



# MARIST COLLEGE

Catholic School for Girls, Years 7 to 13

International Student Department

www.maristcollege.school.nz

## Enrolment Application: International Student

Please attach a passport style photo of the applicant here.

Proposed year of entry:	20
Start Date:	

Proposed academic year level at entry:	<input type="checkbox"/> Year 7	<input type="checkbox"/> Year 8	<input type="checkbox"/> Year 9	<input type="checkbox"/> Year 10
	<input type="checkbox"/> Year 11	<input type="checkbox"/> Year 12	<input type="checkbox"/> Year 13	
Length of study:	<input type="checkbox"/> Full Year / <b>OR</b>			
	<input type="checkbox"/> Term 1	<input type="checkbox"/> Term 2	<input type="checkbox"/> Term 3	<input type="checkbox"/> Term 4

<b>Student Information</b>	Preferred English name:	
Family name:	Nationality:	
First name(s):	Citizenship:	
Date of birth:	List all languages spoken:	
Country of birth:	Mobile Phone:	
Date of arrival in NZ:	Expiry Date:	
Passport Number:	Expiry Date:	
Visa Number:		

<b>Referring Agent Information</b>	Email Address:	
Agency Name:		
Contact Person:		
Address:		
City & Country:	Mobile Phone:	
Phone Number:	Skype Address:	
<i><b>Agent Declaration:</b> All conditions in this student application has been clearly communicated or translated to the parent/guardian and student and that in no part of this application process, to the best of my knowledge, has any information supplied to the school been false, misleading or deceptive.</i>		
Signed:		Dated:

<b>Family Information - Mother:</b>	<b>Father:</b>
Family name:	Family name:
First name(s):	First name(s):
Home Phone:	Home Phone:
Mobile Phone:	Mobile Phone:
Street Address:	Street Address:
Town/Suburb:	Town/Suburb:
City & Country:	City & Country:
Religion:	Religion:
Email Address:	Email Address:
Skype Address:	Skype Address:
Occupation:	Occupation:
Workplace:	Workplace:
Work Phone:	Work Phone:
Do you read or speak English? <input type="checkbox"/> Yes <input type="checkbox"/> No	Do you read or speak English? <input type="checkbox"/> Yes <input type="checkbox"/> No

<b>Contact Information</b>	For each of the below, please select who you would like the information emailed to
School Reports:	<input type="checkbox"/> Father <input type="checkbox"/> Mother <input type="checkbox"/> Agent <input type="checkbox"/> Onshore Support Person <input type="checkbox"/> Homestay/Caregiver
Kamar/Portal sign-in details	<input type="checkbox"/> Father <input type="checkbox"/> Mother <input type="checkbox"/> Agent <input type="checkbox"/> Onshore Support Person <input type="checkbox"/> Homestay/Caregiver

## Medical Details

*Failure to disclose information pertaining to the student's health and medical records could result in a student's enrolment being terminated.*

Does the student have a medical condition?  Yes  No

Please tick if the student has any of the following medical issues:

- |  |                                   |  |   |  |
|--|-----------------------------------|--|---|--|
| <input type="checkbox"/> Hayfever        | <input type="checkbox"/> Epilepsy | <input type="checkbox"/> Diabetes        | <input type="checkbox"/> Heart Condition      | <input type="checkbox"/> Speech Difficulties |
| <input type="checkbox"/> Allergies       | <input type="checkbox"/> Migraine | <input type="checkbox"/> Arthritis       | <input type="checkbox"/> Hearing Difficulties | <input type="checkbox"/> Vision Difficulties |
| <input type="checkbox"/> Eating Problems | <input type="checkbox"/> Asthmas  | <input type="checkbox"/> Rheumatic Fever | <input type="checkbox"/> Other                |  |

If YES, advise details & degree of severity:

Any further medical details:

Is the student taking any medication?  No  Yes (please explain):

Are there any mental health concerns?  
e.g. Anxiety or Depression  No  Yes (please explain):

Is the school able to administer the recommended dose of Paracetamol, widely used in pain relief or fever reduction for mild cases of headaches or stomach cramps?  Yes  No

Is the school able to administer the recommended dose of Antihistamine, widely used in the relief of allergy or hayfever symptoms?  Yes  No

## Insurance Details

*Marist College recommends Southern Cross Insurance. This policy is compliant with the Code of Practice for the pastoral care of International Students and can be purchased through the school. Medical insurance is compulsory for your New Zealand Student Visa. It is recommended to arrange this prior to the students travel to New Zealand.*

**Please indicate one of the following:**

- I will take out medical and travel insurance and will send Marist College a copy of the policy in English before the student leaves their home country.
- I would like Marist College to arrange medical and travel insurance for the student and add this to my invoice. Please ensure any pre-existing medical conditions have been recorded.

## New Zealand based Onshore Support Person details

*Please also have your appointed Onshore Support Person complete their Responsibilities Agreement*

**I/we appoint the person stated below to provide care and supervise homestay accommodation for the student while studying at Marist College as an International Student. This agreement will last for as long as she is attending Marist College. I/we confirm that this person is a New Zealand Resident or Citizen. (Please note: this person has no legal authority to make decisions for the student and the responsibility for the student remains with the school and the parents. All agreements between the school and students under 18 must be signed by the parents and not by an onshore support person).**

Name of Onshore Support Person:

Address:

Home Phone:

Mobile Number:

Email Address:

Work Phone:

Parent Signature:

Date:

**OR**  Please appoint a school Onshore Support Person (at a cost of \$3,000 per year)

## Auckland based emergency contact person

*If you know of another person living in Auckland who is available to be contacted in an emergency should circumstances require it.*

Name of contact:

Relationship to student:

Address:

Postal Code:

Mobile Number:

Email Address:

Home Phone:

# Living In New Zealand

Marist College is responsible for the pastoral care of ALL students who have a student visa for our school. Select one of the three following options for the student's living arrangements

**Parent(s)** Please also complete the Parent Agreement

## Parent or Legal Guardian details

Name of Parent/s or Legal Guardian/s who will be living with student in New Zealand:

New Zealand Address:

Email Address:

Mobile Phone:

Skype Address:

Home Phone:

**Relative or close family friend**, who will be the student's New Zealand based Caregiver and Accommodation Provider (this person is called a **Designated Caregiver**). Please also complete the Designated Caregiver Agreement & Indemnity

## Designated Caregiver details

Name of Designated Caregiver:

Relationship to student: (eg Uncle/Aunt/Grandparent)

New Zealand Address:

Email Address:

Mobile Phone:

NZ Immigration Status:  Visitor's Visa  Guardian Visa  Work Visa  Permanent Resident/NZ Citizen

**Marist College Host family** at current rate per week Date homestay needed from:

**Homestay Application**  I/we confirm Homestay accommodation is required for the student

Please only complete this section if you require the school to provide homestay accommodation.

Please also have the student complete the Student Homestay Agreement

Please tick the boxes that you think best describes the student's personality

Outgoing

Untidy

Sensitive

Shy

Active

Mature

Independent

Responsible

Humorous

Neat

Optimistic

Patient

Adaptable

Quiet

Organised

Would she feel comfortable in the home with small children?

Yes  No

Would she prefer someone closer to her own age in the host family?

Yes  No

Many host families have pets and the student will have to adjust to living with them. Are there any concerns we should be aware of regarding pets, please explain:

Will she happily join in host family activities?

Yes  No

Does she want to have a quiet house and spend time in her room?

Yes  No

Does she have any food allergies?

No  Yes

Is she vegetarian or have diet restrictions?

Yes  No

If yes, please explain:

Are there any foods she can't/won't eat?

**Interests and Hobbies:** Please list activities the student enjoys (e.g. Swimming, sports, athletics, outdoor pursuits, cooking, music, movies, computer games, books, art etc.)

## Study Information

Please attach certified copies (in English) of the student's last TWO school reports

Current School:

Country:

Grade / Year Level:

Previous School in New Zealand:

Dates Enrolled:

Year Level:

## Subjects Required

In addition to English (ESOL), list up to 5 other subject options the student wants to study

Option 1:

Option 4:

Option 2:

Option 5:

Option 3:

Option 6:

Future job or career goals:

  

## Specific Learning Needs

Has the student required extra assistance for classroom work or behaviour?

Yes  No

If YES, please provide details:

Has the student had Special Education assistance in the past?

Yes  No

If YES, please provide details:

Mastery of English language:

Good

Limited

Extra help required

How long has the student studied English?

**PLEASE NOTE:** In some cases it is not possible to gain entry to your first choice of subjects as classes may be full, particularly if she arrives mid-year. However, we will do our best to ensure she has a course which is suitable to her and her level of achievement. Students should have above average academic results, good attendance records and a desire and commitment to fully cooperate and contribute to the life of the school. International students at Marist College will be required to undertake English and Mathematics tests on arrival. This will determine whether the student will be placed in ESOL classes or mainstream English, and what level of Mathematics they will need to be placed in. Students with lower English may apply, but Marist College reserves the right to:

- Refer the student to an English Language School.
- Place the student in additional ESOL classes.
- Assess the progress of the student throughout their time at the school and make decisions based on their progress on whether to refer them to a lower class, higher class or language school.

## Special Strengths/Interest

(For all categories - please specify level or number of years studied and ability)

Academic (Speech, Debating, Computing, Science, Subject strengths etc.)

Cultural/Artistic (Dance, Drama, Musical Instruments/Singing etc.)

<input type="text"/>	<input type="text"/>
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Significant Awards Received

Hobbies

<input type="text"/>	<input type="text"/>
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Sport (Summer & Winter)

Languages

<input type="text"/>	<input type="text"/>
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## **Student Contract:** *As an International Student enrolled at Marist College and in accordance with the conditions of my student visa, I understand and agree that:*

1. My course of study depends on the results of placement tests. All courses at Marist College include religious education.
2. I must have an official Onshore Support Person approved by the Principal of Marist College.
3. I must attend every class at school each day. If I am unable to attend (because of sickness or similar) my caregiver shall contact the school on the day I am absent and will bring a note to school, signed by my caregiver, explaining my absence. If I am absent for 3 days or more I have to bring a doctor's certificate.
4. If living in a homestay family this must be arranged by the International Student Department. I must not change my homestay family without consulting the Principal and getting her permission.
5. If a change of homestay family is approved by the Principal I will give my new address, homestay family's name, and contact phone numbers to the College office.
6. I must have medical insurance.
7. I must obey all the school rules.
8. I will not receive a refund of fees if I leave Marist College except under those conditions explained in the college's Refund Policy (issued separately).
9. Only Year 13 students are allowed to drive a car to school. If, as a Year 13 student, and I wish to drive a car to school I must register my car with the College and show a valid New Zealand Driver's License.
10. I undertake to stay at school until the date required for course completion for my year level.
11. I understand that if in the opinion of the Principal the school can no longer meet my needs, the contract will be terminated.
12. I agree to accept and uphold the standards of conduct set by Marist College and my caregiver for the duration of the programme. I also agree to maintain friendly and respectful relations with teachers and classmates and with the members of host family, to accept rules of conduct and to participate in family life as much as possible.

**I fully understand that the conditions of this contract are binding on me and that my New Zealand student visa will be cancelled if I break any of these conditions. The Principal will be the sole judge in this matter.**

Student Signature:

Date:

## **Authorisation and Release Contracts:**

### **1. Travel**

*It is necessary for all holiday travel plans to be documented on a Marist College Travel Form and approved by the school, prior to travel plans or reservations being made. This form must also be completed and approved prior to the actual travel. Approval will not be given for any independent travel or for travel to be undertaken without adult supervision. It is necessary that parents are informed of all travel and give approval. Below is authorisation by parents for Marist College to make the decision on student travel. This is not mandatory and if the school does not have this authorisation, the school will need to contact parents and receive permission for every trip that is planned by the student.*

**TRAVEL AUTHORISATION:** *We, the parents of the student, do hereby authorise Marist College to make the determination for her to travel for the length of the student's enrolment at Marist College. This authorisation is given in advance only when the student is travelling and supervised by a host parent, representative of the school or a school approved Travel Company.*

### **2. Medical Release Form**

*We grant Marist College, its employees and the Host Family, at their discretion and if necessary at the cost of the student or her parents or legal guardian, in the case of expenses exceeding the coverage of the insurance policy, the power to place the student in a hospital or in any other institution for any type of assistance or medical treatment, or if there is no hospital available to place her under the care of a local medical doctor for her treatment. We also grant Marist College or the Host Family all necessary permissions to act as legal guardians and 'in loco parentis' in any situation especially in emergencies whatever medical or other including the possibility for surgical operations or any other treatment.*

*We also authorise Marist College to return the student to the home country at her cost, if necessary to submit to medical treatment, if deemed necessary after consultation with medical authorities. We confirm that at the time of signing this document the student enjoys perfect health and that her health record as filled by the parent on the application form is true and complete. We also grant Marist College the power to act on our behalf in anything pertaining to possible representation before local authorities. This authorisation should be valid for the entire duration of the student's study programme and Marist College.*

### **3. Motor Vehicle Ownership and Driving Approval**

*We agree that the student may drive a motor vehicle while enrolled at Marist College in Year 13 and only on the condition that she undertakes a driving instruction course with a New Zealand registered driving instructor and has sat and passed a New Zealand driving test in accordance with New Zealand law. In the case that the student has an International Driver's Licence, she will complete the required conversion of her licence and undergo a New Zealand driving test in accordance with New Zealand law. We agree the student will have full insurance cover if owning a car and must show ownership papers and insurance cover to the International Department. We agree to allow the student to carry passengers only on the condition that she has a full (unrestricted) New Zealand drivers' licence and full insurance cover.*

### **4. Liability Release**

*The undersigned as participant and parents on behalf of ourselves and our representatives, renounce to claim against Marist College, teachers, co-ordinators, any person intervening on behalf of the school, that may arise due to injury, damage, sickness, accident, delay, unusual circumstances or expenses due to strikes, war, atmospheric conditions, quarantine, government restrictions or regulations, act of God, or those derived from acts of omission of airlines, shipping companies, railroads, buses, transportation in general, hotels, restaurants or any other service given by companies, individuals or anyone related with the aforementioned.*

## 5. Photographs and Marketing Material

We the parents grant permission for the school to take photographs and/or video footage of the student during school activities and that the school may use that material on the Marist College website, social media, international and school newsletters, magazines and marketing collateral.

## 6. Privacy Waiver in regard to Student Visa information with Immigration New Zealand

We authorise Marist College or a representative of the school to obtain any personal, medical or character information in regard to the student's visa status. We also give permission for Marist College to obtain information from Immigration New Zealand in regard to the progress of student visa applications for her.

## 7. Conditions of Enrolment *I/we are the parent(s) of the student named on this application form and declare that:*

- The information supplied is true and correct.
- I am familiar with the Ministry of Education's Code of Practice for the Pastoral Care of International Students and agree to comply with the Code. A copy of the code can be supplied upon request from Marist College.
- In signing this enrolment application I also confirm that I have read, agree to and signed (if required) the following:
  - Authorisation and Release Section
  - Nomination of Person to Act as Onshore Support Person if appointed by me/us
  - Designated Caregiver Agreement if appointed by me/us
  - Marist College Cyber safety Agreement signed by me/us and the student
  - The student has read, agreed to and signed the Student Contract section
- I agree that information collected on these application forms may be passed to government agencies in statistical form as required by the Education Act 1993 and other statutory requirements. When this occurs I agree to waive conditions in the Privacy Act 1993.
- I agree to ensure the student abides by the conditions of her Study Visa as set out in the Immigration Act 1987 plus amendments.
- Prior to signing I will seek independent advice on any aspects of this application form that I do not understand.

## 8. Parent Contract for Enrolment *I/we, the undersigned, accept as conditions of enrolment:*

1. I/we will support and encourage the student in the full participation in the Catholic life of the College.
2. I/we will ensure that the rules and regulations as laid down by the Board of Trustees are observed, particularly the cyber-safety agreement, uniform and personal appearance requirements. We understand that the student will be subject to authorities and teachers of the school and that she will have to follow the rules given by family. We also understand that Marist College reserves the right to terminate the programme of any participant whose conduct may be considered detrimental or incompatible with the interest and security of the school or student.
3. Enrolment is subject to availability of places and the results of the student's placement test. The final decision rests with the Principal.
4. I agree to Marist College collecting personal information that will be used for student records, accounting purposes and PTFA contact.
5. The student must have an Onshore Support Person approved by the Principal of Marist College or appointed by Marist College.
6. The student must attend class at school each day. If she is unable to attend (because of sickness) she shall contact the school on the day she is absent. If she is absent for 3 days or more she must bring a doctors certificate.
7. If not living with ourselves or a designated caregiver as appointed by me/us, she must live with a homestay family arranged by Marist College.
8. If we wish her to change homestay, we must consult the Homestay Co-ordinator and seek approval from the Principal.
9. The student will have full Medical and Travel insurance and provide a chest x-ray if required by Immigration NZ.
10. The student will remain at Marist College until the date required for course completion for her year level.
11. I/we understand we will not receive a refund of fees if she leaves Marist College before the completion of her course. I/we have read and understand the College's refund policy.
12. If in the opinion of the Principal the school can no longer meet the needs of the student, then this enrolment will be terminated.
13. I/we understand that the personal information supplied on this enrolment form is being collected to assist the College in understanding and educating the student. The College may pass this information to other educational professionals but only for the same purposes. Similarly, the College will obtain whatever personal information it legitimately requires regarding the student from the student's present or previous schools (**Privacy Act 1993**).

We full understand that the conditions of this enrolment are binding on the student and that her NZ student visa will be cancelled if she breaks any of these conditions. The Principal will be the sole judge in this matter.

Father's Signature:

Date:

Fathers Name:

Mother's Signature:

Date:

Mother's Name:

### FOR OFFICE USE ONLY:

Date Received:

Enrolment form completed in full

Passport Photo Supplied

Acceptance letter and invoice sent

2 Years Academic Record supplied

Fee's paid

Other certificates or references

Offer of place and receipt issued

Year Level Dean

Homestay Allocated

KAMAR details entered

ENROL details entered