



# RENEW SCHOOL

KNOW GOD | GROW CHARACTER | ACHIEVE POTENTIAL | MAKE A DIFFERENCE

## Preference Enrolment Form

Dear Pastor/Minister

The family that have handed this form to you are currently applying to enrol their children at Renew School. They believe they fall into the category of "Preference Enrolment". We need you to fill this form out to confirm their eligibility for Preference Enrolment.

Preference Enrolment, as defined in the Integration Agreement, is where parents have established a **particular or general connection with the Special Character of the school**. The Proprietor has the right to determine the Christian beliefs, vision, values and lifestyle that make up the Special Character of the school. The school's Board of Trustees can only grant a Preference Enrolment status to parents of a child where these parents have established the necessary degree of connection. Essentially this is current Christian experience along with regular church attendance.

### Who sees this Form?

School Management Staff and the Proprietor's Trustees at the time of the Interview.

### Who is to fill out this Form?

The Minister/Pastor/Church Leader of the Church that the applicant regularly attends, or in their absence, their representative or Church Elder.

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*(Applicant to fill out)*

**Applicants Name:** \_\_\_\_\_

Address: \_\_\_\_\_

Child/ren's Name/s: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Church Attended:** \_\_\_\_\_

**Minister/Pastor's Name:** \_\_\_\_\_

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*(Pastor/Minister to fill out)*

Do you or a representative attend the Whangarei Minister's Association? Yes/No

Please note other Ministers Association if not from Whangarei:

\_\_\_\_\_



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How long have you known the applicant/s? (please specify) \_\_\_\_\_

Are either/both parents' regular ongoing attendees of your church? Yes/No

If not, how often do they attend?

\_\_\_\_\_

In your opinion do the applicant/s have an up-to-date Christian experience? Yes/No

Are the applicants:

Married  Defacto  Solo

Widowed  Separated

Does the child/children concerned attend your church? Yes/No

If the student/s is/are Intermediate/High School age, are they active in the Church's youth group or other regular activity? Yes/No

Are there any problem areas/concerns we should be aware of?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

If there are any issues we have in regard to behaviour with the students of this family are you (or a nominee) willing to be involved in any counselling that may be appropriate? Yes/No

**Your Name:** \_\_\_\_\_

Your Church role: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Phone No: \_\_\_\_\_

Email or Post all Forms once completed to:

[office@crs.school.nz](mailto:office@crs.school.nz)

Student Registration  
Renew School  
PO Box 11086  
Whangarei 0148