

Applicant: Last Name: _____ First Name: _____

Date of birth: _____ / _____ / _____

Year of entry: 2025

Year Level at entry: Year 9 Year 10 Year 11 Year 12 Year 13

(Sibling also applying) Name: _____ Year level: _____

Office use only

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Application for Enrolment Year Levels 9-13



Please affix a
passport style
photo of the
applicant here.



STUDENT INFORMATION

Legal Surname		Gender	Male <input type="checkbox"/>	Female <input type="checkbox"/>
Legal First names		Nationality		
Preferred name		Language/s spoken at home		
Date of birth		Country of Birth		
Current school	School name:	NZ Residency	Yes <input type="checkbox"/>	No <input type="checkbox"/>
	From (mm/yyyy) ____/____			
Previous schools		Date of Arrival		
		Ethnicity		
Present year level		If Maori please indicate iwi		
Religion				
Baptism (place/date)				
Confirmation (place/date)				
First Communion (place/date):				

FAMILY INFORMATION

Custodial Parent/s	<input type="checkbox"/> Both parents <input type="checkbox"/> Father only <input type="checkbox"/> Mother only <input type="checkbox"/> Other (specify name and relationship)			
During the School week the Student lives with	<input type="checkbox"/> Both parents <input type="checkbox"/> Father only <input type="checkbox"/> Mother only <input type="checkbox"/> Guardian			
Mother / Stepmother / Caregiver (circle as appropriate)	Father / Stepfather / Caregiver (circle as appropriate)			
Title		Title		
Surname		Surname		
First names		First names		
Preferred name		Preferred name		
Home address		Home address		
Suburb		Suburb		
City and Postcode		City and Postcode		
Phone (home)		Phone (home)		
Phone (mobile)		Phone (mobile)		
Phone business		Phone business		
Email <small>Frequently checked</small>		Email <small>Frequently checked</small>		
Occupation		Occupation		
Business name/address		Business name/address		
Religion		Religion		
Parish attending		Parish attending		



SANCTA MARIA COLLEGE AFFILIATIONS

Siblings currently attending Sancta Maria College

Name:	Year level
Name:	Year level
Name:	Year level
Name:	Year level

Siblings who previously attended Sancta Maria College

Name:	Dates attended
Name:	Dates attended
Name:	Dates attended

Other family members who attended Sancta Maria College

Name:	Dates attended
Name:	Dates attended
Name:	Dates attended

Other siblings (please give names, ages and current schools of other brothers and sisters not mentioned above)

EMERGENCY CONTACT 1 (other than parent)

The person nominated should be a person who is available to come and collect your child at short notice if the need should arise and a parent is not available.

Title	<input type="text"/>	Surname	<input type="text"/>	Name	<input type="text"/>
Home address	<input type="text"/>				
Suburb	<input type="text"/>	City	<input type="text"/>	Postcode	<input type="text"/>
Phone (home)	<input type="text"/>		Mobile	<input type="text"/>	
Relationship to the Student	<input type="text"/>				

EMERGENCY CONTACT 2 (other than parent)

The person nominated should be a person who is available to come and collect your child at short notice if the need should arise and a parent is not available.

Title	<input type="text"/>	Surname	<input type="text"/>	Name	<input type="text"/>
Home address	<input type="text"/>				
Suburb	<input type="text"/>	City	<input type="text"/>	Postcode	<input type="text"/>
Phone (home)	<input type="text"/>		Mobile	<input type="text"/>	
Relationship to the Student	<input type="text"/>				

DIRECTIONS FOR CORRESPONDENCE Please mark where applicable



As family structures can vary, the following information is requested to ensure that correspondence is sent to the correct family members)

Send College Reports via email to

Both parents Father only Mother only Other (specify name and relationship)

Email address(es):

Send Newsletters and other publications via email to:

Both parents Father only Mother only Other (specify name and relationship)

Email address(es):

Name/s and Home Address/es for accounts to be sent via post to

Name:

Address:

Parent not living at same address as the student but is eligible to vote in the BOT election

Name:

Address:

SUPPORT PROGRAMMES AND SPECIAL LEARNING REQUIREMENTS

Please mark where applicable

Is your child involved in any Gifted and Talented Programme at his/her current school?

Yes No

If YES, please state subject area: _____

Is your child receiving Learning Support at his/her current school due to any of the following conditions?

Yes No

- Autism Asperger's
 Dyslexia ADHD
 Down's Syndrome Behaviour or Psychological Problems
 Other (please specify) _____

Would you like to discuss your child's medical condition/s?

Yes No

What language/s does your child speak?

What is the main language spoken at home?

Is your child currently receiving ESOL (*English for Speakers of Other Languages*) support?

Yes No

Do you believe that he/she will require continued support in ESOL at Sancta Maria College?

Yes No

MEDICAL DETAILS



Please give us relevant details regarding student's Medical History

Family Medical Centre (name and address)			
Doctor's Name		Phone Number	
Please circle as appropriate and provide details regarding allergies and/or medical conditions of the student	ALLERGIC REACTION	Circle as appropriate	PLEASE PROVIDE DETAILS
	Bee/ Wasp stings	Yes / No	
	Medication e.g. <i>penicillin</i>	Yes / No	
	Food e.g. <i>peanuts</i>	Yes / No	
	Other	Yes / No	
	MEDICAL CONDITION	Circle as appropriate	MEDICATION REQUIRED
	Asthma	Yes / No	
	Diabetes	Yes / No	
	Epilepsy	Yes / No	
	Heart Conditions	Yes / No	
Tuberculosis	Yes / No		
Hepatitis A or B / HIV	Yes / No		
Any other medical conditions that the school should be aware of			
Is your child immunised	Yes / No (A copy of your child's immunisation certificate must be provided upon enrolment)		

IN CASE OF ILLNESS, ACCIDENT OR EMERGENCY

Please mark for YES or for NO

- I give my permission for my child to receive appropriate treatment when necessary by the College nurse.
- I give my permission for the College nurse to administer non-prescription medicines to my child for the relief of minor ailments (i.e. Paracetamol, Panadol, throat lozenges) and I have fully disclosed all relevant medical information (incl. allergies).
- I give my permission for the College staff to take my child to or to contact Accident and Emergency, hospital or medical centre in case of an illness, accident or emergency when the College cannot contact me.
- I give my permission for the school to make the necessary arrangement for the treatment of my child in an emergency and I agree to meet any costs incurred.
- I accept that while my child is a student at Sancta Maria College, it is my responsibility to inform the College of any important medical condition relevant to my child.

Name of Parent/Caregiver: _____ Signature _____

Relation to the Student: _____ Date: _____

If the College cannot contact you, then we will endeavour to contact one of your emergency contact details provided by you on page 3 of this Application for Enrolment form. Please ensure that you complete page 3 with as many details as possible. Thank you.



A: PRIORITY OF ENROLMENT

Sancta Maria College has a Ministry of Education approved enrolment scheme that has clearly defined priorities of enrolment. The information on College boundaries has been included in the booklet 'Sancta Maria College – Enrolment Information Booklet' in your application pack.

A copy of this is also available on our website: www.sanctamaria.school.nz

NOTE: Incomplete Application for Enrolment Forms that do not include all required information WILL NOT be processed and will be returned. (We do not photocopy forms)

Please identify the category under which you are making application – tick each box and provide **PHOTOCOPIES** (not originals) of documents required.

<input type="checkbox"/>	PRIORITY 1	In-Zone Catholic Student at one of our feeder schools: Our Lady Star of The Sea, St Mark's School or Sancta Maria Catholic Primary School	<input type="checkbox"/> Preference form signed by Priest <input type="checkbox"/> Baptism Certificate <input type="checkbox"/> Other Sacramental certificates (Confirmation/First Communion) <input type="checkbox"/> 2 forms of evidence of residential address (e.g. power or water bill) <input type="checkbox"/> Student's most recent school report <input type="checkbox"/> Current immunisation certificate
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<input type="checkbox"/>	PRIORITY 2	Out Of Zone Catholic Student at one of our feeder schools: Our Lady Star of The Sea, St Mark's School or Sancta Maria Catholic Primary School	<input type="checkbox"/> Preference form signed by Priest <input type="checkbox"/> Baptism Certificate <input type="checkbox"/> Other Sacramental certificates (Confirmation/First Communion) <input type="checkbox"/> Student's most recent school report <input type="checkbox"/> Current immunisation certificate
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<input type="checkbox"/>	PRIORITY 3	Other In-Zone Catholic Student	<input type="checkbox"/> Preference form signed by Priest <input type="checkbox"/> Baptism Certificate <input type="checkbox"/> Other Sacramental certificates (Confirmation/First Communion) <input type="checkbox"/> 2 forms of evidence of residential address (e.g. power or water bill) <input type="checkbox"/> Student's most recent school report <input type="checkbox"/> Current immunisation certificate
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<input type="checkbox"/>	PRIORITY 4	Out Of Zone Catholic Student	<input type="checkbox"/> Preference form signed by Priest <input type="checkbox"/> Baptism Certificate <input type="checkbox"/> Other Sacramental certificates (Confirmation/First Communion) <input type="checkbox"/> Student's most recent school report <input type="checkbox"/> Current immunisation certificate
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<input type="checkbox"/>	PRIORITY 5	In-Zone Non Catholic Student	<input type="checkbox"/> 2 forms of evidence of residential address (e.g. power or water bill) <input type="checkbox"/> Student's most recent school report <input type="checkbox"/> Current immunisation certificate
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<input type="checkbox"/>	PRIORITY 6	Out Of Zone Non Catholic Student	<input type="checkbox"/> Student's most recent school report <input type="checkbox"/> Current immunisation certificate
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NOTE: For enrolments at Year Levels 8 to 13 will be in accordance the above priorities 3 to 6.

If there are more applicants within any of the priority categories than there are spaces available, enrolments will be prioritised in the following order and then, if required, by an independently supervised ballot.

- Applicants who are siblings of current students
- Applicants who are currently enrolled in other Catholic Primary Schools
- Parents/Caregivers who are regularly and actively involved in parish ministries
- Applicants who attend Our Lady Star Of The Sea, St Mark's School or Sancta Maria Catholic Primary School (reference priority 5&6 only)
- All other applicants



B: ALL APPLICANTS MUST INCLUDE PROOF OF RESIDENCY

Please tick your residency status and include copies of documentation listed.

NEW ZEALAND CITIZEN

- The Applicant is a New Zealand Citizen
- New Zealand Birth Certificate or New Zealand Passport photo page enclosed

As of application date, how long has the applicant resided in New Zealand?

- Less than 3 years
- 3 years or more

NOT A NEW ZEALAND CITIZEN – if student is not a New Zealand Citizen, attach proof of Residency and Date of Entry

Permanent Resident

- Photocopy of Residency Visa **attached**
- Photocopy of Front Photo Page of Passport **attached**
- Photocopy of Date of Entry into NZ Stamp **attached**

All of the above documents must be included

Work Permit (must be current at start of school)

- Photocopy of Student Visa **attached**
- Student Passport - Photocopy of Front Photo Page **attached**
- Student - Photocopy of Date of Entry into NZ Stamp **attached**
- Photocopy of Parent Work Permit **attached**
- Parent Passport - Photocopy of Front Photo Page **attached**
- Parent - Photocopy of Date of Entry into NZ Stamp **attached**

All of the above documents must be included

NOTE: INCOMPLETE APPLICATION FORMS THAT DO NOT INCLUDE ALL REQUIRED INFORMATION WILL NOT BE PROCESSED AND WILL BE RETURNED. (We do not accept original documents)

PARENTAL INVOLVEMENT

We pride ourselves in having strong partnership with Parents/Caregivers and their involvement in the College events, sport coaching and other community projects. We always need more volunteers and value each person who can support us in any way. If you are interested in volunteering your time at the College, please complete the fields below specifying which area you can help us with. Thank you.

I would be interested in helping in the following areas of the College

(Please tick as many areas as you are interested in getting involved in):

- Sancta Maria College Parents Association
- Sport Coaching/Managing (please specify sport)

- Cultural

- Other

Name of Parent/Caregiver: _____ Signature _____

Relation to the Student: _____ Date: _____

FINANCIAL CONTRIBUTION AND REGULATIONS NOTICE



Agreement in Respect of the Conditions of Enrolment at Sancta Maria College

We understand that by accepting a place at Sancta Maria College, **we agree** to meet our financial commitments. These can be paid by instalments or automatic payment.

Please refer to 'Sancta Maria College – Enrolment Information Booklet' regarding all financial contributions. Course fees are charged for practical and specialist subjects such as Technology and Art, in which students use materials that are not paid for by the Government. Details of subject fees will be provided at the time of enrolment. Students may also be required to purchase workbooks for specific subjects. Costs for these will be detailed in stationery lists and course information. Workbooks can be purchased through the school and stationary online on www.myschool.co.nz

PREFERRED OPTION OF PAYMENT

We agree that by 31st March of the next year, if my child is accepted at SMC: *(please circle your preferred option of payment)*

- A The financial contribution would have been paid in full
- B Automatic monthly payments would have been established that will result in the contribution being fully paid by the end of the year. *(Weekly or fortnightly payments can be arranged if this is your preferred option).*
- C A written agreement that the financial contribution will be paid on a term by term basis with payments being made by the first week of each term.

We are aware that the Board of Trustees reviews the financial contribution annually, which may result in a small increase in the future.

Parent/Caregiver's name _____ Signature _____

Relation to the Student _____ Date _____

Parent/Caregiver's name _____ Signature _____

Relation to the Student _____ Date _____

ATTENDANCE DUES

I/ We understand and undertake as a condition of enrolment and attendance to pay Attendance Dues as determined from time to time by the Proprietor and approved by the Minister of Education. Furthermore, I/We accept that the school can discontinue attendance of our child in default of this undertaking.

NOTE: IF YOUR CHILD IS OFFERED A PLACE, YOU WILL BE REQUIRED TO PAY THE ATTENDANCE DUES AT THE TIME OF YOUR ACCEPTANCE. BY SIGNING, YOU ACCEPT THESE CONDITIONS.

