

# Murrays Bay School

## Application for Enrolment for Domestic Student

18 Clematis Ave, Murrays Bay, Auckland, New Zealand. Telephone: 0-9-478.6239 Email: office@murraysbay.school.nz

|  |  |  |  |
|--|--|--|--|
| <b>Student's Family Name:</b>  | <b>Student's first names:</b>  |  |  |
| Date of Birth:   | Male / Female  |  |  |
| Country of Birth:  | Student's Ethnicity  |  |  |
| Previous School (if applicable):   | Current School Level:  |  |  |
| Date student started school:   | Early Childhood Education: (for Y1 Students only) <b>Please complete the section on the back of this enrolment form</b>  |  |  |
| <b>Mother's / Guardian's name:</b>   | <b>Father's / Guardian's name:</b>   |  |  |
| Ethnic Group:<br>(if Maori, please state Iwi affiliation)  | Ethnic Group:<br>(if Maori, please state Iwi affiliation)  |  |  |
| Home Language:   | Home Language:   |  |  |
| Home Address:  | Home Address: (if different from mothers/guardian)   |  |  |
| Postal Code:   | Postal Code:   |  |  |
| Home Telephone Number:   | Home Telephone Number:   |  |  |
| Mobile Telephone Number:   | Mobile Telephone Number:   |  |  |
| email address:   | email address:   |  |  |
| Occupation:  | Occupation:  |  |  |
| Place of Employment:   | Place of Employment:   |  |  |
| Business Telephone Number:   | Business Telephone Number:   |  |  |
| <b>Family Doctor:</b>  | Known allergies:   |  |  |
| Telephone Number:  |  |  |  |
| Health Problems:<br>Sight:                      Speech:                      Hearing:  | Medication:  |  |  |
| Name and telephone numbers of two emergency contacts (other than parents).   |  |  |  |
| 1.   |  |  |  |
| 2.   |  |  |  |
| Have the following documents been attached: (This form will not be processed without these documents)  |  |  |  |
| <ol style="list-style-type: none"> <li>1. Copy of student's passport or birth certificate</li> <li>2. Copy of student's visa if applicable</li> <li>3. Proof of residence i.e. a power bill or phone bill</li> <li>4. Copy of student's immunization certificate</li> </ol>  |  |  |  |
| <table style="width: 100%;"> <tr> <td style="width: 50%;"> <b>Sibling(s): currently at Murrays Bay School:</b><br/><br/> Name: _____<br/> Class: _____<br/> House: _____ </td> <td style="width: 50%;"> <b>Sibling(s) under 5 years old in your family who would be Enrolling at Murrays Bay School in the future:</b><br/><br/> Name: _____ DoB: _____<br/> Name: _____ DoB: _____<br/> Name: _____ DoB: _____ </td> </tr> </table> |  | <b>Sibling(s): currently at Murrays Bay School:</b><br><br>Name: _____<br>Class: _____<br>House: _____ | <b>Sibling(s) under 5 years old in your family who would be Enrolling at Murrays Bay School in the future:</b><br><br>Name: _____ DoB: _____<br>Name: _____ DoB: _____<br>Name: _____ DoB: _____ |
| <b>Sibling(s): currently at Murrays Bay School:</b><br><br>Name: _____<br>Class: _____<br>House: _____   | <b>Sibling(s) under 5 years old in your family who would be Enrolling at Murrays Bay School in the future:</b><br><br>Name: _____ DoB: _____<br>Name: _____ DoB: _____<br>Name: _____ DoB: _____ |  |  |

**Prior Participation in Early Childhood Education**

**Did your child attend one of more Early Childhood Education services in the six months prior to starting school?**

Please complete the table below for the last service(s) attended.

1. If the child was attending more than one service *at the same time*, please enter hours per week for up to three services.
2. If the child attended one service, but changed to a different service within the six months prior to starting school, please complete the table for the *last service only*, not both
3. If the child's attendance hours varied, or the parent / caregiver is uncertain, please enter an approximate or average number of **hours per week**.

| <b>Please enter the number of hours per week for up to three services</b> | <b>Service 1 (hrs/week)</b> | <b>Service 2 (hrs/week)</b> | <b>Service 3 (hrs/week)</b> |
|---|-----------------------------|-----------------------------|-----------------------------|
| <b>a. Kohanga Reo</b>   |                             |                             |                             |
| <b>b. Playcentre</b>  |                             |                             |                             |
| <b>c. Kindergarten or Education or Care Centre</b><br>NAME of Centre:     |                             |                             |                             |
| <b>d. Home based service</b>  |                             |                             |                             |
| <b>e. Playgroup</b>   |                             |                             |                             |
| <b>f. The Correspondence School</b>                                       |                             |                             |                             |

