

INTERNATIONAL STUDENT APPLICATION FORM AND ENROLMENT AGREEMENT

Selwyn House School



PART ONE: International Application

Student Details (Name must be as it appears on your passport)	
Family name:	
First name:	Date of birth:
Preferred name:	<input type="checkbox"/> Female <input type="checkbox"/> Male
Address: (In home country)	
First language:	Country of citizenship:
Passport number:	Expiry date:
Intended start date:	Intended end date:
Applying for year level: <input type="checkbox"/> NE <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> 6 <input type="checkbox"/> 7 <input type="checkbox"/> 8	

Father's Details: (Name must be as it appears on your passport)	
Title: Mr <input type="checkbox"/> Dr <input type="checkbox"/>	
Family name:	Date of Birth:
First name:	
Street Address	
Postal Address	
Home Phone:	Mobile: Email:
First language:	Country of citizenship:
Passport number:	Expiry date:

Mother's Details: (Name must be as it appears on your passport)	
Title: Mrs <input type="checkbox"/> Miss <input type="checkbox"/> Ms <input type="checkbox"/> Dr <input type="checkbox"/>	
Family name:	Date of birth:
First name:	
Street address:	
Postal address:	
Home phone:	Mobile: Email:
First language:	Country of citizenship:
Passport number:	Expiry date:

Emergency Contact (In home country, other than parents):	
Contact's name	
Mobile phone	
Home phone	
Email address	

Agent Information (If using an agent)	
Agency name:	
Agent name:	
Agent email address:	Phone:

Family Connections to Selwyn House School
Did you have other girls who previously attended Selwyn House? Name/s, date/s, and House (if known)
Do you have other girls expecting to attend Selwyn House? Names/date of birth and the year you anticipate they will start at Selwyn House.

Fee Payer Information (If other than parent or legal guardian)
Mr/Mrs/Ms/Dr
Address
Phone
Relationship to Student
Mobile
Email
<input type="checkbox"/> We acknowledge that we are jointly and severally liable for the payment of school accounts. Please advise us of any change of address of contact details.

Travel Permission
<input type="checkbox"/> I/we give permission for my child to travel in another adult's vehicle if necessary (your child will have her own seat belt and the car will be registered and warranted).

Medical Information
Name of doctor (in home country):
Phone number of doctor:
Does the student have existing illness or medical conditions that may affect their enrolment, including mental illness?
<input type="checkbox"/> Yes <input type="checkbox"/> No If 'Yes' please provide details.
Is the student currently on any medication?
<input type="checkbox"/> Yes <input type="checkbox"/> No If 'Yes' please provide details.
<i>Please note: If you suffer from conditions requiring medication, it is advisable to bring your own medication to NZ. You will be required to notify the school regarding any medications that you bring with you. These will also need to be clearly labelled from the medical prescriber.</i>
Does the student have any history of previous illness that may affect their enrolment, including mental illness?
<input type="checkbox"/> Yes <input type="checkbox"/> No If 'Yes' please provide details.
Please tick the appropriate box if you suffer from or have suffered from any of the following medical conditions:
<input type="checkbox"/> Asthma <input type="checkbox"/> Back/Neck problems <input type="checkbox"/> Glandular Fever <input type="checkbox"/> Allergy to bee/wasp stings <input type="checkbox"/> Migraines <input type="checkbox"/> HIV or Aids <input type="checkbox"/> Diabetes <input type="checkbox"/> Hepatitis A, B or C <input type="checkbox"/> Epilepsy <input type="checkbox"/> Heart Condition <input type="checkbox"/> Tuberculosis <input type="checkbox"/> ADD or ADHD <input type="checkbox"/> Allergies <input type="checkbox"/> Food Allergies <input type="checkbox"/> Eating Disorder <input type="checkbox"/> Depression/Anxiety <input type="checkbox"/> Other (Please describe)
Has your child had any of the following immunisations
<input type="checkbox"/> MMR (Measles, Mumps, Rubella) <input type="checkbox"/> DTP (Diphtheria, Tetanus, Whooping Cough) <input type="checkbox"/> Polio <input type="checkbox"/> Hepatitis B <input type="checkbox"/> Meningococcal B <input type="checkbox"/> HIP (flu vaccination)

Additional Required Medical Information
Date of last tetanus injection
Outline any dietary requirements
Please indicate any pain relief/flu medication your child may be given by Selwyn House School staff. <input type="checkbox"/> Paracetamol <input type="checkbox"/> Pamol <input type="checkbox"/> None
<input type="checkbox"/> I agree that if prescribed medication needs to be administered, a designated adult will be assigned to do this. I will ensure that prescribed medicine is clearly labelled, securely fastened and handed to the designated adult with instructions on its administration and complete the necessary form online.
<input type="checkbox"/> I will inform Selwyn House School staff of any changes in medical or other circumstances as soon as possible.
<input type="checkbox"/> I agree to my child receiving any emergency medical, dental, or surgical treatment, including anaesthetic or blood transfusion, as considered necessary by the medical authorities present.
<input type="checkbox"/> Any medical costs, not covered by insurance, will be paid by me.
To the best of your knowledge, has your child been in contact with any contagious, or infectious diseases, in the last four weeks? <input type="checkbox"/> No <input type="checkbox"/> Yes, please advise:
Is there any information the staff should know to ensure the physical and emotional safety of your child? eg cultural practices; dis- ability; anxiety about heights, darkness, small spaces and behavioural or emotional problems. <input type="checkbox"/> No <input type="checkbox"/> Yes, please advise:

Acknowledgement of Risk
<input type="checkbox"/> The school will communicate to parents all education outside the classroom (EOTC) events in which your child is involved.
<input type="checkbox"/> I/We understand that there are risks associated with involvement in school EOTC events and that these risks cannot be completely eliminated.
<input type="checkbox"/> I/We understand that the school will identify any foreseeable risks or hazards and implement correct management procedures to eliminate, isolate or minimise those hazards. I understand my child will be involved in the discussion of safety procedures
<input type="checkbox"/> I/We know that I am able to ask any questions of the school about the activities I/my child will be involved in, to gain a better understanding of the risks involved. I recognise that participation in such activities is voluntary and not mandatory through a 'challenge by choice'* procedure.
<input type="checkbox"/> My child and I both understand that they may withdraw from an activity if they feel at risk. This will be done in consultation with the person in charge.
<input type="checkbox"/> I/We understand that the school does not accept responsibility for loss or damage to personal property and that it is my responsibility to check my own insurance policy.

Learning Information
Does the student have any learning or behavioural needs requiring extra school support or services? (For example – ESOL support)
<input type="checkbox"/> Yes <input type="checkbox"/> No If 'Yes' please provide details.

General Details	
Has the student previously applied for entry to the school?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If yes, when?	
Has the student ever had a family member or relative enrolled at the school?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Name:	Year attended:
Has the student previously studied at any other NZ school?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If yes, please state the name of the school:	Dates:
How many years has the student studied English?	[] Months [] Years
Do the student's parents speak or read English?	Speak <input type="checkbox"/> Yes <input type="checkbox"/> No Read <input type="checkbox"/> Yes <input type="checkbox"/> No

Accommodation Requirements	
Accommodation choice – Residential Caregiver:	
<input type="checkbox"/> Boarding House (10yrs+) <input type="checkbox"/> Boarding House (7-9yrs – see conditions below) <input type="checkbox"/> Designated caregiver (relative or family friend if over the age of 10yrs) <input type="checkbox"/> Live with parent (required if child under 10yrs)	
Interests: <input type="checkbox"/> Music <input type="checkbox"/> Movies/TV <input type="checkbox"/> Reading <input type="checkbox"/> Outdoor Activities <input type="checkbox"/> Water Sports <input type="checkbox"/> Travel	
Other interests:	
Does the student have any food allergies or special dietary requirements?	
<input type="checkbox"/> Yes <input type="checkbox"/> No If 'Yes' please provide details.	
Does the student require an EpiPen?	
<input type="checkbox"/> Yes <input type="checkbox"/> No If 'Yes' please provide details for the reason for administering.	

For Students 10yrs+ Designated Caregiver Details (If staying with a relative or close family friend and child is over the age of 10yrs – or for students in the Boarding House)	
Name of caregiver:	
Address (in Canterbury):	
Home phone:	Mobile:
Email:	
Relationship to student:	
<i>•This person must read and understand the role of the Designated Caregiver which can be found on in the International Handbook or on request through the Enrolments Coordinator. This person will be required to sign a contract between the school, family and themselves, be police vetted in NZ and provide copies of their passport/drivers licence and complete forms provided by the school for background checks.</i>	

For Boarding House International Students (7-9yrs)
During periods when the Boarding House is closed over holiday periods, international students between the age of 7-9yrs must be handed over into the care of their parents or legal guardian. There is no exception to this requirement. The Boarding House will remain open for Long Weekend periods, at an additional cost to parents.
<input type="checkbox"/> I/We can confirm that my child will go to the care of parents/legal guardian over the published Boarding House closure dates for school holiday periods.

Insurance Details	
Please provide the name of your insurer:	
Policy number:	
Insurance cover start date: / /	Insurance cover expiry date: / /
Please provide an English copy of the policy details with this application form.	

Parent Feedback
Could you please indicate how you found out about Selwyn House when selecting a school for your child?
<input type="checkbox"/> International Agent <input type="checkbox"/> Website <input type="checkbox"/> Friend/Family recommendation <input type="checkbox"/> School recommendation <input type="checkbox"/> Other – please indicate
What additional school information do you require during the enrolment process? Please indicate here

DOCUMENTATION TO SUBMIT WITH THIS APPLICATION

- | |
|---|
| <input type="checkbox"/> Copy of Student Passports |
| <input type="checkbox"/> Translated copy of last student school report |
| <input type="checkbox"/> Copy of Student Visa (if available at time of application, prior to school commencement) |
| <input type="checkbox"/> Copy of Insurance Details (if available at time of application, otherwise prior to school commencement) |
| <input type="checkbox"/> Any relevant information to support this application; sporting/cultural achievements, medical certificates/information |

PART TWO: Terms and Conditions

THE TERMS AND CONDITIONS APPENDED TO THIS APPLICATION, FORM AND GOVERN THE STUDENT'S TUITION AT THE SCHOOL. BY SIGNING BELOW, THE SCHOOL AND THE PARENTS OR LEGAL GUARDIAN AGREE TO THOSE TERMS AND CONDITIONS. PLEASE ENSURE THE TERMS AND CONDITIONS ARE READ CAREFULLY.

Terms and Conditions:

1. For the purposes of this Agreement the following terms shall have the following meanings:

Accommodation means the residential accommodation provided to the Student pursuant to the Accommodation Agreement.

Accommodation Agreement means the agreement between the Student, the School, the Parents or Legal Guardians, which governs the Student's accommodation arrangements when placed in a Homestay.

Act means the Education Act 1989.

Agreement means this Agreement including any schedules.

Application Form means the standard enrolment form which forms the cover page of the Agreement.

Code means the Education (Pastoral Care of International Students) Code of Practice 2016.

Fee means fees payable by the Parents or Legal Guardians to the School as per the Fee Schedule.

Fee Schedule means the schedule of fees for Tuition, Accommodation and miscellaneous charges.

Parents or Legal Guardians means the parents or legal guardians referred to in the annexed Application Form.

Residential Caregiver has the meaning as set out in the Code.

School means the school referred to in the annexed Application Form.

Student means the student referred to in the annexed Application Form.

Tuition means the education of the Student at the School.

Period of Study means any period for which Fees are paid and for the purpose of this Agreement the enrolment of the Student begins on the course start date stated in the Student's offer of place and ends on the course end date stated in the Student's offer of place.

2. The School shall provide Tuition to the Student in accordance with school policies, the Code, the Act and any other applicable laws, in return for the payment of the Fee.
3. The Parents or Legal Guardians and Student agree that no changes to accommodation arrangements will be made whatsoever without the prior written agreement of the School.

4. The Parents or Legal Guardians and Student agree to comply with the immigration requirements as set out in the Immigration Act 2009, and any immigration conditions applicable to the Student's stay in New Zealand. The Parents or Legal Guardians and Student understand that the School has an obligation to report any breaches of the immigration requirements to the appropriate immigration authority.

5. The Parents or Legal Guardians agree that if the Student is under ten (10) years of age, the Student will live with one or both Parents or Legal Guardian at all times during the Period of Study at the School.

6. The Fee must be paid to the School in advance of each Period of Study or as otherwise directed by the School. The Parents or Legal Guardians and the Student agree to comply with school policies regarding the payment of the Fee.

7. If Tuition is terminated by the School during a Period of Study, in accordance with the Act and the Code, any refund of the Fee applicable to that Period of Study will be assessed in accordance with school policies.

8. The Parents or Legal Guardians and the Student, who have signed this Agreement irrevocably appoint and authorise the principal of the School (or such other person as may be appointed by the School to carry out the principal's duties) to:

(a) Receive information from any person, authority, or corporate body concerning the Student including, but not limited to, medical, educational or welfare information;

(b) Provide consents that may be necessary to be given on the Student's behalf in the event of a medical emergency where it is not reasonably practicable to contact the Parents or Legal Guardians.

9. The Parents or Legal Guardians irrevocably authorise the principal of the School to advise the Residential Caregiver (whether or not arranged through the school) of all matters and information required to be provided to the Parents or Legal Guardians and agree to appoint the Residential Caregiver in New Zealand to receive such information in substitution for the Parents or Legal Guardians.

10. The Parents or Legal Guardians agree to provide the School with academic, medical or other information relating to the wellbeing of the Student as may be requested from time to time by the School. If the Parents or Legal Guardians provide misleading information or fail to disclose information about the Student to the School, such that the School has to change or modify the level of Tuition or Accommodation required by the Student, the School may charge the Parent or Legal Guardians such fees as required to adequately compensate for such additional requirements.

11. The Parents or Legal Guardians agree that it is a condition of enrolment that the Student has current and comprehensive travel and medical insurance. If requested, the Parents or Legal Guardians will provide the School with evidence of the relevant insurance policy.
12. The School shall at all times comply with the Health and Safety at Work Act 2015.
13. Nothing in this Agreement limits any rights that the Parents, Legal Guardians or Student may have under the Consumer Guarantees Act 1993.
14. It is acknowledged that provisions in the Act relating to the suspension, expulsion or exclusion of students will apply to the Student while in New Zealand. Any decision to expel or exclude the Student shall terminate this Agreement and the School's refund policy will apply.
15. The Student will comply at all times with school policies, the Code and the Act, and the Parents or Legal Guardians shall work with the School to ensure such compliance.
16. No party to this Agreement is liable to the other for failing to meet its obligations under this Agreement to the extent that the failure was caused by an act of God or other circumstances beyond its reasonable control.
17. This Agreement shall be construed and take effect in accordance with the non-exclusive laws of New Zealand. In relation to any legal action or proceedings arising out of or in connection with this Agreement the Parents or Legal Guardians irrevocably:
- Submit to the non-exclusive jurisdiction of the Courts of New Zealand; and
 - Agree that proceedings may be brought before any Court including any forum constituted under the Arbitration Act 1908 within New Zealand, and waive any objection to proceedings in any such Court or forum on the grounds of venue or on the grounds that the proceedings have been brought in an inconvenient forum.
18. Notices given under this Agreement must be in writing and given to the addresses set out in the Application Form. Those notices sent by post will be deemed to have been received ten (10) days after posting. The Parties also agree that email correspondence is a suitable means of communication and emails will be deemed to have been received when acknowledged by the party or by return email.
19. This Agreement contains the entire understanding of the parties and overrides any prior promises, representations, understandings or agreements. The terms of the Agreement may be changed by the School in consultation with the Student, and Parents or Legal Guardians, except where such change is required by New Zealand legislation or the Code. This Agreement shall continue in force during the Period of Study with the School.
20. The Parents or Legal Guardians and Student acknowledge that:
- The School may obtain at any time from any person or entity any information it requires to process and/or accept the Student for admission to the School or to perform or complete any of the other purposes under this Agreement. The Parents or Legal Guardians and the Student authorise any such person to release to the School any personal information that person holds concerning the Student and/or Parents or Legal Guardians.
 - If the Student and/or Parents or Legal Guardians fail to provide any information requested in relation the Students admission to the School, the School may be unable to process the Student's application.
- This Agreement is conditional at all times on the Student having accommodation in New Zealand which complies with the Code. If this condition is unable to remain fulfilled, than this agreement will be at an end.
 - Where the Student lives with a Designated Canterbury Caregiver (this includes stays over long weekends and holiday periods for Boarding House students), this Agreement is subject to a Residential Caregiver Agreement being entered into by the School, the Parents and the Designated Caregiver.
 - Personal information of the Student and/or Parents or Legal Guardians collected or held by the School is provided and may be held, used and disclosed to enable the School to process the Student's eligibility to receive Tuition at the School and Accommodation.
 - All personal information provided to the School is collected and will be held by the School.
 - The Student and Parents or Legal Guardians have the right under the Privacy Act 1993 to obtain access to and request corrections of any personal information held by the School concerning them.
 - Under the Privacy Act 1993, any information collected may be provided to education authorities.
 - Information relating to the education, health, welfare or safety of the Student, may be released to relevant parties outside the School, at the discretion of the School.
21. Photographs and videos of the Student may be used for the Student's records and in any publicity material for the School.
22. The School's responsibility for the Student ends on the last day of the Period of Study, or in the event that the Student's Tuition is terminated, on the date of termination.
23. The conditions in this Agreement apply for the whole time the Student is enrolled at the School during a Period of Study. The Agreement may be renewed on application to the School in writing. Renewal of this Agreement is at the sole and absolute discretion of the School and is subject to satisfactory performance and attendance by the Student, the issue of an offer of place for a further Period of Study and the payment of Fees.
24. Without limiting any obligations set out in school policies, the Parents or Legal Guardians and Student agree that the Student:
- Must comply with school policies;
 - Must comply with all terms of the Accommodation Agreement or Residential Caregiver Agreement; and
 - Must maintain an up-to-date visa as stipulated by Immigration New Zealand.
25. The parties acknowledge that prior to signing this Agreement, they have had the opportunity to seek independent legal advice in respect of its content and effect.
26. This Agreement may be executed in one or more counterparts, each of which when so executed and all of which together shall constitute one and the same Agreement. Delivery of executed counterparts may be delivered by email or facsimile transmission.

27. The parties agree that any dispute in relation to this Agreement will be resolved in accordance with the Code and the School Policies.

PARENTS/LEGAL GUARDIANS' DECLARATION AND AUTHORISATION

We declare that the information contained in this application is true and complete. We understand that any false or incomplete information submitted in support of this application may invalidate this application and may result in the withdrawal of an offer of enrolment. We agree that we have received sufficient information to make an informed decision about enrolment at the School.

EXECUTION

Parents/Legal Guardians

By signing below, the Parents or Legal Guardians (as applicable) confirm that they have read the Agreement and agree to be bound by it in all respects:

Name(s): _____

Signature(s): _____

Date: _____

School

By signing below, the authorised signatory of the School confirms that they are authorised to sign on behalf of the School, and confirms that the School will be bound by the Agreement in all respects:

Name: _____

Signature: _____

Date: _____