



CHILD'S DETAILS

Family Name

Given Names

☐ Male ☐ Female

Preferred Name

Date of Birth

Country of Birth

Nationality

Iwi (if applicable)

Ethnicity

Language/s spoken at home

Siblings names and ages

Address

Postcode

Telephone

Home

Mobile

Email

ADMISSION TO ST MARK'S CHURCH SCHOOL

Proposed date of entry

Proposed year group ☐ Preschool ☐ 0 ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐ 6 ☐ 7 ☐ 8

If Preschool number of days and select which days of the week would be your preference

☐ 3 ☐ 4 ☐ 5 *Minimum 3 days of attendance for children 3 years and over*

☐ Monday ☐ Tuesday ☐ Wednesday ☐ Thursday ☐ Friday

Extended Day/School Day Fee Option (Preschool) ☐ Option One (Please see Fee Schedule)

☐ Option Two (Please see Fee Schedule)

Has your child ever been diagnosed with a learning disability? ☐ Yes ☐ No (If yes, please give full details)

Has your child ever been diagnosed with a behavioural disability? ☐ Yes ☐ No (If yes, please give full details)

Has your child ever been expelled, excluded, suspended, withdrawn or stood down from any school?

☐ Yes ☐ No (If yes, please give full details)

Is there anything else regarding your child's behavioural and learning needs or social interactions that we should be made aware of as part of their enrolment? Has your child ever had an IEP or behaviour plan, or a report from a specialist such as an Educational Psychologist? If so, please attach the latest report/s to this application. Please give details below:

Parents agree to provide the school with academic, medical or other information, relating to the well-being of your child as requested by the school. If parents fail to disclose information or provide misleading information, such that the school has to change or modify the level of tuition required by your child, the School may charge the parents such fees as required to adequately compensate for such additional requirements.

School/Kindergarten/Preschool student currently attends:

Current Year Level:

PARENT DETAILS

Title (*Parent One*) ☐ Mrs ☐ Ms ☐ Miss ☐ Dr ☐ Prof

Family Name:

Given Name:

Home Address (*If different from student above*)

Telephone

Home

Mobile

Email

Does the child live with you? If not, please give details

Title (*Parent Two*) ☐ Mr ☐ Dr ☐ Prof

Family Name:

Given Name:

Home Address (*If different from student above*)

Telephone

Home

Mobile

Email

Does the child live with you? If not, please give details

FAMILY ASSOCIATION WITH ST MARK'S

Names of Family members who have attended St Mark's

Years of Attendance

House: ☐ Owen (Green) ☐ Averill (Blue) ☐ Julius (Yellow) ☐ West Watson

HOW DID YOU LEARN ABOUT ST MARK'S?

I/we first became aware of St Mark's through

Recommendation from ☐ relative/friend ☐ Current parent ☐ Past parent ☐ Past student

☐ Website ☐ Internet ☐ Advertisement ☐ Word of Mouth ☐ Other

I/we have toured the school at an: ☐ Open Day ☐ Individual appointment ☐ Other

PRIVACY ACT

- The information on this form is collected and used by the school to facilitate education for your child, to facilitate the operation and administration of the school, to provide for the health, welfare and safety of the child and it is also used for associated school activities, The information is available to staff of the school and to member of the School Board. We also use the information provided to maintain contact with the parents/guardians of the child.
- The school is required by law in some situations to provide information to other organisations, for example the Ministry of Education, Ministry of Health or other schools your child attends in the future.
- You have the right to request access to and to request correction of information held about you by the school. Please contact the school if any details need to be changed, particularly contact details.

DECLARATION

- I/we declare that the information provided on this application form is true and correct.
- I/we understand that acceptance of this form does not constitute an offer or a guarantee of an offer of a place at St Mark's Church School.
- I/we have read and acknowledged the Privacy Act statement and agree to St Mark's Church School collecting, storing and disclosing the information accordingly.

Signature Parent 1

Date

Signature Parent 2

Date

APPLICATION AND ENROLMENT INFORMATION

On receipt of your application, your child's name will be placed on a waiting list for the desired year of entry. Please note: an application cannot necessarily guarantee entry for your child as applications sometimes exceed the number of spaces available. In this case, your application will be lodged on the waiting list until a place becomes available, or you may ask for your child's name to be withdrawn.

Interview - When a place becomes available, prior to your child's commencing at St Mark's, an interview will be arranged with the Principal.

Please note: We must have received all documentation supporting your child's application, in particular, school reports and any additional information prior to this interview. Enrolment is conditions on attendance. A letter of offer will be sent to successful applicants following this interview, this letter will also contain important information regarding the school, stationery requirements, uniform etc

Enrolment - When offered a place for your child, we ask that you confirm acceptance of a place promptly. This is done by returning completed enrolment documentation and making payment of the Enrolment Fee of \$450.00. This fee is not refundable if your child does not commence study at St Mark's Church School.

APPLICATION CHECK LIST

- ☐ This form completed in full
-
- ☐ I have enclosed payment of \$100 non-refundable application fee;
- OR
- ☐ I have made payment of \$100 Direct Debit
Account number: 02 0568 0303506 02
Account holder name: St Mark's Church School
Reference: Child's Surname and first initial Date of Payment _____
- ☐ Copy of child's latest school or Preschool report and PAT results if applicable, plus any other reports or documents as indicated in "Admission to St Mark's Church School" section of this application.
-
- ☐ Copy of Birth Certificate or passport
-

PLEASE RETURN THE COMPLETED APPLICATION TO

Director of Admissions

St Mark's Church School, PO Box 7445, Wellington 6242;

OR

Email to: enrol@st-marks.school.nz

OR

Deliver to: St Mark's Church School, 13 Dufferin Street, Wellington 6021

FOR OFFICE USE ONLY

☐ App Fee Received ☐ Birth Cert/Passport ☐ Report enclosed ☐ Interview arranged