

# In-zone Enrolment 2027

Dear Parents / Caregivers

Thank you for your enquiry regarding enrolment at Alfriston College.

## To enrol:

Please complete the enrolment application and provide the following (photocopies are advised)

### CHECKLIST

- ☐ Completed and signed **Enrolment Application**
- ☐ **Proof of Place of Residence** ie current telephone or electricity account or government agency letter
- ☐ **Birth Certificate** or **Passport** (NZ born learners) **OR**
- ☐ **Proof of Residency** (non NZ born learners) – residency stamp, citizenship certificate, letter from Immigration Service. **NB:** Originals must be sighted
- ☐ Completed and signed **Medical Form**
- ☐ Most recent **School Report** (for learners who are not coming from a school in Manurewa/Takanini)

***Please note: An incomplete enrolment will not be accepted.***

An enrolment interview is required with a Senior Leader appropriate to the year level of the learner with the caregiver and learner. This is the final part of the enrolment process.

- ☐ **Enrolment Interview completed [Office use only]**

In December, you will receive a Welcome to Alfriston College letter confirming start dates and times.

If you have any questions or require any further information regarding enrolments, please contact our Enrolment Manager – Julie-Anne Roberts Phone: 269 0080 ext 865, email [j.roberts@alfristoncollege.school.nz](mailto:j.roberts@alfristoncollege.school.nz)

**PLEASE RETURN ENROLMENT FORM BY 31 August 2026**

**SECTION 1 Learner Details**

Legal Surname \_\_\_\_\_

Date of Birth \_\_\_\_/\_\_\_\_/\_\_\_\_

Legal First Names \_\_\_\_\_

Male / Female (please circle)

Preferred Name \_\_\_\_\_

Current / Previous School \_\_\_\_\_

Current Year Level \_\_\_\_\_

**SECTION 2 Home Details**

Home Address \_\_\_\_\_

Post code \_\_\_\_\_

Home Phone \_\_\_\_\_

**SECTION 3 Primary Caregivers:** (i.e. the person(s) who lives at the above address and is/are officially responsible for the learner)

Surname \_\_\_\_\_

Surname \_\_\_\_\_

First Names \_\_\_\_\_

First Names \_\_\_\_\_

Phone Home \_\_\_\_\_

Phone Home \_\_\_\_\_

Mobile \_\_\_\_\_

Mobile \_\_\_\_\_

Work \_\_\_\_\_

Work \_\_\_\_\_

Relationship to learner- eg Mother \_\_\_\_\_

Relationship learner - eg Father \_\_\_\_\_

Occupation \_\_\_\_\_

Occupation \_\_\_\_\_

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

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

**SECTION 4 Secondary Caregivers** (complete **only if required** e.g. parents separated)

Surname \_\_\_\_\_

Surname \_\_\_\_\_

First Names \_\_\_\_\_

First Names \_\_\_\_\_

Phone Home \_\_\_\_\_

Phone Home \_\_\_\_\_

Mobile \_\_\_\_\_

Mobile \_\_\_\_\_

Work \_\_\_\_\_

Work \_\_\_\_\_

Relationship to learner \_\_\_\_\_

Relationship to learner \_\_\_\_\_

Occupation \_\_\_\_\_

Occupation \_\_\_\_\_

**Emergency Contact** – An additional contact (for emergencies) for use when parent/caregivers cannot be reached

Name \_\_\_\_\_ Phone Number (Home) \_\_\_\_\_

Relationship to Learner \_\_\_\_\_ (Mobile) \_\_\_\_\_

**SECTION 5 Custody**

Are there any specific access / custody orders that the school should be aware of?

Yes / No

If "yes" please explain and provide copies of necessary documentation:

---



---

**SECTION 6 Learner Cultural Identity**

(Circle the relevant cultural identity)

Specify where indicated e.g. Samoan

Maori\*

Iwi affiliation:\*

NZ European/Pakeha

Other European Specify

Polynesian Specify

Asian Specify

Other Specify

---



---

What is your first language?

Language spoken at home

**Learners not born in New Zealand, please answer the following questions**

How long has the learner lived in New Zealand? (Tick the relevant box)

☐ Less than 5 years☐ More than 5 years

Country of Origin:

Date of first arrival in New Zealand:

**Is the learner a**

Citizen of NZ

Permanent Resident (circle one)

Student Permit

**Refugee** Yes Quota? Yes / No

Documentation included? Yes / No

Original sighted Yes / No

**Parents**

Do you consider yourself to be a migrant? Yes / No

Origin of learner's mother?

Origin of learner's father?

**SECTION 7 Background Information**

Does the learner have brothers/sisters who are presently attending or who have previously attended Alfriston College?

| Name | Years attended | Whanau (if known) |
|------|----------------|-------------------|
|      |                |                   |
|      |                |                   |
|      |                |                   |

**SECTION 8 Learning Support****Does your child require any special learning assistance or have they had any assistance in the last two years?** (e.g. RTL, reading recovery, ORRS funding, hearing/vision)

---



---



---

**SECTION 9 Outside Agencies**

Are there any outside agencies involved that the school should be aware of

Yes/No

If "yes" please explain and provide copies of necessary documentation:

---



---

## EDUCATION OUTSIDE THE CLASSROOM (EOTC)

This EOTC form is to cover events which occur before school between 6.30am and 9.00am, during the course of the school day, after school from 3.00-6.00pm (Terms 1 & 4) 3.00-6.30pm (Terms 2 & 3). Possible events may include but are not limited to cultural practices, sports practices, inter-school sport competitions, dance and drama rehearsals, course tutorials/workshops, and curriculum-based learning experiences in the local community.

Where an event involves risk exposure greater than what would typically be the case at school, such as adventurous activities or hazardous environments or the event continues overnight, specific consent will be required. At the time of our seeking any further consent, you will also be asked to update the health and contact information held by school.

It is important that this form is completed at the start of the year for all learners who will be participating in EOTC events (as described above). The details on this form will remain confidential to school staff, contractors and volunteers associated with supervising activities on EOTC events.

Please note that is crucial that learner details such as health information and emergency contacts are kept up to date with the Alfriston College school office during the year. The information we have on file must be accurate and complete, to allow us to plan appropriately for EOTC events.

### *Privacy Statement:*

*Please note: the personal information collected on this form is for the purpose of running EOTC events and ensure health and safety of all involved. It will not be used or disclosed for any other purpose except in accordance with the Privacy Act 1993. You have the right under that Act to access and seek correction of the information.*

### **Medical Consent (tick all statements to indicate that you have read and agree)**

- ☐ In an emergency Alfriston College may act on my behalf.
- ☐ Alfriston College may administer pain relief.
- ☐ I agree that if prescribed medication needs to be administered, a designated adult will be assigned to do this. I will ensure that prescribed medication is clearly labelled, securely fastened and handed to the designated adult with instructions on its administration.
- ☐ I will inform Alfriston College as soon as possible of any changes in the medical or other circumstances involving my child.
- ☐ I agree to my child receiving any emergency medical, dental, or surgical treatment, including anesthetic or blood transfusion, as considered by the medical authorities present.
- ☐ Any medical costs not covered by ACC or a community service card will be paid by me.
- ☐ If my child is involved in a serious disciplinary problem, including the use of illegal substances and/or alcohol, or actions that threaten the safety of others, he/she will be sent home at my expense.

**Signed (by Parent):** \_\_\_\_\_ **Date** \_\_\_\_\_

**Learner Contract (tick all statements to indicate that you have read and agree)**

To be read and signed by all participating learners.

☐ I understand that any EOTC event is an opportunity for me to learn, practise skills and gain attitudes and values

in an environment outside the classroom.

- I realise that this requires me to take genuine responsibility for my own learning and the safety of others and myself.

☐ I agree to do the following to make this happen:

- Accept the rules set by the school for any event, even if they are different from what is acceptable at home;
- Show courtesy and consideration for others;
- Follow the rules and instructions of staff and other supervisors;
- Take part in all activities within challenge-by-choice options;
- Look after myself and my personal belongings;
- Declare medical conditions that could affect participation.

