



## Alfriston College International Application for Enrolment

Thank you for your interest in attending Alfriston College. Before completing this application form please take some time to get acquainted with our school by reading the Criteria for Enrolment and Code of Conduct on the following page. You might also like to visit our website at [www.alfristoncollege.school.nz](http://www.alfristoncollege.school.nz) Here are some key facts about who we are.

Alfriston College is a state co-educational secondary school established in 2004. The College is set in open, well designed space. The school offers students modern education facilities including:

- e-learning facilities with chrome books available school wide
- State of the art science laboratories
- Creative Arts facilities enabling students to study photography, painting, sculpture, and art design
- Sports Facilities including gymnasium, astro turf area, beach volleyball courts and fitness centre.
- Drama and Dance studios
- Large library with further computer access and senior study centre (ILC)
- IT access all teaching classrooms
- Music suites with practice rooms
- School theatre
- Sports fields
- Five Whanau blocks that each have commons area for study and recreation time
- Specialist technology rooms, including student led café in the hospitality area.

The College is situated in the residential suburb of Manurewa, bordering rural and urban communities. Around and about you can find:

- First class sporting facilities
- Multicultural eating and shopping areas
- Easy access to safe and clean beaches and water based activities such as yachting, fishing, water skiing
- Quick access to Auckland International Airport
- Bus and train access to Downtown Auckland and the shopping areas of Manukau City and Newmarket as well as bus access to mall and leisure facilities at Botany
- Desirable residential suburbs for home stay accommodation

I am sure you will take advantage of all that Alfriston College, Auckland and life in New Zealand have to offer. I look forward to reading your application soon.

Jody Lawrence  
International Student Leader, Alfriston College.



# Alfriston College International Application for Enrolment

## CRITERIA FOR ENROLMENT AT ALFRISTON COLLEGE

International Students at Alfriston College must:

- have their parents' consent to study at Alfriston College.
- have a valid student visa/permit allowing them to study at Alfriston College and meet the conditions of New Zealand Immigration Service student visa/permit requirements.
- have at least an elementary level of English to study at the Junior Level (Year 9 and 10) and an adequate mastery of vocabulary and grammar to study at the Senior Level (Year 11, 12 and 13).
- have medical and personal loss insurance for the time they are studying.
- inform Alfriston College of any serious sickness, behavioural problems, disability or specific learning needs at the time of application.
- include a copy of latest school reports and examination results with this application
- include a hand written letter to their host family (or to our international leader if you are staying parents or Designated Caregiver (DCG))
- co-operate with all members of the College staff, read and accept the authority and rules of conduct of the school as set out in the Code of Conduct.
- accept the decision of the International Student Leader and/or the Deputy Principal in Subject and Year Level placements.
- attend all lessons on time, and to apply themselves fully to their studies.
- inform the college of any change of details in this application as soon as possible, including changes of address and other contact details.
- nominate an English speaking parental representative who has been designated by, and to act on behalf of the student's parents while the student is studying at the College. The parents representative must be readily accessible at any time, to help the student or school should the need arise. This person will make contact with the International Student Leader at least once a term. It is highly preferable to nominate a person who is residing locally, but may include agents and education consultants based overseas.
- live in a home stay arranged by Alfriston College or, with their parent/s, or with a designated caregiver organised by their family. All students attending Alfriston College must live in a situation where there is adult supervision. Living in a flat, hostel or home where there is no approved adult supervision is not permitted.

International Students at Alfriston College must not:

- Take time off school during the term to travel on holiday or to return to their family for a holiday, without the express permission of the International Student Leader.
- Leave the College at the end of the school year before their course work and examinations are completed. The College will inform students studying at each year level the date they may leave the school.



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Date of Application \_\_\_\_\_

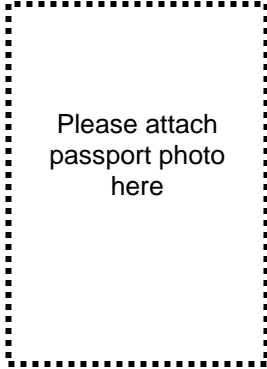
**YEAR LEVEL: (Please tick the year level which applies)**

Year 9  Year 10  Year 11  Year 12  Year 13

**START DATE:**

Term 1  Term 2  Term 3  Term 4  Year: 20[    ].

Length of course: [    ]Terms



**DETAILS OF STUDENT**

Gender:    Male  Female                       Date of Birth \_\_\_\_\_

Last Name (as on passport): \_\_\_\_\_

First Name (as on passport): \_\_\_\_\_

Known As: \_\_\_\_\_

Nationality: \_\_\_\_\_                      Religion: \_\_\_\_\_

First Language: \_\_\_\_\_

Student Email: \_\_\_\_\_

Student Mobile Number: \_\_\_\_\_

**PASSPORT DETAILS**

Passport Number: \_\_\_\_\_ Student Visa Issue Date: \_\_\_\_\_

Passport Expiry Date: \_\_\_\_\_ Student Visa Expiry Date: \_\_\_\_\_

**PARENTS DETAILS**

Mother's Last Name: \_\_\_\_\_

Father's Last Name: \_\_\_\_\_

Mother's First Name: \_\_\_\_\_

Father's First Name: \_\_\_\_\_

Address: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Occupation: \_\_\_\_\_

Occupation: \_\_\_\_\_

Telephone Number (    ) \_\_\_\_\_

Telephone Number: (    ) \_\_\_\_\_

Mobile Number: \_\_\_\_\_

Mobile Number: \_\_\_\_\_

Email Address: \_\_\_\_\_

Email Address: \_\_\_\_\_



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## AGENTS DETAILS

(Only applicable if you are using an agent)

Name of Agency: \_\_\_\_\_

Agent Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Contact Phone Number: ( ) \_\_\_\_\_

Contact Person: \_\_\_\_\_

Email of Agent: \_\_\_\_\_  
\_\_\_\_\_

**PARENTAL REPRESENTATIVE** (an English-speaking parental representative must be nominated by, and act on behalf of the student's parents while the student is studying at the College. This person must be readily accessible at any time, to help the student or school should the need arise. It is highly preferable to nominate a local person, but may include agents and education consultants based overseas, as long as email or phone contact is readily available)

Name of Contact Person: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Telephone Number: \_\_\_\_\_

Mobile Number: \_\_\_\_\_

Email: \_\_\_\_\_

Relationship to you: \_\_\_\_\_  
\_\_\_\_\_

## GENERAL DETAILS

Have you applied for Alfriston College before: Yes  No

If yes, when:     /     /

Have you had a brother or sister enrolled at Alfriston College before: Yes  No

Name: \_\_\_\_\_ Year Attended: \_\_\_\_\_

Have you studied at a NZ school before: Yes  No

If yes, please state the school you last attended in NZ: \_\_\_\_\_

How many years have you studied English: \_\_\_\_\_ months \_\_\_\_\_ years

Do your parents speak or read English: Speak: Yes  No

Read: Yes  No

What is your planned future career: \_\_\_\_\_

### What subjects do you hope to take at Alfriston College?

(Subjects are confirmed after enrolment and assessment)

1 \_\_\_\_\_

2 \_\_\_\_\_

3 \_\_\_\_\_

4 \_\_\_\_\_

5 \_\_\_\_\_

6 \_\_\_\_\_

Do you want to take Outdoor Education? Yes  No



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## INSURANCE DETAILS

You **must** have insurance before travelling to New Zealand. Most international students are not entitled to publicly funded health services while in New Zealand. You may be liable for full costs of treatment. Please note, your insurance **must** be comprehensive and should cover the incidences noted below:

(a) Travel—

- (i) to and from New Zealand; and
- (ii) within New Zealand; and
- (iii) if the travel is part of the course, outside New Zealand; and

(b) medical care in New Zealand, including diagnosis, prescription, surgery, and hospitalisation; and

(c) repatriation or expatriation as a result of serious illness or injury, including cover of travel costs incurred by family members assisting repatriation or expatriation; and

(d) death, including cover of—

- (i) travel costs of family members to and from New Zealand; and
- (ii) costs of repatriation or expatriation of the body; and
- (iii) funeral expenses.

If your insurance policy does not cover the above, you may not be able to take up your studies at Alfriston College. We will need to see a copy of any insurance policy documents before you travel to New Zealand

Please record the details below and attach a copy of the original policy along with a translation in English of the cover provided.

Insurance Policy Provider: \_\_\_\_\_ Insurance Policy Number: \_\_\_\_\_

Insurance Expiry Date:    /    /



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**Do you require Alfriston College to arrange insurance for you?**

Yes

No

Insurance is organised through Allianz Studentsafe under the 'Inbound Young Learners Platinum' plan.

You can see the policy details at: <https://www.insurancesafenz.com/studentsafe/student-safe-inbound-learners>

You must complete the following:

[https://alfristoncollege.ibcdn.nz/media/2017\\_11\\_27\\_sfmf1-studentsafe-medical-risk-assessment-form.pdf](https://alfristoncollege.ibcdn.nz/media/2017_11_27_sfmf1-studentsafe-medical-risk-assessment-form.pdf)

and for specific items over \$2500.00

[https://alfristoncollege.ibcdn.nz/media/2017\\_11\\_27\\_sfppf2-studentsafe-personal-property-application-form-interactive.pdf](https://alfristoncollege.ibcdn.nz/media/2017_11_27_sfppf2-studentsafe-personal-property-application-form-interactive.pdf)

I authorize Alfriston College to declare on behalf of the insured that:

- there are terms, conditions and exclusions in this policy which may effect your cover, including but not limited to restriction on existing medical condition for which an assessment guide may be provided.
- In the past five years the insured's have not made any insurance claims for property or had insurance declined, cancelled or refused or any insurance claim declined
- The insured's acknowledge that it is your obligation to read and understand this insurance policy and should you not be satisfied with the cover provided you can request a full refund within 48 hours of issue so long as no claim is made against the policy
- You agree that Allianz Australia Insurance is authorized to give or obtain information from other parties, including other insurance companies and the Insurance Claims Register, relating to this insurance or any claims made under this insurance
- I agree to accept free or reduced cost health treatment where it available, under any reciprocal health agreement with the New Zealand Government (unless the Private Hospital Care extension has been selected)

**MUST BE SIGNED BY PARENTS/LEGAL CAREGIVER – NOT THE AGENT**

Signature of Parent(s) / Caregiver(s): \_\_\_\_\_

\_\_\_\_\_

Date: \_\_\_\_\_

Relationship to student: \_\_\_\_\_

*Note: Failure to disclose relevant information or the provision of false information may result in termination of insurance.*



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## ACCOMMODATION REQUIREMENTS

- Do you wish to have a homestay organised by Alfriston College? : Yes  No
- I wish to organise my own accommodation (Designated Care Giver): Yes  No
- I will be living with my parents: Yes  No

(Please provide copy of your full birth certificate stating your parents' names and copy of their passport and visa)

## DESIGNATED CARE GIVER (DCG) DETAILS

(If staying in accommodation NOT organised by Alfriston College)

Name of Caregiver: \_\_\_\_\_

Address (in NZ): \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Telephone Number: \_\_\_\_\_ Mobile Number: \_\_\_\_\_

Email: \_\_\_\_\_

Relationship to you: \_\_\_\_\_

*Please note: A DCG must be a relative or close family friend of the family. This accommodation must be approved by Alfriston College prior to the student's arrival. Please provide a copy of the passport (and visa if applicable).*

## PERSONAL DETAILS

Are you happy to live with cats / dogs? Yes  No

Do you smoke? Yes  No

Do you mind living in a house with smokers? Yes  No

Are you happy living with a family with young children? Yes  No

Are you happy living with a family with no children? Yes  No

Do you require any special foods, or is there something you can't eat?

Do you require any religious observances? Give details:

What type of host family do you think would suit you best?

**Please provide a short hand-written letter to introduce yourself to your new host family.**



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## Acceptance of Terms

**On acceptance of your enrolment, Alfriston College will undertake to deliver a high quality curriculum in a supportive and safe environment.**

### Student's Guarantee

I \_\_\_\_\_ (student) have read and understood the conditions of being an International Student at Alfriston College and agree to abide by the rules of the school. If I am living in a homestay organised by Alfriston College, I agree to abide by the homestay rules and guidelines and to do my best to fit in with the lifestyle of my homestay family.

Signature of Student: \_\_\_\_\_ Date: \_\_\_\_\_

### Parents / Caregivers' Guarantee

I/we declare that the information provided in this enrolment application is true and correct.

I/we agree to the use (including disclosure) of the above information by the staff of the college for any purpose related to the education or well-being of the student concerned.

I/we have read and agree to the Computing / Cybersafety Student Use Agreement. My son/daughter/ward must restrict his/her actions in using the computers and the internet to those allowed by the agreement.

I/we are willing for my child's photograph or school work to be used for publicity material (eg prospectus, website or in public displays).

I/we will ensure our child will attend school regularly wearing correct school uniform, complete home learning and will abide by the school rules.

I/we understand that all student possessions (personal, electronic gear, wallets, uniform items) are the responsibility of the student and that Alfriston College takes no responsibility for any loss of these possessions.

I/We agree for my child to be tested for substance abuse by the College's medical personnel should the need arise

I/we agree to pay all compulsory fees as set by the Board of Trustees.

I/we accept the authority of Alfriston College and are aware that Alfriston College will act according to the Code of Practice for the Pastoral Care of International Students <http://www.legislation.govt.nz/regulation/public/2016/0057/latest/DLM6748147.html> Please also see <http://www.nzqa.govt.nz/providers-partners/education-code-of-practice/> for more information should you need or want it.

### **MUST BE SIGNED BY PARENTS/LEGAL CAREGIVER – NOT THE AGENT**

Signature of Parent(s) / Caregiver(s): \_\_\_\_\_

Date: \_\_\_\_\_

Relationship to student: \_\_\_\_\_

*Note: Failure to disclose relevant information or the provision of false information may result in termination of enrolment.*





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**Please include with this application:**

- Passport copy
- School report (latest)
- Recommendation letter from principal or head teacher
- Letter of Introduction to host family
- Copy of existing insurance policy (if using while in NZ)

**Download from <http://www.alfristoncollege.school.nz/international/enrolment-procedure>  
complete and include with this application:**

- Medical Form
- Education Outside of the Classroom Consent Form
- Homestay Agreement (if required)
- Tuition Agreement
- Refund Policy
- Cyber-Safety Agreement
- Insurance Medical Risk Assessment Form
- Insurance Property Declaration (if needed for specific items over \$2500)
- Designated Care-Giver Agreement (if required)



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