



**Sacred Heart
Girls' College**
HAMILTON

For office use only **1 2 3 4**

Date received	
Interview time / date	
Offered place	
Accepted place	
ID number	

Applicant's name _____

Entry year level for 2014 _____

Current school _____

Application for Student Enrolment 2014

Physical address: 52 Clyde Street, Hamilton East, Hamilton

Postal address: PO Box 4064, Hamilton 3247, New Zealand

Telephone: 07 856 7874 **Fax:** 07 856 2316

Email: hearts@shgcham.school.nz

Website: www.shgcham.school.nz

Checklist for parents/caregiver/student to complete

1. Copy of Birth Certificate and or Passport attached
2. Copy of latest school report
3. Preference of Enrolment Certificate attached
4. Signed by parties concerned
5. Cyber safety agreement signed and attached
6. Online publication form signed and attached
7. Enrolment interview sheet completed and attached
8. Help required form completed and attached

Please be advised that we are **unable** to process your enrolment if any documentation is not attached.

Student details

Legal surname	_____	First names	_____
Preferred surname	_____	Preferred name	_____
Address	_____		
Post code	_____		
Date of birth	_____	Telephone	_____
Birth certificate/ Passport No	_____	Student cell phone	_____
Applying to enter	year level _____ in 20____		
Student email	_____		
Present school	_____		
Name of any sibling attending SHGC	_____		

Parents' details

Mother's details

Father's details

Name	_____	Name	_____
Occupation	_____	Occupation	_____
Address	_____	Address	_____
	_____		_____
Telephone (Home)	_____	Telephone (Home)	_____
Telephone (Work)	_____	Telephone (Work)	_____
Cell phone	_____	Cell phone	_____
Email	_____	Email	_____

If the parents are not living together, please provide the college with the following information

- Who is the custodial parent? Mother Father Share Other
- To whom should the accounts for attendance dues, school fees, etc be sent?

- Is a duplicate set of reports required? Yes No If yes, to whom should they be sent?

Emergency contact details

Name _____ Telephone _____

Relationship to student _____

With which ethnic group/culture does the student identify?

Pakeha/European Maori Asian Pasifika Other (Please specify) _____

Country of citizenship _____

Date of student's arrival if not NZ citizen _____

Iwi affiliation _____

Nationality _____

Permanent Residency Yes No

Students born outside of New Zealand MUST produce their passport to verify this information

Confidential Medical Information and Consent

Name of Doctor _____ Telephone _____

Does the student have any physical or medical conditions of which we should be aware?

(Examples: asthma, allergies) Yes No

If yes, please specify _____

Does the student have any special needs which you would like to discuss with us? (Examples: special talents, difficulties or disabilities) Yes No

If yes, please specify _____

Further comments (if necessary) _____

I give permission for my daughter to be treated by

- Hospital (*emergency only*)
- Family doctor above (*emergency only*) at my cost
- Administration of any prescription drugs that are held for your daughter by our health centre personnel and are listed below

Parent/Caregiver _____ Date _____

Preference of Enrolment

Sacramental Information

Sacred Heart Girls' College is a Catholic school that aims to promote the holistic development of all students - academically, culturally, physically and spiritually. Faith development within the Catholic Church is reflected by participation in the sacraments and so we actively encourage students to complete these faith stages.

Please complete the following:

- Catholic students (preference students) - Please complete numbers 1 and 2
- Non-preference - **There are currently no places available for 2014**

Catholic students (preference students)

1. To make this possible, please circle the following sacraments that have been completed and state where and when they were completed.

Sacrament	Baptism	Reconciliation	Holy Communion	Confirmation
Faith community (eg. St Josephs', Fairfield)				
Date: 2009	Date:	Date:	Date:	Date:

Sacramental programmes will link students back to parish, the fundamental Eucharistic community. Our Bishop requires that each student names one person actively involved in parish life to act as a link to a parish community. The link person is asked to pray for the spiritual growth of the student and may be asked to assist the student during sacramental programmes. The link person could be a family member involved in the parish.

2. Parish link person's name _____

Address _____

Phone number _____

Signature of Parish link person _____

My daughter is currently attending a Catholic Primary school Yes No

Student Profile

Please indicate any current specific learning issues to enable us to better meet the needs of your daughter.

Please list any interest, sports or activities in which the student may be currently involved or would like to be involved in.

Has your daughter been involved in any of the following (at previous schools):

- | | | | |
|--|--------------------------|-------------------------------|--------------------------|
| Future Problem Solving | <input type="checkbox"/> | Gifted and Talented programme | <input type="checkbox"/> |
| Remedial Maths | <input type="checkbox"/> | One Day School | <input type="checkbox"/> |
| Extension Maths | <input type="checkbox"/> | Remedial Reading | <input type="checkbox"/> |
| Resource Teacher of Learning & Behaviour—
RTL B | <input type="checkbox"/> | Extension Literacy | <input type="checkbox"/> |
| | | Teacher Aide Assistance | <input type="checkbox"/> |

Other

Will your daughter require extra assistance in learning English/Maths? Yes No

Has your daughter been involved with any of the following agencies?

- | | |
|---|--------------------------|
| Group Special Education—GSE | <input type="checkbox"/> |
| Child & Adolescent Mental Health Services—CAMHS | <input type="checkbox"/> |
| Child, Youth & Family—CYFs | <input type="checkbox"/> |
| Te Puna Hauora | <input type="checkbox"/> |
| Iwi Services | <input type="checkbox"/> |

Parent/Caregiver and Student Undertaking

- The herein named student will participate in the general school programme that gives Sacred Heart Girls' College its Special Character.
- We will pay the college fees (voluntary contribution) unless prior arrangements are made with the Principal.
- We will pay Attendance Dues which are approved by the Minister of Education under Section 36 of the Private Schools' Conditional Integration Act 1975 and are invoiced by the Mission Trust Hamilton College Trust Board.
- We will ensure that the policies and rules, as laid down by the Board of Trustees and the college, are observed.
- The final decision on whether a student meets the enrolment criteria and is able to be offered a place as a student at Sacred Heart Girls' College rests with the Principal.
- I/We understand that payment of Dues will be invoiced at the commencement of each school year and is payable before the end of Term One of that year or before completion of one full term in attendance unless alternative payment arrangements have been made with the accounts department
- I/We authorise the Proprietor to collect, retain, and use any information for the purpose of assessing my/our credit worthiness and enforcing any rights under this contract.
- I/We understand that I/we will be liable for any costs, disbursements and legal fees in the events that we default on payment of Dues.
- I/We declare that I/we have NO outstanding debt at any other Catholic Integrated School.
- I/We agree to accept the rules, conditions and charges determined by the Board of Trustees of Sacred Heart Girls' College.
- I/We accept, as a condition of enrolment, that my daughter will abide by the College Behaviour Guidelines as set out in the Student Information Booklet and Sacred Heart Girls' College Diary. (Available for viewing on school website)
- I/We have read the above guidelines and agree to fulfil these commitments in all areas of the College, in support of the college.
- I/We have read and understood my/our responsibilities and agree to abide by the Cybersafety Use Agreement. I/we know that if I/we breach this use agreement there may be serious consequences. (Available for viewing on school website. Please note: This agreement for your daughter will remain in force as long as she is enrolled at this school. If it becomes necessary to add/amend any information or rule, parents will be advised in writing.

Signed _____ Date _____ Signed _____ Date _____
Parent / Caregiver 1 Parent / Caregiver 2

Signed: _____ Date _____
Student

To be completed by the Principal

Preferential Place

I have sighted evidence that the applicant has established a religious connection with the Catholic character of the college and the applicant's daughter is therefore given a preferential place on the list of applicants for enrolment.

Signed: _____ Date: _____ Principal, Ms Chris Allen