RANDWICK SCHOOL ENROLMENT FORM

| STUDENT DETAILS ADMISSIO | | | | N NO: | | NS | N: | | |
|--|--------------------------------|-----------|---------------------------|-------------|---------------------------------------|----------------------------|-------------|-----|--------------|
| LEGAL SURNAME: | | | PREFERRED SURNAME: | | BOY | GIRL | BIRTHDATE | . / | 1 |
| LEGAL FIRST NAME/S: | | | PREFERRED FIRST NAME: | | PREVIO | OUS SCH | 00L | | |
| PLACE IN FAMILY of Name of Ele AT SCHOOL: Child at this | | | | | | CURRENT (FAR LEVEL ROOM | | | |
| ADDRESS: | | | | | ETHNIC GROUP CHILD RELATES TO: 1st | | | | |
| POST CODE | | | NZ RESIDENCE? YES / NO | | | | | | |
| COUNTRY DAT OF BIRTH DAT NZ: | | | | | FIRST LANGUAGE | | | | |
| Does your child have access to | | | IWI / H 1st | | | APU | | | |
| and internet at home? Yes / No Mi | | | grant / Refugee | | | 2nd 3rd | | | |
| PARENT/CAREGIVER DE | TAILS | | | | | | | | |
| TITLE FIRST NAME: SURNAME: RELATIONSHIP TO C | | | | | | COUNT OF BIRTH | ſRY | | |
| RESIDENTIAL ADDRESS: POST (| | | | POST C | ODE | PHONE NUMBE | | | |
| EMAIL: | | | | | | OCCUF | PATION: | | |
| TITLE FIRST NAME: SURNAME: RELATIONSHIP TO C | | | | ONSHIP TO C | HILD | COUNT OF BIRTH | ſRY | | |
| RESIDENTIAL ADDRESS: POST (| | | | POST C | ODE | PHONE NUMBE | | | |
| EMAIL: | | | | | | OCCUF | PATION: | | |
| PERSON/S AUTHORISED TO COLLECT 1 st : CHILD FROM SCHOOL: | | | | | | PHONE NUMBE | ER: | | |
| | 2 nd : | | | | | PHONE NUMBE | | | |
| CONTACT FOR EMERGENCY: (Located near school and able to collect child in event of emergency) | ocated near school and able to | | | | | PHONE NUMBE | | | |
| DOCTOR: | PHONE: | | | | DENTA CLINIC | | | | |
| NAMES OF LEGAL GUARDIAN/S: | | | | | | | | | |
| CHILD LIVES WITH: (tick one) | Both Pare | ents 🗆 Mo | other | □ Father | | Γ | □ Caregiver | 1 | □Caregiver 2 |
| ENROLMENT REQUIREMENTS Ministry of Education requires us to hold a copy of NZ Birth Certificate or passport showing residency status. We are also required to hold a copy of every student's Immunisation Certificate under Health Regulations 1995. | | | | | | | | | |
| I give permission for the school to take action on my behalf in case of sudden illness or injury, and I agree to abide by school policies. I give permission for the school to administer paracetamol if my child becomes ill. I give permission for my child to visit local facilities in walking distance when required by the school. | | | | | | | | | |
| Health and Safety - on occasions, accidents happen with children while at school in and out of classrooms, on the playground, climbing trees etc when children are playing and exploring. I acknowledge that Randwick School will take all reasonable measures to keep my child/ren safe but cannot be held responsible for injuries caused during play. | | | | | | | | | |
| By signing this form I acknowledge that I will be prepared to make payment to the school for specific school activities when required, such as sports fees, technology etc. and understand that my child may not be able to take part in these activities unless I have made payment, or made arrangements with the school office/Principal regarding payment. | | | | | | | | | |

SIGNED:

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| HEALTH (attach separate sheet if more space | | | | autical) | | | |
|--|--|------------------------------|-------------------------------------|----------------|-------------|--|--|
| required) ALLERGIES: | SIGHT: | attach separate shee | t if more space re | quirea) | | | |
| MEDICATION: | SPEECH: | | | | | | |
| SERIOUS PROBLEMS: | HEARING: | COURT ORDER ISSU | COURT ORDER ISSUED? YES / NO / N.A. | | | | |
| DIETARY REQUIREMENTS FOR LUNCHES: | LUTEN FREE / OTHER: | | | | | | |
| OTHER DETAILS LEARNING & BEHAVIOUR NEEDS: | | | | | | | |
| | ECIAL NEEDS (BACKGROUND/FUNDING): eg ESOL, ORS | | | | | | |
| NAMES OF MEMBERS OF FAMILY1.LIKELY TO BE ATTENDING THIS SCHOOL2. | | BIRTHDATE | | | | | |
| IN THE FUTURE 3. | BIRTHDATE | | | | | | |
| NEW ENTRANT ONLY - INFOR | | | | | | | |
| Did the child attend one or more Early ch complete the table below for the last serv | | n service(s) in the six mont | ns prior to star | ting school? | Please | | |
| Instructions: | | | | | | | |
| 1. If the child was attending more t | | · • | | • | | | |
| If the child attended one service, please complete the table for the | - | | six months pric | or to starting | scnool, | | |
| If the child's attendance hours varied, or the parent/caregiver is uncertain, please enter an approximate or average number of hours per week. | | | | | | | |
| | PLEASE ENTER THE NUMBERS OF HOURS PER WEEK FOR UP TO SERVICE 1 SERVIC | | | | | | |
| THREE SERVICES | | | (hrs/week) | (hrs/week) | (hrs/week) | | |
| A. KŌHANGA REO | A. KÕHANGA REO | | | | | | |
| B. PLAYCENTRE | B. PLAYCENTRE | | | | | | |
| C. KINDERGARTEN OR EDUCATION AND CARE CENTRE | | | | | | | |
| D. HOME BASED SERVICE | | | | | | | |
| E. PLAYGROUP | | | | | | | |
| F. THE CORRESPONDENCE SCHOOL | – TE AHO O TE KU | JRA POUNAMU | | | | | |
| OR | | PLEASE TICK 1 | THE APPROPH | RIATE COLL | IMN | | |
| ATTENDED, BUT ONLY OUTSIDE NEW ZEA | LAND | | | | | | |
| ATTENDED, BUT DON'T KNOW WHAT TYP | E OF SERVICE | | | | | | |
| DID NOT ATTEND | | | | | | | |
| UNABLE TO ESTABLISH IF ATTENDED OR NOT | | | | | | | |
| DID THE CHILD REGULARLY ATTEN | D EARLY CHILDI | HOOD EDUCATION? | | | | | |
| 'Regularly attend' means the child was bo sessions unless they were sick, or on holid | | | ortnight, and ge | enerally went | to those | | |
| Please tick | ay, or naa a janniy | | | | | | |
| YES, FOR THE LAST | | | | | | | |
| NOT REGULARLY, ONLY OCCASIONALLY WITH NO ON-GOING SCHEDULE | | | | | | | |
| NO, DID NOT ATTEND ECE | | | | | | | |
| Office Use Only: | | DATE STARTED: | TEACHER: | | | | |
| Year: Room: | 🗖 Enter detaile i | | D Drofilo form | ma ta taaahar | | | |
| Birth Certificate photocopied Passport/Visa photocopied | □ Enter details in eTAP □ Profile forms to teacher □ Siblings linked □ ELL copy | | | | | | |
| □ Immunisation record photocopied | Immunisation record photocopied 🛛 Enter Details in ENROL – Check for any 🖾 Previous school records requested | | | | | | |
| Medical / Allergy Form issued Getting to know you form returned | Medical / Allergy Form issuednotes indicated by previous schoolImage: Previous school records receivedGetting to know you form returnedImage: Change details when ENROL confirmedImage: Previous school records received | | | | | | |
| Internet Safety Agreements signed | Documents u | ploaded in Etap | | | CERTIFICATE | | |
| □ Stationery purchased □ House colour assigned/Welcome Cert OR CITIZENSHIP CERT | | | | | IFICATE IS | | |
| Photo Photo Hard copy eTAP Folder PRODUCED Seesaw OR ALTERNATIVELY | | | | | ELY | | |
| Library emailed ** PASSPORTS AND | | | | | | | |
| STUDENT AND PARENT VISAS | | | | | | | |

RANDWICK SCHOOL ENROLMENT FORM WHANAU INVOLVEMENT OPPORTUNITIES

Here at Randwick School we like to encourage whanau to be involved in all aspects of their children's learning. We would appreciate it if you could indicate by ticking on the list below those areas where you will be able to share skills / offer parental assistance.

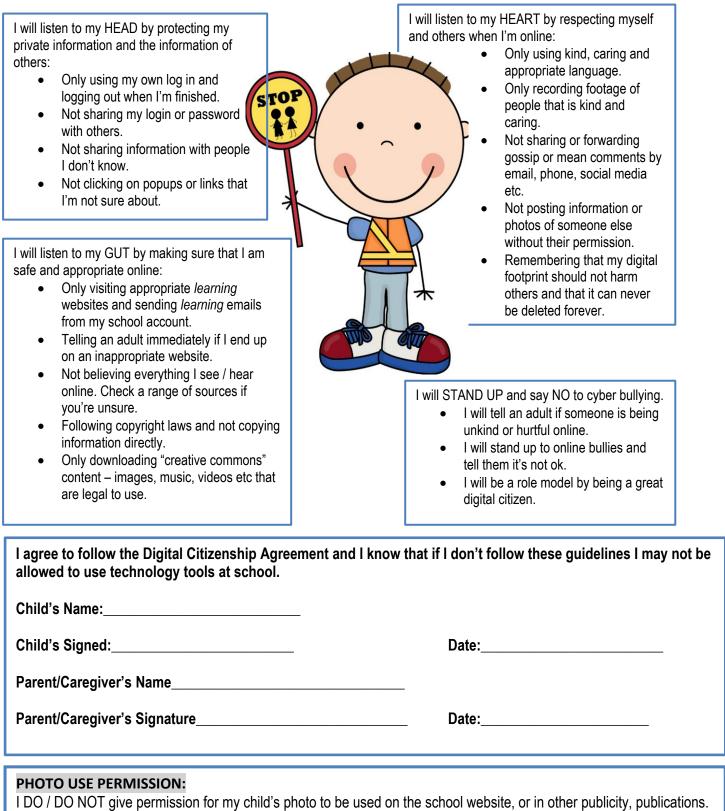
| Classroom / Library – Parent Support | Please tick 🗸 |
|---|---------------|
| Buddy reading | |
| Classroom support | |
| Covering books, filing books, etc | |
| Maths games (1 on 1, or with groups) | |
| Resource making | |
| • Trips | |
| Cultural | |
| Cultural advice and support – school programmes, protocols, etc | |
| • Diwali | |
| • Hangi | |
| • Kapa Haka | |
| Matariki | |
| Pasifika Fono Group | |
| Samoan Independence Day | |
| Samoan Performance Group | |
| Whanau Group | |
| Pastoral | |
| Breakfast club | |
| Getting to school – walking bus, pick ups on rainy days | |
| Lunches | |
| Sport | |
| Coaching teams | |
| Managing teams | |
| Organising events | |
| Sports days | |
| Environmental | |
| Gardening club | |
| School environment – painting etc | |
| Promotional / Fundraising | |
| Friends of the School | |
| School fundraising events | |
| Community involvement | |
| Road patrol assistance | |
| Trade/Handyman skills | |
| Other | |
| • | |
| Your Name: | |
| Phone no: | |
| Email: | |
| | |

RANDWICK SCHOOL DIGITAL CITIZENSHIP AGREEMENT

We live in a digital world where we are using technology all of the time. It is important that we know how to act safely and responsibly when using technology to care for ourselves and others.



When I'm at school, I will use all technology for learning purposes only. I will only use my personal and class login and I will take care of the technology tools that I use.



SIGNED:__

Home / School Partnership Agreement



- Confidence standing up for what is right and believing in yourself.
- Relationships valuing and supporting others, working positively together and caring and respecting each other.
- Love of learning wanting to learn in and out of school, ask questions, solve problems, follow passions and think in different ways.
- Can do attitude being the best that you can be, persevering and overcoming obstacles.
- Identity knowing who you are, where you're from, your unique gifts and what drives you.
- Communication listening actively, speaking confidently, sharing ideas including using a range of tools and technologies.
- Responsibility doing the right thing, making positive choices, respecting others and property, making a difference for others and knowing your place in the world.

At Randwick School we have high expectations for our children and we know that for your child to succeed we need to work together for them to reach their full potential. We ask that parents commit to supporting their child in the following ways:

It is important that whānau work with the school to best support your children to meet their needs so we ask you to keep regular contact with the school and to attend information evenings, whānau hui and to assist with school events when you can.

Throughout the year there will be opportunities to meet with staff to find out how your child is progressing and what you can do at school to support them. We ask you to attend these meetings with your child.

For children to make the most of their learning time they need to be at school at 8.45am and be prepared for learning. Children are expected at school every day unless there is a justified reason and parents are asked to phone the school on (04) 568 5621 or text (027) 568 5621 before 9.15am to inform the school if your child will be absent and why. We ask that dental, medical and specialist appointments are made out of school times.

Children will bring homework to complete to support their school learning. It is really important that your child/ren sees that you value learning. We ask you to support and encourage your children to complete their learning e.g. listening to them read each night.

Randwick School has a "Healthy Eating" and "Water Only" policy. We are a Free Lunches School which means that the government provides free lunches for every student every day. The school provides healthy morning tea food for all students so there is no need to bring food from home.

| I support the school's vision and values and will encourage my child to meet the school's behaviour expectations. | Yes | / | No |
|--|-----|---|----|
| I agree to support my child to get them to school on time and every day (unless the absence is justified). | Yes | / | No |
| I agree to support my child's learning at home. | Yes | / | No |
| I agree to attend learning conversations throughout the year. | Yes | / | No |

Child's name:

Parent's signature: