



# PRE-SCHOOL APPLICATION FOR ENROLMENT

## PART ONE: APPLICATION

### CHILD'S DETAILS

Child's **official surname** or **family name**:

Child's **official given name**:

Child's **official other names / middle names** (please separate names with a comma):

**Name your child is known by / preferred name:**

Surname / family name:

Given name:

Copy of official identity verification document\* collected by staff:

New Zealand birth certificate

Foreign birth certificate

New Zealand passport

Foreign passport

Other \_\_\_\_\_

**Staff initials:** \_\_\_\_\_

Child's date of birth: **dd / mm / yyyy**

Male  Female

Child's ethnic origin/s:

Iwi your child belongs to:

Language/s spoken at home:

Child's primary residential address:

Postcode:

### PARENT/LEGAL GUARDIAN 1

Title:  Mrs  Miss  Ms  Mr  Dr

Family name:

First name:

Address:

City:

Postcode:

Home phone:

Mobile:

Work phone:

Relationship to student:

Email:

Languages spoken:

Profession/Occupation:

### PARENT/LEGAL GUARDIAN 2

Title:  Mrs  Miss  Ms  Mr  Dr

Family name:

First name:

Address:

City:

Postcode:

Home phone:

Mobile:

Work phone:

Relationship to student:

Email:

Languages spoken:

Profession/Occupation:



## CUSTODIAL STATEMENT (If applicable)

Are there any custodial arrangements concerning the child?  Yes  No

Please give details of any arrangements or court orders (a copy of the court order is required to enable the school to enforce these arrangements).

Under the custodial arrangements who **CAN NOT** pick up the student:

Name:

Name:

## ADDITIONAL/EMERGENCY CONTACT – 1 (Also able to collect the child)

Contact's name:

Relationship to child:

Address:

City:

Postcode:

Email:

Home phone:

Mobile:

Work phone:

Please note that nominated parent/caregivers will be contacted in the first instance in case of an emergency. In the event that Selwyn House Pre-School is unable to reach the parent/caregivers, the nominated emergency contact above may be contacted.

I agree.

## ADDITIONAL/EMERGENCY CONTACT – 2 (Also able to collect the child)

Contact's name:

Relationship to child:

Address:

City:

Postcode:

Email:

Home phone:

Mobile:

Work phone:

Please note that nominated parent/caregivers will be contacted in the first instance in case of an emergency. In the event that Selwyn House Pre-School is unable to reach the parent/caregivers, the nominated emergency contact above may be contacted.

I agree.

## MEDICAL INFORMATION

Name of doctor:

Phone number of doctor:

Clinic name and address:

Does the child have existing illness or medical conditions including allergies?  Yes  No

If 'Yes', please provide details:

## MEDICAL INFORMATION (Continued)

Is the child up to date with immunisations?  Yes  No

### OFFICE USE ONLY:

Immunisation record sighted and recorded  Yes  No

Does the student have any food allergies or special dietary requirements?  Yes  No

If 'Yes', please provide details:

Does the student require an EpiPen?  Yes  No

If 'Yes' please provide details for the reason for administering:

### Category (i) Medicines

A category (i) medicine is a non-prescription preparation (such as arnica cream, antiseptic liquid, insect bit treatment) that is not ingested, used for the 'first aid' treatment of minor injuries and provided by the service and kept in the first aid cabinet.

Note: The service must provide specific information about the category (i) preparations that will be used.

Do you approve category (i) medicines to be used on your child?  Yes  No

Name/s of specific category (i) medicines that can be used on my child, **provided by service:**

- Sunscreen
- Saline solution

Parent/Legal Guardian Name:

Signature:

Date: / /

## ENROLMENT DETAILS

Date of enrolment: / /

Date of entry: / /

Date of exit: / /

**Please note:** 20 Hours ECE is for up to **six hours per day**, up to **20 hours per week** and there **must be no** compulsory fees when a child is receiving 20 hours ECE funding.

Days enrolled	Monday	Tuesday	Wednesday	Thursday	Friday	Total hours:
Times enrolled						

**For 20 Hours ECE fill out the boxes below with the hours attested, e.g. 6 hours**

	Monday	Tuesday	Wednesday	Thursday	Friday	Total hours:
20 hours ECE at Selwyn House Pre-school						
20 hours ECE at another service						

This enrolment agreement is **inclusive** of school term breaks.

Parent/Legal Guardian Name:

Signature:

Date: / /

## 20 HOURS ECE ATTESTATION

Is your child receiving 20 Hours ECE for up to 6 hours per day, 20 hours per week at this service?  Yes  No

Is your child receiving 20 Hours ECE at any other service?  Yes  No

If yes to either or both of the above, please sign to confirm that:

- Your child does not receive more than 20 Hours of 20 Hours ECE per week across all services.
- You authorise the Ministry of Education to make enquiries regarding the information provided in this enrolment agreement form, if deemed necessary and to the extent necessary to make decisions about your child's eligibility for 20 Hours ECE.
- You consent to this early childhood education service providing relevant information to the Ministry of Education, and to other early childhood education services the child is enrolled at, about the information contained in this box.

