



# NGATIMOTI SCHOOL ENROLMENT FORM

STUDENT DETAILS																							
SURNAME:		FIRST NAMES:																					
DATE OF BIRTH:		PREVIOUS SCHOOL (if applicable):																					
HOME ADDRESS:																							
PARENTS EMAIL ADDRESS:																							
CURRENT YEAR LEVEL:		NZ RESIDENT? <small>If not, please give more details</small>	ETHNICITY: <small>If Māori please state Iwi if known:</small>																				
COUNTRY OF BIRTH:																							
PARENT, CAREGIVER, LEGAL GUARDIAN DETAILS																							
<b>Please list parents, guardians AND Emergency Contacts in the order to be contacted below:</b>																							
Name	Relationship to student	Occupation	Contact number(s)																				
1.			Home: Mobile:																				
2.			Home: Mobile:																				
3.			Home: Mobile:																				
4.			Home: Mobile:																				
DOCTOR 'S NAME:		MEDICAL CENTRE PHONE NO:																					
EXTRA COPY OF SCHOOL REPORT TO:																							
CUSTODY ACCESS/COURT ORDER OR ANY OTHER FAMILY INFORMATION WE NEED TO KNOW?																							
<p><b>Early Childhood Education</b> Did your child attend one or more Early Childhood Education Services in the six months prior to starting school? Please complete the table below for the LAST service attended. If your child was attending more than one service please enter hours per week for each one.</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 80%;">Service attended</th> <th style="width: 20%;">No. of hours per week</th> </tr> </thead> <tbody> <tr><td>Kohanga Reo</td><td></td></tr> <tr><td>Playcentre</td><td></td></tr> <tr><td>Kindergarten or Education and Care Centre</td><td></td></tr> <tr><td>Home based service</td><td></td></tr> <tr><td>Playgroup</td><td></td></tr> <tr><td>The Correspondence School – Te Aho o Te Kura Pounamu</td><td></td></tr> <tr><td>Did not attend</td><td></td></tr> <tr><td>Unable to establish if attended or not</td><td></td></tr> <tr><td>Attended but not in NZ or not known where</td><td></td></tr> </tbody> </table>				Service attended	No. of hours per week	Kohanga Reo		Playcentre		Kindergarten or Education and Care Centre		Home based service		Playgroup		The Correspondence School – Te Aho o Te Kura Pounamu		Did not attend		Unable to establish if attended or not		Attended but not in NZ or not known where	
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<p><b>PLEASE GIVE DETAILS OF ANY ALLERGIES AND/OR HEALTH ISSUES, INCLUDING TREATMENT AND MEDICATION REQUIRED:</b> Please include any hearing, sight or speech difficulties</p>																							

**DOES THIS STUDENT HAVE ANY SPECIAL NEEDS REQUIREMENTS OR LEARNING/BEHAVIOUR NEEDS?**

PLEASE GIVE AS MUCH DETAIL AS POSSIBLE, INCLUDING ANY PREVIOUS FUNDING OR PROGRAMMES, E.G. READING RECOVERY, ESOL, ORS

**IMMUNISATION DETAILS:**

**NAMES AND BIRTHDATES OF SIBLINGS LIKELY TO ATTEND THIS SCHOOL IN THE FUTURE:**

**Permission for Off School Premises Activities** During the year, there will be a number of instances when we would like to take students off the school grounds. If this involves travel further than our local Motueka district, we will issue separate permission notices. However, for local trips (e.g. Motueka Public Library, stream visits, visits to Thorn's wetlands, Ngatimoti Hall etc) we would ask that you sign the attached 'blanket consent' form. This will cover permission for our local activities and will be kept with your child's file. We will endeavour to inform you of all visits and trips in our school newsletters.

**Photo/Website Permission** We are keen to continue improvements to our website and use classroom blogs. In order to do this we need permission to include your son or daughter on our website. We intend to follow the guidelines below based on general feedback received from parents, teachers and students. Your signature below gives the required permission unless stated otherwise.

- Student images may appear on the website with the permission of parents and students.
- All students and staff will only have a first name or title. Last name initial only, eg. Susan W.

**Privacy Act** I understand that the information on this form is collected to form part of the essential information the school holds on my child. The records made from this information may be viewed on request at the school. I approve the forwarding of information when my child transfers to another school. I further approve the forwarding of my child's name and address on request to a potential intermediate or secondary school.

I understand that the school will take action on my behalf in case of sudden illness or injury, and I agree to abide by school policies.

The information on this form is collected and used by the school in educating your child, and for associated school activities. It is available to all staff of the school and to members of the board of trustees. Please advise the school if you have any concerns about disclosure of any of the information within the school.

The school is sometimes obliged by law to give information to Government departments (e.g. Ministry of Education, Ministry of Health) but it will not otherwise be disclosed without your authorisation.