☐ I understand that my parent/caregivers will be contacted and I may be sent home at their expense if:

- My actions are considered unacceptable by staff;
- I break the school drugs and alcohol policy;
- My actions put others or me in danger.

**Signed (by learner):** \_\_\_\_\_ **Date** \_\_\_\_\_

**Parent Consent (tick all statements to indicate that you have read and agree)**

☐ I agree to my child taking part in EOTC events and I acknowledge the need for them to behave responsibly.

☐ I understand that there are risks associated with involvement in Alfriston College's EOTC events and that these

risks cannot be completely eliminated.

☐ I understand Alfriston College will identify any foreseeable risks or hazards and implement correct management

procedures to eliminate or minimise those risks.

☐ I understand that my child will be involved in the development of safety procedures. I will do my best to ensure

that my child follows these procedures.

☐ I acknowledge that in order to gain a better understanding of the risks involved, I am able to ask any questions of

Alfriston College about the activities in which my child will be involved. I recognise that participation in such if

activities is voluntary and not mandatory. My child and I both understand that they may withdraw from the

activity they feel at risk. This must be done in consultation with the person in charge.

☐ I understand that Alfriston College does not accept responsibility for loss or damage to personal property (either my child's property or damage to other's property caused by my child) and that it is my responsibility to check my own insurance policy.

**Signed (by Parent):** \_\_\_\_\_ **Date** \_\_\_\_\_

**PLEASE ENSURE THAT ALL SECTIONS OF THE EOTC BLANKET CONSENT FORM ARE COMPLETED**

## **BRING YOUR OWN DEVICE AGREEMENT - 2027 - FOR LEARNER OWNED DEVICES**

Alfriston College is a bring your own device (BYOD) learning environment and learners are **required** to bring their own device to school every day.

Our recommended device is a Chromebook. We recommend a Chromebook because of their lower cost, smaller size, toughness and longer battery life when compared to a laptop. If your child already has a device that they have been using at Intermediate, please check with us to see if it is suitable for learning at Alfriston. Most laptops, Macbooks, notebooks etc. will be suitable if they have a 10" screen or bigger, and a proper keyboard. A smartphone or a tablet is not a suitable device for learning.

We also require learners to have a set of earbuds with a microphone so they can listen to video resources privately and make use of voice to text apps in the classroom.

This agreement outlines the expectations and responsibilities of use of YOUR OWN device while at school. Before your child can use their own device in school, we require you to read and tick the following statements to show your understanding and acceptance:

- ☐ All devices brought to school are my child's responsibility whilst in school and travelling to and from school.
- ☐ Obtaining and maintaining any insurance for the device is my responsibility. The school is not responsible for any loss or damage to the device but will assist in resolving any issues that result in loss or damage when it can.
- ☐ My child must allow the school to record the make, model, and serial number of the device. This is so the school can positively identify and establish ownership of any device in school.
- ☐ The device must remain in the care and possession of my child throughout the day and must never be left unattended either in a school bag or out in a room.
- ☐ Charging the device is my child's responsibility. We expect that devices are brought to school each day fully charged. My child may charge their device in school provided they use their own charger and the device is not left unattended.
- ☐ Devices brought to school are for the use of my child only. Learners should not share devices and must NEVER share passwords.
- ☐ The school expects learners who use their own devices to follow the rules laid out in the Responsible Use Agreement. Alfriston College staff reserve the right to confiscate any device from a learner who breaches the Responsible Use Agreement. This includes for the misuse or abuse of social media and accessing inappropriate internet content.
- ☐ In the event that the device is confiscated following a breach of the Responsible Use Agreement, a parent may be required to collect the device from school.

