



Otumoetai Intermediate School

Application for Tuition

All sections must be completed in English.

ABOUT THE STUDENT		
Family Name:	First Names:	
Nationality:	First Language:	
Date of Birth:	<input type="checkbox"/> Male <input type="checkbox"/> Female	<input type="checkbox"/> Year 7 <input type="checkbox"/> Year 8
Name of Most Recent School Attended:		
English Language Ability: <input type="checkbox"/> Excellent <input type="checkbox"/> Good <input type="checkbox"/> Average <input type="checkbox"/> Poor <input type="checkbox"/> None		

PASSPORT/VISA DETAILS	
Passport Number:	Expiry Date:
Student Visa Number:	Student Visa Expiry:
Date of Arrival in New Zealand: (Month/Year)	Date of Departure from New Zealand: (Month/Year)

ACCOMMODATION DETAILS (See Accommodation Policy)	
Where Will Student Live: <input type="checkbox"/> Homestay arranged by the school (Please complete Homestay Application Form) <input type="checkbox"/> With Parents (as listed below) <input type="checkbox"/> With Designated Caregiver (Please complete Indemnity Form)	
Do you wish the school to arrange travel/medical insurance? <input type="checkbox"/> Yes <input type="checkbox"/> No	

CONTACT DETAILS	
This form can be completed by the student's father, or mother, or both parents. <i>If a legal guardian completes the form, evidence of legal guardianship (e.g. court papers) must be supplied.</i>	
Relationship to Student: <input type="checkbox"/> Father <input type="checkbox"/> Mother <input type="checkbox"/> Stepfather <input type="checkbox"/> Stepmother <input type="checkbox"/> Legal Guardian	
Family Name:	Given Name:
Full Address:	
Telephone Number:	Fax Number:
Email:	

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Relationship to Student: <input type="checkbox"/> Father <input type="checkbox"/> Mother <input type="checkbox"/> Stepfather <input type="checkbox"/> Stepmother <input type="checkbox"/> Legal Guardian	
Family Name:	Given Name:
Full Address:	
Telephone Number:	Fax Number:
Email:	

AGENT CONTACT DETAILS	
Name:	Company:
Address:	
Phone:	Fax Number:
Email:	

GENERAL DETAILS
Have you had a brother or sister previously enrolled at a New Zealand School? <input type="checkbox"/> Yes <input type="checkbox"/> No
Name and Year:
Does your child have any medical or learning needs? (Please specify):

SPORT/CULTURAL ACTIVITIES
Please tick any sporting or cultural activities you are interested in while at our School:
<input type="checkbox"/> Athletics <input type="checkbox"/> Band <input type="checkbox"/> Basketball <input type="checkbox"/> Chess <input type="checkbox"/> Choir
<input type="checkbox"/> Cricket <input type="checkbox"/> Football <input type="checkbox"/> Hockey <input type="checkbox"/> Kapa Haka <input type="checkbox"/> Softball
<input type="checkbox"/> Volleyball <input type="checkbox"/> Water Polo <input type="checkbox"/> Other (please specify):

Please check that the following has been included with this Application Form:
<input type="checkbox"/> Student's latest school report <input type="checkbox"/> Copy of Passport
<input type="checkbox"/> Current Visa <input type="checkbox"/> Insurance details

DECLARATION (to be signed by parent/s or Legal Guardian)	
I agree that my child will abide by the laws of New Zealand, by the rules of Otumoetai Intermediate School , and by all terms and conditions of enrolment.	
Name:	Signed: