



## RENEW SCHOOL NZ

### Supplemental Information Pack

Student's legal surname:	
Student's legal first name:	
Date of birth (dd/mm/yyyy):	

### Application Process

Each child in New Zealand has at least one adult who is legally responsible for their care. Those who have this responsibility are most often, but not always, the parents of the child. Other than parents, other legal caregivers could include foster parents, legal guardians, etc.

For the purposes of this application and our internal data systems, we require at least one caregiver who is legally responsible for the student to complete the *online* application form. The caregiver who completes the application will be the caregiver who is most readily able to be contacted during school hours and will be the caregiver with whom the school will primarily communicate via email, landline, and cell phone.

### Before You Start

**Before** you start completing the *online* form, please make sure that you have **electronic** copies (MS Word, PDF) of the following documents.

1. For Preference applications, a completed [Preference Enrolment Form](#). If you do not have one yet, please [download this form now](#) and ask your pastor/minister/church leader to complete it and return it to you *before* you start the online application form.
2. For Non-Preference applications, a letter that states that you are applying under the Non-Preference legal classification for state-integrated schools.
3. A verified copy of the child(ren)'s NZ Birth Certificate or Passport.
4. The most recent school report if the student has attended another school (no matter which country the child has been in school).
5. A document from Immigration New Zealand that confirms a student's Domestic Student or Residence status if the student is not a New Zealand citizen.
6. This completed Supplemental Information Pack.

### Final Step: Complete Online Form

1. Complete all sections of the online application form. You will not be able to go to the next page of the online application unless all the fields in the form have been completed correctly.
2. Please add all medical conditions by using the **+add another medical condition** button.
3. Please upload all required documents (*check the list, 1 – 6, above*). You will not be able to complete your application if you have not submitted all the required documentation.

## Early Childhood Education

Has the student already been enrolled at a primary, intermediate or secondary school for at least 6 months? *Put a check mark next to / highlight the appropriate response.*

Yes – go to the next page

No – answer the questions below

*Please circle / highlight the appropriate response.*

**Yes** – Answer questions below

**No** – Go to the next page

**Did the student regularly attend one or more Early Childhood Education service(s) in the six months prior to starting school?** “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.

*If you answered Yes, please complete the table below.*

- If the student was attending more than one service at the same time, please enter hours per week for up to three services.
- If the student 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.
- If the student’s attendance hours varied, please enter an approximate or average number of hours per week.
- If the student attended an early childhood service outside of New Zealand, complete the part of the table below that best describes the child’s early childhood education.

Please enter the number of hours per week for up to three services	Service 1 (hrs/week)	Service 2 (hrs/week)	Service 3 (hrs/week)	Number of Years Attended
Kōhanga Reo				
Playcentre				
Kindergarten or Education and Care Centre				
Home based service				
Playgroup				
The Correspondence School – Te Aho o Te Kura Pounamu				

**Additional Notes** (if necessary):

## Previous Schooling and Education

Please put a check mark next to / highlight as many of the specialised learning involvements below that may apply to your child.

- None
- Gifted and talented
- Group special education assistance
- ORS funding.
  - Please circle / highlight the level of funding: High / Very High
  - Number of Teacher Aide Hours (if known):
- Teacher aide support
- RTLB assistance
- IWS support
- Other specialised learning involvements – please provide more information:

## Immunisation

Please circle / highlight the appropriate response.

Is the student's immunisation up-to-date? **Yes / No**

If you answer **No** to the question above, please let us know which immunisations may be outstanding. This information will only be used for Health and Safety purposes (as described by the Health (Immunisation) Regulations Act, 1995).

When was the student's last tetanus injection (write '**Never**' if the student has not received one)?

If medical personnel recommend a tetanus injection during an emergency, do you give consent for them to administer it? **Yes / No**

Any additional comments about your child's immunisation?

## Enrolment Type

As a state-integrated school, parents are legally classified as either preferential or non-preferential.

- Preferential enrolments are for parents / caregivers who are members of the Body of Christ and demonstrate an on-going commitment to Jesus. More information is available on our website.
- All other enrolments are non-preferential.

Please circle / highlight the enrolment type: **Preference** / **Non-Preference**

If the enrolment type is **preferential**, please complete.

Church name	
Pastor / Minister/ Church Leader Name	

## Additional Caregiver Details

Caregiver A	
First Name Surname	
Relationship to student	
Current marital status	
Occupation	
Caregiver B	
First Name Surname	
Relationship to student	
Occupation	

## Emergency Contact Details

This person is someone, other than the parent(s) / caregiver(s) of the student, that the school could contact in case of emergency if the parent(s) / caregiver(s) are not able to be contacted.

Surname	
First name	
Relationship to student	
Landline phone	
Cell phone	
Work phone	
Address	Number and street name:
	Suburb area (and RD number):
	Postcode: