



# Karori Normal School

We encourage our children to be the best they can be  
"Tino pai ake"

## Enrolment Form

(This application is for enrolment for those living within  
Karori Normal School zone.)

Office Use

### PRE – ENROLMENT

Date Received: \_\_\_\_\_

ENROLMENT #: \_\_\_\_\_

NSN #: \_\_\_\_\_

*Mark N/A where information is not applicable*

STUDENT INFORMATION

Legal Surname \_\_\_\_\_

Preferred Name \_\_\_\_\_

First Name/s \_\_\_\_\_

Gender (circle one) Boy / Girl

Address \_\_\_\_\_

Date of Birth / /

\_\_\_\_\_

- |   |  |
|---|--|
| Essential – originals<br>Sight and copied | <input type="checkbox"/> Birth certificate or<br>Passport (Child)      |
|   | <input type="checkbox"/> Passport (Parent/s)                           |
|   | <input type="checkbox"/> Visa documentation Child<br>(if applicable.)  |
|   | <input type="checkbox"/> Visa documentation Parent<br>(if applicable.) |
|   | <input type="checkbox"/> Proof of address                              |
|   | <input type="checkbox"/> Immunisation Certificate                      |

\_\_\_\_\_

Postcode \_\_\_\_\_

Position in Family \_\_\_\_\_ of \_\_\_\_\_ children

Country of Birth \_\_\_\_\_ Student Citizenship \_\_\_\_\_

NZ Citizenship Yes / No If no, date of entry into New Zealand \_\_\_\_\_

Ethnicity 1 \_\_\_\_\_ Iwi/Hapu 1 \_\_\_\_\_

2 \_\_\_\_\_ 2 \_\_\_\_\_

3 \_\_\_\_\_ 3 \_\_\_\_\_

First Language \_\_\_\_\_ Other Languages spoken at home \_\_\_\_\_

**Starting Date at Karori Normal School** \_\_\_\_\_

Previous School \_\_\_\_\_ City \_\_\_\_\_

Date First Started School \_\_\_\_\_ Current Year Level \_\_\_\_\_

CAREGIVER INFORMATION

Relationship to Child **Mother/Father/Legal Guardian**

**Mother/Father/Legal Guardian**

Legal Surname \_\_\_\_\_

\_\_\_\_\_

First Name \_\_\_\_\_ Mr/Mrs/Ms/Miss

\_\_\_\_\_ Mr/Mrs/Ms/Miss

Country of Birth \_\_\_\_\_

\_\_\_\_\_

NZ Citizenship Yes / No

NZ Citizenship Yes / No

If no, state your citizenship \_\_\_\_\_

\_\_\_\_\_

Address \_\_\_\_\_  
(If different to child)

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Phone – Home \_\_\_\_\_

\_\_\_\_\_

Work/Daytime \_\_\_\_\_

\_\_\_\_\_

Mobile \_\_\_\_\_

\_\_\_\_\_

Email \_\_\_\_\_

\_\_\_\_\_

Child lives with  Both Parents  Mother  Father  
(please tick)

Shared  Caregiver  
Custody

Legal Guardian/s \_\_\_\_\_

Relationship to pupils \_\_\_\_\_

Court order issued Yes/No/NA

Copies of court orders attached

People you authorise to collect your child from school and provide care in the event of sickness/civil defence emergency; additional to parents/caregivers.

**EMERGENCY CARE**

**Contact 1**

**Contact 2**

Full Name \_\_\_\_\_

\_\_\_\_\_

Relationship \_\_\_\_\_

\_\_\_\_\_

To Pupil \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Phone – Home \_\_\_\_\_

\_\_\_\_\_

Work/Daytime \_\_\_\_\_

\_\_\_\_\_

Mobile \_\_\_\_\_

\_\_\_\_\_

**MEDICAL**

Doctors Name \_\_\_\_\_

Medical Centre \_\_\_\_\_ Phone \_\_\_\_\_

Please detail any medical condition/s and medication the school should be aware of. Please attach further information as required.

Medical Conditions \_\_\_\_\_

Medication \_\_\_\_\_

Serious problems \_\_\_\_\_

Speech \_\_\_\_\_ Allergies \_\_\_\_\_

Vision \_\_\_\_\_ Hearing \_\_\_\_\_

Regional Public Health carries out vision and hearing tests on some children. Do you consent to this? Yes / No

Dental Clinic \_\_\_\_\_

I/We give permission for my child to be given Paracetamol at school.

**B4 SCHOOL CHECK**

Has your child had a B4 school Check? Yes / No

Health \_\_\_\_\_

Development \_\_\_\_\_

Behavioural \_\_\_\_\_

**IMMUNISATION RECORD**

All primary schools are required to keep a register recording the immunisation status of all enrolled children

Is your child immunised? Yes / No

Has he/she completed his/her immunisations? Yes / No

Please supply Immunisation Certificate from your Doctor or your child's Plunket Book  
(copy)

**STUDENT SUPPORT**

Learning/behaviour \_\_\_\_\_

\_\_\_\_\_

Specialists needs, resources, agencies \_\_\_\_\_

Other information/request \_\_\_\_\_

\_\_\_\_\_



## KINDO

KINDO is our school payment system for donations, activities and trips, fundraising items.

I/We agree that the school may share my contact details with KINDO (Karori Normal School payment system).

## PTA (Parent Teacher Association):

The Karori Normal School PTA is an active group of parents and teachers who work together to:

- (a) provide a link between the children, parents/caregivers and the school
- (b) bring the school community together in social or informative activities
- (c) help raise funds to provide improved facilities and opportunities for members of the School community
- (d) encourage and support family involvement in school activities

I/We agree that the school may share my contact details with PTA.

Parent/Caregiver  
Signature \_\_\_\_\_

Date \_\_\_\_\_

Parent/Caregiver  
Signature \_\_\_\_\_

Date \_\_\_\_\_

## Welcome

We welcome you to our school and would encourage you to make contact with one of the Deputy Principal's either before or after you have enrolled your child/ren. It is important that we meet you, and your child, where possible, personally before they start school.

To make an appointment please contact one of the Deputy Principal's below.

Carol Pilcher – Deputy Principal for Years 1 – 4 [cpilcher@kns.school.nz](mailto:cpilcher@kns.school.nz)

Andrea Peetz – Deputy Principal for Years 5 – 8 [apeetz@kns.school.nz](mailto:apeetz@kns.school.nz)

## Enrolment Checklist

Please ensure that you have completed this enrolment form that Karori Normal School and the Ministry of Education requires:

### For all students

- All sections of the above form completed (*make N/A where information not applicable*).
- Proof of address e.g. purchase agreement, tenancy agreement, rates or power bill.
- Certified copy of New Zealand Birth Certificate or current passport (child) (*we will photocopy this for you*).
- Certified copy of New Zealand Birth Certificate or current passport of parent/s (*we will photocopy this for you*).
- An Immunisation Certificate completed by your doctor (*please inform us if you have elected not to immunise*).

### Students born in Australia

- Certified copy of Australian passport

### Students born outside New Zealand

- NZ Citizen: Certified copy of New Zealand passport or citizenship certificate.
- If not a NZ Citizen:
  - **Student's** Passport, residency visa, diplomatic visa, work visa or current student visa.
  - **Parents'** Passport, residency visa, diplomatic visa, work visa or current student visa.