Or

**Pick tick the appropriate box**

|   |  |
|---|--|
| <b>g. Attended, but only outside New Zealand</b>        |  |
| <b>h. Attended, but don't know what type of service</b> |  |
| <b>i. Did not attend</b>                                |  |
| <b>j. Unable to establish if attended or not</b>        |  |

**Did the child regularly attend Early Childhood Education?**

"Regularly attend" means the child was booked in to a service for sessions each week/fortnight, and generally went to those sessions unless they were sick, or on holiday, or had a family occasion, etc.

- [ ] yes, for the last \_\_\_\_\_ year (s)
- [ ] not regular, only occasionally with no on-going schedule
- [ ] no, did not attend ECE

**Declaration**

I agree to abide by Board of Trustee Policies. I give permission for my child to attend all approved educational visits and trips. I give authority to the Principal to act on our behalf in any medical emergency. I give permission for my child to have his/her photo/digital image published when relevant to school activities, e.g. school assessments, newsletters and MBS news. All information given on this form is true and correct. I understand that the information provided may be used for school-based activities and be passed to other agencies that work with the school for educational purposes. I understand my child's education records will be passed to subsequent schools.

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

|  |   |             |
|--|---|-------------|
| School use only.<br>Approved / Declined / Hold<br>Signed: _____<br>Date: _____<br>Date of entry to NZ: _____ | eTAP [ ] ENROL [ ]<br>Fees [ ] Proof of address [ ] | Year Level: |
| National Student Number:   | Date of entry to MBS:                               | Room no:    |
| DOB Verified: Birth Certificate [ ]<br>Passport [ ]<br>Immunisation certificate [ ]                          | School House:<br>Kowhai Pohutukawa Rimu<br>Tawa     | Notes:      |

# MURRAYS BAY SCHOOL

## DEVICE AND INTERNET USE FROM YEAR 0 - 2 AGREEMENT

### To the parent/caregiver/legal guardian, please:

1. Read this page carefully with your child, to check that you both understand your responsibilities under this agreement.
2. Sign the appropriate section on this form.
3. Detach and return the signed section to the school office.
4. Keep this document for future reference.

### School Responsibilities

At our school, we will:

- encourage safe and effective use of technology and the internet
- work within the school's digital technology guidelines
- provide clear guidelines around the use of devices at school

If a student breaches the internet agreement, they may lose the privilege of using devices /internet access at school, and the school's behaviour management plan may be invoked.

### Student Responsibilities

When I use the internet / device at school I will:

- follow the school's digital technology rules
- use the device when and where the teacher gives me permission
- only access the internet with the teacher's permission and if an adult is present
- only use my own login and password
- be in control of the device and not share it with other students, apart from letting them see the screen

I will not use a device / the internet to be mean, rude, or offensive to anyone.

### Parent Responsibilities

I give permission for my child to use the internet / device at school and I will:

- encourage them to use it responsibly
- take an interest in how they are using the internet or devices at home
- be aware of the content and applications on the device / internet
- contact the school if I have any concerns about cybersafety or other related issues.

**Note:** This agreement for your child will remain in force as long as he/she is enrolled at this school.

**I have read this device / Internet use agreement, and I am aware of the school's initiatives to maintain a cybersafe learning environment, including my child's responsibilities.**

**I give my permission for my child to have his/her photo/digital image published when relevant to school activities**      **YES / NO**      **(please circle)**

Student's name \_\_\_\_\_

Student's signature \_\_\_\_\_

Parent/caregiver/  
legal guardian's  
name \_\_\_\_\_

Parent's signature \_\_\_\_\_

Date \_\_\_\_\_

# MURRAYS BAY SCHOOL

## BRING YOUR OWN DEVICE FROM YEAR 3 – 6 (BYOD) AGREEMENT

**To the parent/caregiver/legal guardian, please:**

5. Read this page carefully with your child, to check that you both understand your responsibilities under this agreement.
6. Sign the appropriate section on this form.
7. Detach and return the signed section to the school office.
8. Keep this document for future reference.

|                                 |   |
|---------------------------------|---|
| <b>School Responsibilities</b>  | <p>At our school, we will:</p> <ul style="list-style-type: none"> <li>• encourage safe and effective use of technology and the internet</li> <li>• work within the school's digital technology guidelines</li> <li>• provide clear guidelines around the use of devices brought from home</li> <li>• provide safe storage for students' devices when not at use, e.g. break times.</li> <li>• School does not take responsibility if device is lost, damaged or stolen</li> </ul> <p>If a student breaches the BYOD agreement, they may lose the privilege of bringing their own device to school, and the school's behaviour management plan may be invoked.</p>   |
| <b>Student Responsibilities</b> | <p>When I bring my device to school I will:</p> <ul style="list-style-type: none"> <li>• follow the school's digital technology rules</li> <li>• use my device when and where the teacher gives me permission</li> <li>• only access the internet with the teacher's permission and if an adult is present</li> <li>• only use my own login and password</li> <li>• be in control of my device and not share it with other students, apart from letting them see the screen</li> <li>• charge my device at home so that it doesn't need charging at school</li> <li>• take care of my device so that it isn't damaged or stolen.</li> </ul> <p>I will not use my device to be mean, rude, or offensive to anyone.</p> |
| <b>Parent Responsibilities</b>  | <p>I give permission for my child to bring their device to school and I will:</p> <ul style="list-style-type: none"> <li>• encourage them to use it responsibly</li> <li>• take an interest in how they are using the device</li> <li>• be aware of the content and applications on the device</li> <li>• be responsible for the device's maintenance and insurance</li> <li>• keep a record of the device's serial number and details</li> <li>• contact the school if I have any concerns about cybersafety or other related issues.</li> </ul>   |

**Note:** This agreement for your child will remain in force as long as he/she is enrolled at this school.

**I have read this Bring Your Own Device (BYOD) use agreement, and I am aware of the school's initiatives to maintain a cybersafe learning environment, including my child's responsibilities.**

**I give my permission for my child to have his/her photo/digital image published when relevant to school activities**      **YES / NO (please circle)**

Student's name \_\_\_\_\_ Student's signature \_\_\_\_\_

Parent/caregiver/  
legal guardian's name \_\_\_\_\_ Parent's signature \_\_\_\_\_

Date \_\_\_\_\_



## Enrolment Procedure In Zone Declaration

The Board of Trustees of Murrays Bay School has an Enrolment Scheme in place which meets the requirements of the Ministry of Education's guidelines for the operation of enrolment schemes. A major factor in the school implementing a scheme is to prevent overcrowding.

Children who live within the school's enrolment zone have right of access to the school. Children from outside the zone must wait until the board applies the scheme.

For in-zone children the board of trustees must be certain of the genuineness of the address to ensure that the scheme is being applied correctly. The board acknowledges that in most cases the in-zone enrolment is not a problem, however, there have been cases where the address given has not been the actual address or a permanent one. To overcome this issue the board requests parents who are enrolling their child as "in-zone" enrolments read the following statement and sign the declaration form.

Ken Ward  
Principal

### DECLARATION OF RESIDENCY: IN-ZONE

To be completed by parents who have given an in-zone address as the student's usual place of residence.

The address given at the time of application for enrolment must be the student's usual place of residence when the school is open for instruction. This means that if you currently live at an in-zone address but move to an out-of-zone address before your child's first day of attendance at the school, your child will not be entitled to enrol at the school.

The Ministry of Education has advised that parents should also be warned of the possible consequences of deliberately attempting to gain unfair priority in enrolment by knowingly giving a false address or making an in-zone living arrangement which they intend to be only temporary e.g.

- renting accommodation in-zone on a short-term basis;
- arranging temporary board in-zone with a relative or family friend;
- using the in-zone address of a relative or friend as an "address of convenience", with no intention to live there on an ongoing basis.

Before enrolment takes place (i.e. before attendance begins), if the board has reasonable grounds for believing that the given in-zone address will not be a genuine, on-going living arrangement, the board may withdraw any offer of a place which it may have made on the basis of the given address.

After attendance has begun, if the school learns that a student is no longer living at the in-zone address given at the time of application for enrolment and has reasonable grounds to believe that the temporary in-zone residence has been used for the purpose of unfairly gaining priority in enrolment at the school, then the board may review the enrolment. Unless the parents can give a satisfactory explanation within 10 days, the board may annul the enrolment. This course of action is provided for under section 110A of the Education Act 1989.

I confirm that the address which I have provided to the school will be the usual place of residence of.....(student's name) when the school is open for instruction. I will advise the school of any subsequent change of address.

.....  
(Signed)

.....  
(Date)