural considerations Yes No If yes please specify

Final Checklist

- All necessary sections completed and signed
- Verification of citizenship/student visa (as required)



WHANGANUI INTERMEDIATE SCHOOL

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Phone: 06 349 0231

Email: office@wi.school.nz

www.wi.school.nz

Your Child Through Your Eyes

Mai i te kāhui maunga ki Tangaroa. Ko au te awa. Ko te awa ko au.



Your child's name

1. Tell us about your tamariki. Share what you think we need to know?

2. What qualities/values are important to your whānau, extended whānau and community?

3. What responsibilities does your child have in the whānau, the home and outside of school?

4. In our community whānau participate in many different celebrations. Can you tell us about yours?" (Cultural and/or Spiritual, Ethnic, Community other).

5. Success for your child would look like....?

6. Learning experiences and support that you believe would help your child be successful?...