



## APPLICATION FOR ENROLMENT

YEAR OF REQUESTED ENTRY TO VILLA MARIA COLLEGE: 20\_\_\_\_\_

LEVEL OF ENTRY: (Circle one) Year 7 / 8 / 9 / 10 / 11 / 12 / 13

### PROSPECTIVE STUDENT'S INFORMATION

FULL NAME:

ADDRESS:

DATE OF BIRTH:

CURRENT SCHOOL:

### NATIONALITY:

NZ Born

**Please attach a copy of her Birth Certificate to the Application Form**

Not NZ Born

Please state her nationality \_\_\_\_\_

Prospective student is NZ Citizen

Yes / No

Prospective student is Permanent Resident

Yes / No

Date of NZ entry \_\_\_\_\_

Date Residency granted \_\_\_\_\_

**Please attach a certified copy of the Permanent Residency Permit and the first page of your passport.**

### LANGUAGE:

What is the most frequently spoken language in the prospective student's home? \_\_\_\_\_

Does the student currently receive ESOL support? Yes / No. If so, how many hours? \_\_\_\_\_

### ETHNICITY:

To which Ethnic Group does the prospective student belong?

NZ European / Māori / Pacific Island / Chinese / Korean - (please circle one or state other) \_\_\_\_\_

**If Māori, please state iwi / hapu** \_\_\_\_\_

### SPECIAL LEARNING NEEDS:

Please state any Special Learning Needs: Attach additional information if necessary.

### MEDICAL DETAILS:

**Please describe any serious illness, disability, allergy. You will need to provide an immunisation certificate as your daughter begins Villa.**

**Medic Alert Bracelet No:**

### OTHER INFORMATION:

Have you enrolled another daughter at another level for next year Yes / No: If yes – what level: \_\_\_\_\_

### Publicity

I consent to photographs of my daughter and images of her work being used in College publications and other College promotional media.

Yes / No

| <b>PARENT/GUARDIAN INFORMATION</b>   |  |
|--|--|
| <b>Mother / Caregiver's Full Name:</b><br><br>Relationship to the prospective student:<br><br>Address:<br><br><br>Home Phone:<br>Mobile Phone:<br>Email:<br>Work Phone:<br>Occupation:<br>Workplace:<br>Custody / Legal Guardian                      Yes    /    No | <b>Father / Caregiver's Full Name:</b><br><br>Relationship to the prospective student:<br><br>Address:<br><br><br>Home Phone:<br>Mobile Phone:<br>Email:<br>Work Phone:<br>Occupation:<br>Workplace:<br>Custody / Legal Guardian                      Yes    /    No |

**Emergency Contact:**  
Please give the name of an emergency contact person **other than parents/guardians:**

Mr/Mrs/Ms/Miss \_\_\_\_\_ Relationship \_\_\_\_\_ Phone \_\_\_\_\_

**SPECIAL CHARACTER INFORMATION:**

- 1.** Is your daughter/dependant entitled to Preference of Enrolment according to the criteria set out by the Catholic Bishops of New Zealand. (copy in Prospectus) Yes / No  
**If yes - attach the Preference of Enrolment Certificate obtained from your Parish Priest**  
**If no - an attached letter of support from your Vicar / Minister / Pastor is required. (Please go to the Consent section)**
- 2.** If your daughter/dependant is attending a State Primary or Intermediate School, has she attended the Parish Programme of Religious Education. **(Attach evidence)** Yes / No
- 3.** Has she been involved in her local parish community?  
 e.g. as an altar server or in a youth group Please specify \_\_\_\_\_
- 4.** Has she received the following Sacraments in the Catholic Church?  

|                   |          |                  |          |
|-------------------|----------|------------------|----------|
| * Baptism         | Yes / No | * Reconciliation | Yes / No |
| * First Communion | Yes / No | * Confirmation   | Yes / No |
- 5.** What parish does your family attend: \_\_\_\_\_
- 6.** Do you currently have a daughter enrolled at Villa Maria College? If yes, what year level \_\_\_\_\_
- 7.** Have you enrolled another daughter at another level for the same year? If yes, what year level \_\_\_\_\_

**CONSENT:**  
In accordance with the Privacy Act 1993, I consent to information being available to the wider College community, eg Parent Teacher Association, Villa Maria College Christchurch Ltd, the Past Pupils' Association, Ministry of Education, New Zealand Qualifications Authority, and reputable institutions for the advancement of my daughter/dependant's education and to other agencies as required for the maintenance of law and order.

In accordance with the Privacy Act 1993, I consent to information being available within the College for the purpose of improving my / my daughter's performance as a learner and ensuring my daughter/dependant's personal safety.

As a condition of enrolment and attendance of my daughter/dependant, I undertake to pay, as they fall due, the Attendance Dues and Parent Contributions as set by Villa Maria College Christchurch Ltd and the Board of Trustees.

**Parent / Guardian signature/s:**

\_\_\_\_\_

\_\_\_\_\_ **Date:** \_\_\_\_\_

**Have you included:**

|                              |          |  |          |
|------------------------------|----------|--|----------|
| * Birth Certificate          | Yes / No | *Preference Certificate or Letter of Support | Yes / No |
| * Permanent Residency Permit | Yes / No | *Evidence of PPRE attendance if applicable   | Yes / No |

**PAST PUPIL CONNECTION WITH VILLA MARIA COLLEGE**

**MOTHER**

Current Name: \_\_\_\_\_ Maiden Name: \_\_\_\_\_

Current Address: \_\_\_\_\_ Years at Villa: **19** \_\_\_\_\_ to **19** \_\_\_\_\_

Email address: \_\_\_\_\_

**DAUGHTER/S**

Daughter/s who are past pupils \_\_\_\_\_ Years at Villa: **19** \_\_\_\_\_ to **19** \_\_\_\_\_

\_\_\_\_\_ Years at Villa: **19** \_\_\_\_\_ to **19** \_\_\_\_\_

\_\_\_\_\_ Years at Villa: **19** \_\_\_\_\_ to **19** \_\_\_\_\_

**GRANDMOTHER/S**

**1)** Current Name: \_\_\_\_\_ Maiden Name: \_\_\_\_\_

Current Address: \_\_\_\_\_ Years at Villa: **19** \_\_\_\_\_ to **19** \_\_\_\_\_

Email address: \_\_\_\_\_

**2)** Current Name: \_\_\_\_\_ Maiden Name: \_\_\_\_\_

Current Address: \_\_\_\_\_ Years at Villa: **19** \_\_\_\_\_ to **19** \_\_\_\_\_

Email address: \_\_\_\_\_

**AUNT/S**

**1)** Current Name: \_\_\_\_\_ Maiden Name: \_\_\_\_\_

Current Address: \_\_\_\_\_ Years at Villa: **19** \_\_\_\_\_ to **19** \_\_\_\_\_

Email address: \_\_\_\_\_

**2)** Current Name: \_\_\_\_\_ Maiden Name: \_\_\_\_\_

Current Address: \_\_\_\_\_ Years at Villa: **19** \_\_\_\_\_ to **19** \_\_\_\_\_

Email address: \_\_\_\_\_

**3)** Current Name: \_\_\_\_\_ Maiden Name: \_\_\_\_\_

Current Address: \_\_\_\_\_ Years at Villa: **19** \_\_\_\_\_ to **19** \_\_\_\_\_

Email address: \_\_\_\_\_

**Please add a separate sheet if necessary**