



(This form to be returned to Broadgreen Intermediate)

Email: broadgreen@broadgreen.school.nz

Fax: 00 64 3 547 2959

Telephone: 00 64 3 547 7131

INTERNATIONAL STUDENT – APPLICATION FOR ENROLMENT

Date:

Student Information

Family Name: _____ Other Names: _____
 Date of Birth: _____ Preferred Name: _____
 Religion: _____ Nationality: _____
 Male / Female (please circle)
 Passport No.: _____ Expiry Date: _____

Please
provide a
recent
photograph

Student Visa

A student visa will need to be applied for if and when the school accepts the application for enrolment. Visa information may be obtained from www.immigration.govt.nz

Student Permit Number _____ Student Visa Number _____
 Date of entry to New Zealand _____ First Language _____

Are you applying for permanent residency? YES / NO

Are you transferring from another school in New Zealand? YES / NO

If so, please state which school: _____

Period of intended study at Broadgreen Intermediate: 1 Term 2 Terms 3 Terms Full year 2 years

Accommodation in New Zealand

Please advise name and address of where student will be living in Nelson and who is the guardian responsible for their care. This will need to be approved by Broadgreen Intermediate Management:

Name : _____ Telephone: _____
 Address : _____ Fax: _____
 _____ Email: _____
 _____ Mobile No: _____
 Relationship to child: _____

Emergency Contact Details:

Name: _____ Mr/Mrs/Ms/Miss
 Home Phone: _____ Work Phone: _____
 Fax No.: _____ Email: _____
 Relationship to Student: _____

International Contact Details (Parent Information)

Mother's Name: _____ Father's Name: _____
 Address (in home country in English)

 Telephone: Home _____ Fax _____
 Business _____ Fax _____

Academic Information

Proposed Commencement Date at Broadgreen Intermediate: _____

Other interest (ie sports, piano, drama): _____

Ability to speak English: (please cross out the statement(s) that do **not** apply to you)

- I can speak a little English fluently and can understand spoken English
- I can speak a little English and have a little understanding of spoken English
- I can speak some English and understand spoken English
- I cannot speak English, but can understand spoken English

Academic Reports

Please indicate the name and address of persons or organizations that are to receive copies of your Broadgreen Intermediate academic reports:

Name: _____ Telephone (home): _____

Address: _____ Telephone (business): _____

_____ Fax: _____

_____ Email: _____

Counsellor

It is compulsory for students under the age of 18 to have a New Zealand based counsellor who is approved by Broadgreen Intermediate.

Do you have a New Zealand based counsellor? YES / NO

If YES, please provide name and address of counsellor: _____

If NO, the school will provide a counsellor and you will be invoiced \$400 per year for this service.

Travel & Medical Insurance

Do you have travel and medical insurance? YES / NO

Eligibility for Health Service: Most international students are not entitled to publicly funded health services while in New Zealand. If you receive medical treatment during your visit, you may be liable for the full costs of that treatment. Full details on entitlements to publicly-funded health services are available through the Ministry of Health and can be viewed on their website at <http://www.moh.govt.nz>

Note: It is compulsory for students to have medical insurance and you will need to provide us with a copy of your insurance policy and evidence of its validity.

Health Information

Have you had the following immunisations: Tetanus YES / NO

Hepatitis A or B YES / NO

Have you ever had or been exposed to TB? YES / NO

Do you have any known Drug Allergies or any other Allergies? YES / NO
(details please)

Do you suffer from Asthma or Hayfever or have other Breathing difficulties? YES / NO
(details please)

Please advise any Medications you are taking at present and for what reasons:

Enrolment Agreement:

Parent:

1. I guarantee the good behaviour of this student while attending Broadgreen Intermediate and understand that unsatisfactory behaviour and attendance will result in exclusion and suspension procedures being followed which could result in cancellation of the student's right to study at Broadgreen Intermediate.
2. I accept the right of Broadgreen Intermediate to decline this student enrolment, with explanation, at the discretion of the Principal.
3. While all care is taken, Broadgreen Intermediate does not accept any liability for any loss, damage or accidents that may occur. All students are required to have Travel and Medical insurance to cover themselves for any accident.
4. I/We understand that under the Privacy Act 1993, personal information included on this form may be disclosed, if in the student's interest, to education agencies with the statutory right to obtain such information.
5. I/We have an obligation to inform the school of any changes to the personal details about this student.
6. I/We will support the school's expectations of all students as outlined in the school prospectus enrolment documentation, student bylaws and this application.
7. I/We understand that the school will take action on my/our behalf in my absence of sudden illness or injury. If there is a cost involved in seeking medical assistance I/we will reimburse the school for this.
8. I/We will take responsibility for the payment of repairs or damage to school property that our son/daughter damages.
9. The school has the right to annul the enrolment if a student has special needs or disability that we have not been informed of

I have read and understand the requirements of Broadgreen Intermediate and its conditions of enrolment. I understand that any disputes in relation to this agreement will be settled only in accordance with New Zealand Laws and under the jurisdiction of the New Zealand Courts.

Signed by Parent/Caregiver: _____

Print Name: _____ Dated: _____

Declaration

The information given on this form is true, complete and correct. I have read, understood and agree to the Conditions of Enrolment (below).

Parent/Caregiver signature: _____

Parent/Caregiver name: _____

Student's signature: _____

Student's name: _____

Date: _____

**Welcome to Broadgreen intermediate
Thank you
for enrolling your daughter/son with us**