Parent/Legal Guardian Name:

Signature:

Date:

## EXCURSIONS TO SCHOOL GROUNDS

I understand that as part of the programme at Selwyn House Pre-school, children and teachers will undertake regular outings to Selwyn House School to use the facilities of the school. During these outings Ministry of Education ratios will be maintained, both for those children leaving the pre-school and those remaining.

I authorise the child's participation in these outings.  Yes  No

## PRIVACY STATEMENT

We are collecting personal information on this enrolment form for the purposes of providing early childhood education for your child.

We will use and disclose your child's information only in accordance with the Privacy Act 2020. Under that Act you have the right to access and request any personal information we hold about you or your child.

Details about your child's identity will be shared with the Ministry of Education so that it can allocate a national student number for your child. This unique identifier will be used for research, statistics, funding and the measurement of educational outcomes.

You can find more information about national student numbers at: [eli.education.govt.nz](http://eli.education.govt.nz)

\* Information about acceptable identity verification documents is available online at: [eli.education.govt.nz](http://eli.education.govt.nz)

**The Ministry recommends that all services keep a copy of the identity verification document of each child who is enrolled at the service.**

## DUAL ENROLMENT DECLARATION

I hereby declare that the child **is/is not** enrolled at another early childhood institution at the same times that they are enrolled at Selwyn House Pre-school.

Parent/Legal Guardian Name:

Signature:

Date:

## FEE PAYER INFORMATION (If other than parent or legal guardian)

Title:  Mrs  Miss  Ms  Mr  Dr

Family name:

First name:

Address:

City:

Postcode:

Home phone:

Mobile:

Relationship to student:

Email:

We acknowledge that we are jointly and severally liable for the payment of school accounts.  
Please advise us of any change of address or contact details.

## EXPECTED ESSENTIAL AGREEMENT OF CONDUCT For parents, caregivers, legal guardians and friends of the pre-school

The essential agreement is based on the school PYP values of respect, tolerance, integrity, empathy, commitment, cooperation and caring. It ensures that everyone within the school community is respected, safe and treated with dignity. The Expected Essential Agreement of Conduct asks that all parents, caregivers, legal guardians and friends of the school:

- Treat all people with respect
- Work together in partnership with staff for the benefit of their child/children
- Respect and demonstrate Selwyn House Pre-school values
- Set a good example to students and staff at all times
- Follow the appropriate and proper procedure to handle any complaints.

This essential agreement applies to speech, action or delivery through emails, texts, phone calls, social media or other communication and encompasses both the school and wider community environment.

I/We understand the above and agree to the Expected Essential Agreement of Conduct.

## DOCUMENTATION TO SUBMIT WITH THIS APPLICATION

Please ensure that you have included the following with this completed application form

Copy of the child's full Birth Certificate or Passport

Copy of Immunisation Certificate

Enrolment Fee (\$110 non-refundable, GST inclusive)

## STATEMENT (Parents/Legal Guardians to complete)

Please tell us about your child's strengths, interests and preferences:

Why does Selwyn House Pre-school appeal to your family?

Selwyn House Pre-school has a number of policies that set out the procedures that are in place for the care and education of the children who attend. We strongly urge you to read these. The signing of this enrolment agreement form indicates that you will abide by the policies of this service, and understand how you can have input to policy review.

## PART TWO: TERMS & 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 parent or legal guardians agree to those terms and conditions. Please ensure the terms and conditions are read carefully.

- For the purposes of this Agreement the following terms shall have the following meanings:  
**Agreement** means this Agreement including any schedules.  
**Application Form** means the standard enrolment form which forms the cover page of the Agreement.  
**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, and miscellaneous charges.  
**Parents or Legal Guardians** means the parents or legal guardians referred to in the annexed Application Form.  
**School** means the pre-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.
- The Pre-school shall provide Tuition to the Student in accordance with pre-school policies, the Act and any other applicable laws, in return for the payment of the Fee.
- The parents of legal guardian acknowledge that they have read the school's current Business Practices and agree to abide the rules as set out therein.
- The Parents or Legal Guardians acknowledge that they are ultimately jointly and severally liable for the payment of school accounts even in the event the "Fee Payer" as described in this application is different to themselves. In the event of failure to pay school accounts within the time specified, the school reserves the right to charge administrative and legal costs of recovery of outstanding amounts.
- The Parents or Legal Guardians agree to the school making such enquiries in relation to his/her/their creditworthiness as the school considers fit; including obtaining from any third parties information about his/her/their credit worthiness.
- The Parents or Legal Guardians agree to give ten weeks notice in writing to the Head of Pre-school prior to withdrawal of a student. A full ten weeks fees in lieu of notice will be charged if a full ten weeks notice is writing is not received.
- The School shall at all times comply with the Health and Safety at Work Act 2015
- Photographs and videos of the Student, the Student's work and Student's name may be used in any publicity, marketing and/or promotional advertisements for the Pre-school. The safety of the student will be considered at all times.  
 Tick here if you wish for the Student to be excluded from promotional photographs and video.

## PARENTS/LEGAL GUARDIANS' DECLARATION AND AUTHORISATION

I declare that all the above information is true and correct to the best of my knowledge.

Parent/Legal Guardian Name:

Signature:

Date:

### OFFICE USE ONLY – SERVICE DECLARATION

On behalf of Selwyn House Pre-school, I declare that this form has been checked and all relevant sections have been completed.

Head of Pre-school, Name:

Signature:

Date: