

For Office use only

Date Started _____ Enrolment Number _____ Rm _____ Records Requested _____



Mokoia Intermediate School

Enrolment 2024

The information on this form will be used by Mokoia Intermediate School to maintain effective contact with the enrolled student's parents/caregivers and for appropriate school records as required by the Ministry of Education.

Student Details

Family name of child: _____ First names of child: _____

Preferred first name: _____ Gender: _____ Date of birth: _____

Address of student: _____

Mobile No: _____ Home phone: _____

2023 School _____

Contact Details of Parents / Guardian with whom the child lives:

● **First Contact in an emergency:**

Surname: _____ First names: _____

Work phone: _____ email: _____

Relationship to student: _____ Occupation/workplace: _____

● **Second Contact in an emergency:**

Surname: _____ First names: _____

Address: _____

Mobile No: _____ Work Phone: _____ e-mail: _____

Relationship to student: _____ Occupation/workplace: _____

We try to place each new student with at least one friend. Please give the names of your child's friends:

1. _____
2. _____

Do you wish your child to be considered for:

Rumaki Level 1 (81% to 100% Immersion)

Te reo Māori is the main language of communication and instruction.

The main curriculum is taught entirely in Māori.

You may be required to attend an interview to discuss if your child meets the criteria for Level 1 Te Reo

We are a BYOD School

Will your child be bringing their own digital device:

Yes / No

Photographs: From time to time photos of groups of students at work may be used in displays in the school or posted on our website as part of articles. No child is ever identified.

I do / do not consent to photos which include my child being displayed

Parent / Caregiver Declaration

I/We acknowledge that the information given is correct and will be relied upon by the school.

I/We agree that our child will abide by school expectations, including the Digital Technology User Agreement

I/We understand that the information supplied will be used by the school to maintain effective contact with the enrolled student's parents/caregivers and appropriate school records as required by the Ministry of Education.

I/We also agree to the school:

Requesting relevant information from other schools for enrolment purposes and class placements.

Forwarding relevant information to another school for enrolment purposes and class placements.

Generic Field Trip Permission:

I give permission for my child

to take part in Education Outside the Classroom (EOTC) provided by the school.

to travel outside school, using buses, walking or private vehicles for 'day only' trips as notified by the Teacher in Charge.

Signature: _____

Parent/Caregiver)

_____ Date: / /

(Parent/Caregiver)

Phone: (07) 3459071

email: office@mokoia.school.nz

Please return completed application to the school office