



Fruitvale Primary School
 40 Fruitvale Road
 New Lynn
 Auckland

Year Level:	Office Use Only	Enrolment Number:
Room:	SMT Meeting Yes / No	NSN:
	ECE Contacted Yes / No	Start Date:
Notes:		

Fruitvale School Out of Zone Enrolment

Child's Legal Surname		Child's Legal First Name:	
Preferred Surname:		Preferred First Name:	
Date of Birth :		Gender: Male Female Non-Binary	
Address		Ethnic Group: (list all ethnicities)	IWI: (list all affiliated iwi)
Suburb:		1 -	1 -
IMPORTANT - We require two forms of proof of address - such as utilities, bank statements, or rates bills, with documentation no older than one month. At least one form must be an original — not downloaded from the internet		2 -	2 -
		3 -	3 -
		Home Phone:	
Caregiver Mobile:		First Language Spoken at Home:	
Caregiver Work:		Other Languages Spoken:	
Caregiver email:		Siblings at Fruitvale:	
Proof of Identity: Birth Certificate or Passport		If your child was not born in NZ, please provide a copy of their current valid visa document.	
Country of Birth - Child -		If child not born in NZ, date of arrival in NZ	
Country of birth - Mother -		Visa Type:	Visa Expiry:
Country of birth - Father -		<input type="checkbox"/> Two (2) Proof of address provided	
Name of Parent/ Caregiver 1:		Address:	
Relationship to Child:			
		Home Phone Number:	
Occupation:		Mobile Number:	
email address: (please print)		Work Number:	
Name of Parent/ Caregiver 2:		Address:	
Relationship to Child:			
		Home Phone Number:	
Occupation:		Mobile Number:	
email address: (please print)		Work Number:	

Additional Emergency Contact 1:		Additional Emergency Contact 2:	
Relationship to Child:		Relationship to Child:	
Home Phone Number:		Home Phone Number:	
Mobile Number:		Mobile Number:	
Work Number:		Work Number:	

Health Profile:	Doctor	Medical Centre Phone Number:	
Allergies:		Immunisation:	Fully Part None
Medications:		Permissions	
Serious Health Issues:	Vision Speech Hearing	<input type="checkbox"/> I give permission for my child to receive paracetamol	
Does your child have any health or learning concerns or medical issues we need to be aware of?		<input type="checkbox"/> I give permission for the school to administer first aid - If the accident is serious and the school is unable to contact me, I give permission for the school to take my child to the Accident and Emergency	
Details of child's health concerns		<input type="checkbox"/> I give permission for the school to make such arrangements as are necessary for the treatment of my child in an emergency and I agree to meet any cost involved.	
		<input type="checkbox"/> I give permission for my child to receive hearing and vision testing by the Public Health Nurse	
		Signed: _____ Date: _____	

Early Childhood Education:			
Name of ECE centre attended: Did your child attend one or more Early Education Service in the six months prior to starting school? If the child was attending more than one service at the same time please enter hours per week for up to three services.			
Please enter the number of hours per week for up to three services	Service 1 (hours per week)	Service 2 (hours per week)	Service 3 (hours per week)
Kohanga Reo			
Playcentre			
Kindergarten or Education and Care Centre			
Home based service			
Playgroup			
Correspondence School - Te Aho o Te Kura Pounamu			
Did your child regularly attend Early Childhood Education?	Yes for the last years	Not regularly	Did not attend
Please tick the appropriate box			
Attended but outside New Zealand			
Attended but I don't know the type of service			
Did not attend			
Unable to establish if attended			
Has or does your child require support from an outside agencies for:	Health	Behaviour	Learning.

Agreements

- I will supply a New Zealand Birth Certificate or other official identification to verify my child's date of birth and country of birth. I will provide valid visa and immigration documentation if required.
- I agree that the school may forward my child's name and address to a potential Intermediate School.
- Uniforms are compulsory for all children. I agree to purchase a school uniform for my child, within the first month following enrolment.
- I agree to follow school policies

Signed: _____

Date: _____

Zoning Status

Should your family move out of the Fruitvale School zone, your child's current enrolment will remain unaffected; however, any subsequent siblings will be required to enter the out-of-zone ballot enrolment process.

Parent/Caregiver: _____

Date: _____

Internet & Information Communication Technologies (ICT) at Our School

ICT pertains to all Information and Communication Technologies used to find, organise, create and present information e.g. computers, cell phones, electronic notepads etc

Fruitvale School is technologically advanced. We are encouraging all students to access the rich information resources and utilise the opportunities for communication available on and through the internet. Appropriate skills are being taught by the school as they are fundamental to the society our students are part of.

Having permission to use your child's photo will allow us to share events and work amongst our community (trip and event photos will be able to be accessed by children and parents off our website to increase the communication between home and school. Any photos will be treated with the utmost respect and care. While they are on-line pupils will be supervised by a teacher, school staff or other support staff / parents working within the area where the connection is available. However, due to the nature of some of the materials found both on and off line, and the fact that it is always difficult to constantly monitor what pupils may discover and use, we ask that parents and pupils sign this permission form and policy.
(Discussion of this with your children is very important and would be appreciated.)

Cyber Smart Rules:

1. I know I cannot use the school internet until my Use Agreement has been signed by my parent or the adult who looks after me.
2. I can use the school computers and other ICT only for school work
3. If I am unsure whether I am allowed to do something involving ICT I will ask the teacher first.
4. If I accidentally find mean, rude or dangerous things on the computer or any other ICT equipment, I will tell the teacher straight away without showing other children.
5. I will not use ICT to do anything naughty, unkind, or dangerous even if my friends are doing it (For example using email, chat rooms, cell phones, etc. to bully and threaten people)
6. I will not copy something somebody else made or wrote, photographed or drew and pretend it is mine.
7. I will not tell anyone things like my name, home/email address or telephone number, or anyone else's when using the Internet or a mobile phone, unless the teacher says it is okay.
8. I will not deliberately access the email and folder of other users.
9. I will ask a teacher before printing anything. I will ask a teacher before downloading anything from the internet.
10. I will ask a teacher before using my own storage devices on the computer.
11. If I want to access the internet outside of the classroom at morning tea or lunchtime I must be given permission from my classroom teacher or the ICT Leader.
12. If I want to access the internet inside the classroom at morning tea or lunchtime I must be given permission from my teacher.
13. I will care for and respect the technology equipment that I use.

- I agree to my child's work and image being used in accordance with the school's online publishing policy/procedures
- I have understood the school internet policy and give permission to my child using the school internet facilities in relation to this policy
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Parent/Caregiver: _____: Date: _____

Supplementary Information for English for Speakers of Other Languages (ESOL)

Education before coming to New Zealand	Did your child learn to speak English before coming to New Zealand?	Did your child learn to read/write English before coming to New Zealand?
Name of school -	None	None
Country -	Some	Some
Length of time -	Fluent	Fluent
Languages used -		