**Signature of Parent/Caregiver:** \_\_\_\_\_

**Enrolment Date:** \_\_\_\_\_

**NB: Please bring your child's birth certificate or passport if enrolling as a new entrant.**

**Thanks!**



## Parent Permission for Education Outside the Classroom Activities

**Outdoor Education** is one of seven key areas of learning in the health and physical education learning area of the national curriculum. It focuses on particular aspects of outdoor learning, such as adventure activities, outdoor pursuits, and relevant aspects of education for sustainability (Boyes, 2000). At Ngatimoti School, we believe that all students should have opportunities to learn outside of the classroom. For any low risk activities on the school or reserve grounds, a Risk Management Form is not necessary.



**Education outside the Classroom** is the name given to all events and activities that occur outside the classroom, both on and off the school site. This includes sport.

- Our school believes in using a range of environments and experiences to enhance our students' learning.
- We have ready access to the beach, rivers, mountains, and the bush in our area and beyond. We are also close to various built environments in our community. These areas are rich learning environments for our students both in and out of school. They need to learn how to be safe. Our school also values the concept of providing students with opportunities. Thus some of the learning for students occurs beyond the school site and this document is seeking your consent for your child/ren to participate in such learning.

Type of event	Description	Type of consent
<b>A</b>	<b>On site - in the school grounds</b> i) lower risk environments ii) higher risk environments*	i) No consent sought or blanket consent ii) Separate consent for each event or programme
<b>B</b>	<b>Off-site events in the local community occurring in school time. E.g. Thorn's wetlands, MoTeC, stream.</b> i) lower risk environments ii) higher risk environments*	i) Blanket consent at enrolment ii) Separate consent for each event or programme
<b>C</b>	<b>Off-site events - finishing after school finishes. E.g. Challenge Groups/clubs</b> i) lower risk environments ii) higher risk environments*	i) Blanket consent at enrolment ii) Separate consent for each event or programme
<b>D</b>	<b>Off-site residential overnight events</b> i) lower risk environments ii) higher risk environments*	i) Separate consent ii) Separate consent for each event or programme

\* Involves risk assessed to be greater than that associated with the average family activity

**All EOTC activity categories** require staff to undertake an analysis of the risks, and identify the management strategies required to eliminate, isolate and minimise the risks. Emergency procedures are also in place.

### BLANKET CONSENT FORM

I / We agree to the participation of \_\_\_\_\_ (child's name) in lower risk category **A** and **B** and **C** EOTC events while a student at Ngatimoti School.

I / We have provided the school with up to date medical, supervision and learning information through the enrolment form and will make every endeavour to keep this information current.

Parent/Caregiver Name: \_\_\_\_\_ Signature: \_\_\_\_\_





## ***Vision and Hearing Screening in School***

**Te Whatu Ora**  
Health New Zealand

Te Whatu Ora Nelson Marlborough Public Health Service provides a vision and hearing service in schools.

As part of the National Screening Program your child will be routinely screened by the Vision and Hearing Technician in their first year of school **only if** your child **has not** had vision and hearing screening completed as part of the B4 School check and in Year 7 they have a further Vision screen. All children tested will take home a result slip. Parents will only be contacted if a referral is required.

**Hearing Screening (Audiometry):** An audiometer plays a range of sounds through headphones while your child listens. If your child does not respond to any of the sounds, another test, Tympanometry will be required. This may identify:

- Otitis Media with effusion (fluid in inner ear)
- Grommets/Perforation of the ear drum
- Wax/Obstruction

If your child has hearing aids or is under specialist care for hearing concerns, we do not screen them.

**Vision Screening:** We use a spot screener, which is an Infrared photo-refractory camera with built in algorithms that determine the results. We may also use the Parr letter matching system, which is where a letter is shown at a four-metre distance and your child will be asked to point out the same on a card or tell us the letter if they know the alphabet. If your child wears glasses or is under specialist care, we do not screen their vision.

\* We do not screen for tracking concerns. This needs to be assessed by an optometrist and you arrange this with an optometrist of your choice.

**Year 7 Vision Screening:** We use a spot screener, which is an Infrared photo-refractory camera with built in algorithms that determine the results. We may also use the New Davis wall chart which is a routine 4 metre distance vision check. If your child wears glasses or is under specialist care, we do not screen their vision.

**Requests:** From time to time a teacher/GP or parent may request a screening test. A result sheet will be sent home with your child. You will be contacted if a referral is required.

**Screening results:** Your child will be given a result sheet to take home. You will be contacted if a referral is required. All results are entered on to the Ministry of Education secure ENROL school database.

**Please note:** If you have concerns with your child's vision and/or hearing please contact your GP or optometrist/ophthalmologist as screening is not a full diagnostic assessment.

Please contact us if you have any questions: **027 246 0679 / 027 277 8413**

***If you do not consent to your child having routine/requested Vision and Hearing screening at school, please contact us on the above number.***