Parent/Caregiver's name _____ Signature _____

Relation to the Student _____ Date _____

Parent/Caregiver's name _____ Signature _____

Relation to the Student _____ Date _____

DECLARATION BY PARENTS/ CAREGIVERS AND STUDENT APPLICANT



PART ONE DECLARATION

Parents/Guardians

I/We accept that my/our child, while a student at Sancta Maria College, will comply with and respect the College's regulations, attendance and uniform requirements, and standards of behaviour as set out by the Board of Trustees and in the 'Sancta Maria College – Enrolment Information Booklet' included in your application pack.

Signature _____ Relation to the Student _____ Date _____

Signature _____ Relation to the Student _____ Date _____

Student

I will comply with and respect the College regulations, attendance and uniform requirements, standards of behaviour, and will act with consideration of others. I understand that my educational progress will be discussed with, and communicated to, my parents(s)/caregiver(s).

Student's Name _____ Signature _____ Date _____

PART TWO PRIVACY INFORMATION

I/We agree to Sancta Maria College collecting personal information on

Full name of the student applying to enrol

I/We have been advised by Sancta Maria College that the information I/We provide will be used for:

- the College and Ministry of Education purposes
- Ministry of Social Development purposes to identify possible future employment training or educational needs
- Accounting purposes of Sancta Maria College Board of Trustees
- Sancta Maria College Parents Association
- The Alumnae Association (past pupils association)

I/We accept the fact that this information may later be disclosed to a Government agency such as NZQA, CYF, Police, Special Education Service or a medical service, where it will assist the student, or be used for statistical and/or research purposes and agree to its use for that purpose, provided that the information is published in any way that it will not identify me or the individual concerned.

I understand under the Principle 3(1)(d) of the Privacy Act 1993 the information provide will be held at the offices of Sancta Maria College whose address is 319 Te Irirangi Drive, Flat Bush, Auckland 2016.

I am aware of the rights of access to, and collection of, this information.

Signature _____ Relation to the Student _____ Date _____

Signature _____ Relation to the Student _____ Date _____

PART THREE

PHOTOGRAPHS AND WEBSITE



To keep our website current, we would like to be able to share and display photographs of our recent school and wider community events in which our students have been involved in. We need the permission of parents/guardians to use photographs that may show an image of your child. In most cases, photographs will be of groups of students.

- I/We give permission
- I/We do not give permission

Signature _____ Relation to the student _____ Date _____

Signature _____ Relation to the student _____ Date _____

I/We give permission that any promotional material for Sancta Maria College involving my child is available for College use.

- I/We give permission
- I/We do not give permission

Signature _____ Relation to the student _____ Date _____

Signature _____ Relation to the student _____ Date _____

CHECKLIST

Please check that your Application Form includes the following **photocopied** documents – **(We do not accept original forms)**

- Passport style photograph affixed to the first page
- Birth Certificate or Passport identifying date of birth
- Preference form signed by your Parish Priest *(required when applying under: Priority 1, Priority 2, Priority 3 and Priority 4)*
- Baptism Certificate *(required when applying under: Priority 1, Priority 2, Priority 3, Priority 4)*
- Other Sacramental certificates (Confirmation/First Communion)
- 2 forms of evidence of residential address (e.g. power or water bill) *(required for in-zone applications only)*
- Student's most recent school report in your possession attached
- Current immunisation certificate
- NZ Citizens ONLY – PHOTOCOPY** of NZ Passport or NZ Birth Certificate

Work Permit Holders ONLY

- PHOTOCOPY** of Parent Work Permit
- Parent Passport - **PHOTOCOPY** of Front Photo Page
- Parent - **PHOTOCOPY** of Date of Entry into NZ Stamp
- Student Passport - **PHOTOCOPY** of Front Photo Page
- Student - **PHOTOCOPY** of Date of Entry into NZ Stamp
- PHOTOCOPY** of Student Visa



APPLICANT'S PROFILE

Please use this page to tell us about your child's interests and achievements

Interests and activities at school:

Hobbies and activities outside of school:

Community involvement (church, scouts, guides, clubs etc):

Past involvement (indicate years):

Current involvement:

Music / Drama / Dance

Do you play an instrument? Yes No Instrument name and level/ years

Do you sing in a choir? Yes No

Would you like to learn to play an instrument?

Yes No Please specify the instrument

Other Music/ Drama/ Dance involvement:

Sports Club Background

Sport	Club you belong to	Years	Special representation or achievement
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Other achievements (certificates, awards etc.):

National Representation. List any activities where you have represented your activity at a National and/or International level:

School or Club Responsibilities (Prefect, Librarian, Monitor, Captain etc.). Please indicate school/club and year:



Sancta Maria College

319 Te Irirangi Drive, Auckland 2016

PO Box 64 437, Botany, Auckland 2016

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