



FAHS - FEILDING HIGH SCHOOL APPLICATION FOR SCHOOL ENROLMENT 2024

STUDENT

National Student Number: _____ [] In Zone [] Out of Zone

Enrolment Date: _____ Start Date: _____

Year Level (tick one):
Year 9 [] Year 10 []
Year 11 [] Year 12 [] Year 13 []

TYPE OF STUDENT
Regular [] Exchange [] Migrant []
ORS [] Foreign Fee Paying []

THE STUDENT WILL LIVE
At Home [] L.J. Wild House [] Private Boarding []
Other []

Date of Birth: ____ / ____ / ____ Legal Gender: Male [] Female []

Legal Student Surname: _____

Legal Student First Names: _____

Preferred First Name: _____

Current School: _____

SIBLINGS

Name and Group of siblings at FAHS: _____

ETHNIC BACKGROUND (tick as appropriate)

NZ Maori [] NZ European [] Other []

If other, please specify: _____

Iwi Affiliation (refer to enclosed sheet): _____
(Code and Name)

ATTACH COPY OF BIRTH CERTIFICATE (This application cannot be accepted without a Birth Certificate.)

IF NOT A NEW ZEALAND CITIZEN also attach passport / visa details for the student and the working parent.

Language Spoken at Home: _____ Country of Birth: _____

BELONG, ENGAGE, SUCCEED

*Feilding High School, Churcher Street, Feilding 4702
Telephone: 06 3234029 / Email: admin@feildinghigh.school.nz*

NAMES AND CONTACT DETAILS OF LEGAL GUARDIANS

(Those named on the Birth Certificate)

If you don't know the contact details of any of the legal guardians, please explain and provide evidence if possible.

Mother's Name: _____
Address: _____
Cell Phone: _____
Email Address: _____
Occupation: _____
Work Place: _____
Work Phone: _____

Father's Name: _____
Address: _____
Cell Phone: _____
Email Address: _____
Occupation: _____
Work Place: _____
Work Phone: _____

Where will this student be living and with whom? Please provide proof of address if it is not with Legal Guardians and explain the circumstances.

Are there any Court appointed additional Legal Guardians?

YES / NO

If yes, please provide details and proof of this, including a copy of the Court Order.

ADDITIONAL LEGAL GUARDIANS

Name: _____
Address: _____
Cell Phone: _____
Email Address: _____
Occupation: _____
Work Place: _____
Work Phone: _____
Relationship to Student: _____

ADDITIONAL CAREGIVER 1

(E.g. Step Parent, Grandparent – please refer to guidelines)

Name: _____
Address: _____
Cell Phone: _____
Email Address: _____
Occupation: _____
Work Place: _____
Work Phone: _____
Relationship to Student: _____

ADDITIONAL CAREGIVER 2

Name: _____
Address: _____
Cell Phone: _____
Email Address: _____
Occupation: _____
Work Place: _____
Work Phone: _____
Relationship to Student: _____

Please provide any details regarding additional caregiver(s).

LOCAL EMERGENCY CONTACT

(Cannot be anyone named previously, but essential to ensure the safety of this student.)

Name: _____

Relationship to student: _____

Phone Numbers: _____

Email Address: _____

Address: _____

Work Phone: _____

Please provide any additional information about this student’s living arrangements.

PASTORAL CARE

OUTSIDE AGENCY INVOLVEMENT - Has your child had involvement with:

| | | | | | |
|----------------------|-----|------------------------|-----|------------------|-----|
| CAFS/CAMHS | [] | Oranga Tamariki (CYFS) | [] | Manchester House | [] |
| MOE Learning Support | [] | Oranga Hine Ngaro | [] | Police Youth Aid | [] |
| RTLB | [] | Te Manawa Services | [] | ACC | [] |

Other (please specify): _____

Does this young person have a Lawyer for Child? YES / NO
If so, please provide name and telephone number. _____

Has your child ever been Stood Down, Suspended or Excluded from any school? YES / NO
If so, from which school? _____

SCHOOL BUS ROUTES (Please tick the MOE bus route)

- | | | |
|--|--|--|
| <input type="checkbox"/> Apiti / Kimbolton | <input type="checkbox"/> Awahuri / Sanson | <input type="checkbox"/> Mt Biggs / Sanson |
| <input type="checkbox"/> Halcombe / Reu Reu Road | <input type="checkbox"/> Makino / Waituna | <input type="checkbox"/> Waiata / Colyton |
| <input type="checkbox"/> Sanson Direct | <input type="checkbox"/> Other (specify) _____ | |

Please contact the school office if your child requires the Ashhurst bus service.

Distance from home to FAHS - Feilding High School: _____ km

YEAR 9 OPTION SELECTION

For information about the option subjects, refer to the enclosed Year 9 Programme Structure.

TICK EACH OPTION SUBJECT ONCE

1. **LANGUAGE OPTIONS (Tick ONE of)**

- | | | | | |
|--------------------------|--------------|----|--------------------------|--------------------------|
| <input type="checkbox"/> | French | | <input type="checkbox"/> | Japanese |
| <input type="checkbox"/> | Te Reo Maori | or | <input type="checkbox"/> | Te Reo Maori (full year) |

2. **ARTS OPTIONS (Tick ONE of)**

- | | | | |
|--------------------------|-------|--------------------------|-------|
| <input type="checkbox"/> | Art | <input type="checkbox"/> | Drama |
| <input type="checkbox"/> | Music | | |

3. **TECHNOLOGY OPTIONS (Tick ONE of)**

- | | | | |
|--------------------------|---------------------------------|--------------------------|---------------------------|
| <input type="checkbox"/> | Design and Visual Communication | <input type="checkbox"/> | Technology Hard Materials |
| <input type="checkbox"/> | Digital Technology | <input type="checkbox"/> | Technology Textiles |
| <input type="checkbox"/> | Food Technology | | |

4. **Number FIVE options in order of preference**

IF AN OPTION IS SELECTED IN SECTION 1, 2 OR 3, DO NOT SELECT AGAIN IN THIS SECTION

- | | | | |
|--------------------------|---------------------------------|--------------------------|------------------------------|
| <input type="checkbox"/> | Agriculture | <input type="checkbox"/> | Music |
| <input type="checkbox"/> | Art | <input type="checkbox"/> | Sport Performance Basketball |
| <input type="checkbox"/> | Commerce | <input type="checkbox"/> | Sport Performance Football |
| <input type="checkbox"/> | Design and Visual Communication | <input type="checkbox"/> | Sport Performance Hockey |
| <input type="checkbox"/> | Digital Technology | <input type="checkbox"/> | Sport Performance Netball |
| <input type="checkbox"/> | Drama | <input type="checkbox"/> | Sport Performance Rugby |
| <input type="checkbox"/> | Food Technology | <input type="checkbox"/> | Te Aō Māori |
| <input type="checkbox"/> | French | <input type="checkbox"/> | Te Reo |
| <input type="checkbox"/> | Horticulture | <input type="checkbox"/> | Technology Hard Materials |
| <input type="checkbox"/> | Japanese | <input type="checkbox"/> | Technology Textiles |

* *A student may only choose one Sport Performance option.*

* *Any variation to the above selections must have the Year 9 Dean's approval*

SUBJECTS IF ENTERING YEAR 10, 11, 12 or 13

Course selection is to be made in consultation with the Year Level Dean.

- | | | | |
|----|-------|----|-------|
| 1. | _____ | 4. | _____ |
| 2. | _____ | 5. | _____ |
| 3. | _____ | 6. | _____ |

AGREEMENT

More detailed information relating to the points below can be found in the prospectus on the school's website – www.feildinghigh.school.nz

In signing the enrolment form I / we agree:

- a) To abide by all school regulations set down by the Board of Trustees and directions given by the Principal and staff.
- b) To treat other students and staff with respect.
- c) To liaise with the school on all matters affecting the welfare of our son / daughter.
- d) To update parents / caregivers details if they change.
- e) To support the Discipline and Detention policies.
- f) To abide by the ICT / Digital Citizenship - Student Acceptable Use policy.
- g) That the above student will attend punctually and will not be absent without the approval of the Principal except in cases of illness or emergency.
- h) To the terms and conditions of the school agricultural procedures should my son / daughter participate in Agriculture / Primary Industries courses, Gateway and U-Skills courses.
- i) To abide by the NQF rules as outlined in the school's NQF Handbook which can be found on the school's website: Academic, NCEA and NZQA.
- j) To pay fees or charges set from time to time by the Board of Trustees. Unpaid accounts will incur late payment fees and collection costs.
- k) To make payment for damage or disfigurement caused by the student to school property.
- l) To grant access to FAHS – Feilding High School to have previous schools' information.
- m) In the event of a co or extra-curricular event not proceeding all monies, minus expenses incurred, will be returned to the student as soon as all invoices have been cleared and potential third party refunds received.

FATHER / CAREGIVER: _____ Date: _____

MOTHER / CAREGIVER: _____ Date: _____

STUDENT: _____ Date: _____

Please Note: *Application for Hostel Accommodation requires the completion of a separate form.*

Please Ensure You Have Attached:

- Birth Certificate (This application cannot be accepted without a Birth Certificate)*
- Proof of address for all parties*
- Signed EOTC form*
- Completed Parent / Caregiver and Student Information form*
- Current court orders if applicable*
- Visa details if applicable*