**Learner's Name:** \_\_\_\_\_

**Parents/Caregiver's Name:** \_\_\_\_\_

**Parents/Caregiver's Signature:** \_\_\_\_\_

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

## **DIGITAL TECHNOLOGIES & CYBERSAFETY LEARNER USE AGREEMENT**

### **Learner**

**I understand that**

- I cannot use the information technology resources or internet at school without signing and handing in the completed enrolment form.
- Computers and other communication technology equipment that belongs to Alfriston College are intended for educational purposes. Any other communication technology equipment that I use within the school environment (e.g. mobile phone) will be used in accordance with the school regulations.
- When using a global information system such as the Internet it may not always be possible for the school to filter or screen all material which is inappropriate, (e.g. legal pornography), dangerous, (e.g. bomb designs), or illegal (e.g. child pornography or stolen credit card numbers). It is therefore each learner's responsibility not to initiate access to such material, to distribute such material by copying, storing or printing, or have any involvement with such activity.
- When using the email facilities at school, it may not be possible for the school to monitor or filter all messages; it is therefore each learner's responsibility to ensure that any electronic correspondence will not cause offence or be otherwise inappropriate.
- The school will view seriously involvement in any incident in which communication technologies are used to facilitate misconduct e.g. harassment, bullying, plagiarism, exam cheating etc.
- The school reserves the right to check at any time, work or data related to communication technologies in the school environment.
- 

**I will take care of information technology resources, including.**

- I will not damage computer equipment or furniture and will use the resources with due care.
- I will not use any school computers for games (unless approved by a Senior Leader).
- I will not attempt to breach copyright (e.g. by illegally copying software).
- I will not bring software from home to use on an Alfriston College device.
- I will not plagiarise by illegally copying text without referencing the source.
- 

**I will be considerate to other users, including.**

- I will not monopolise equipment.
- I will not deliberately waste computer resources (e.g. unnecessary printing).
- I will not intentionally disrupt the smooth running of any computer or the school's network (including use of someone else's account or by-passing logon security)
- I will not scan or display graphics, record or play sounds, or type messages that could cause offence to others.
- If I accidentally encounter inappropriate, dangerous or illegal material I will immediately remove it from the screen/turn off the screen and notify a supervising learning leader without disclosing the material to any other learner.

## **I will respect the need for privacy and security, including**

- I will not share my password or account with anyone (you will be responsible for any agreement violations traced to your account).
- I will not reveal my home addresses or phone numbers, mine or anyone else's, in cyberspace.
- I will use external computer storage devices (e.g. USB's, external hard drives) only in accordance with the school regulations.
- I will not attempt to upload or create computer viruses or be involved with other forms of electronic vandalism.
- I will immediately report any cyber safety problems to a class teacher or Assistant Principal.

## **I accept that**

Breaching this agreement (or any involvement in such a breach) may result in my access to the Computing and Communication Technology resources at Alfriston College being withdrawn, which could make me ineligible to continue studying a particular subject. I also understand it could result in contact of my parents/guardians and/or in disciplinary action by the School.

## **Parents or Guardian**

### **General use of computing/communication technology resources**

As the parent or guardian of this learner, please read the Computing / Cybersafety Learner Use Agreement with them to ensure he/she understands his/her obligations. The computer/communication technology resources at Alfriston College are designed for educational purposes and that any breach of the rules and conditions as set out in this agreement can lead to loss of privileges or disciplinary action. If your child steals or damages equipment this could result in a bill for the cost of replacement parts or repairs. This agreement applies to communication technologies your child brings into the school environment.

## **Access to cyberspace**

Alfriston College will take all appropriate measures to minimise the risk of exposure to illegal, dangerous, or inappropriate material in cyberspace, accessed through such means as the Internet, email or text messaging. The school emphasises that ultimately it is each learner's responsibility not to initiate access to, or have any involvement with, such material.

## **Related Resources**

### **Websites**

|                                                                                 |                                                                                 |
|---------------------------------------------------------------------------------|---------------------------------------------------------------------------------|
| <a href="http://www.netsafe.org.nz">http://www.netsafe.org.nz</a>               | <a href="http://www.cyberkidz.co.nz">http://www.cyberkidz.co.nz</a>             |
| <a href="http://www.cybersmartkids.com.au">http://www.cybersmartkids.com.au</a> | <a href="http://disney.go.com/cybersafety">http://disney.go.com/cybersafety</a> |
| <a href="http://www.netsmartz.org">http://www.netsmartz.org</a>                 |                                                                                 |

**Signature of Learner** \_\_\_\_\_ **Date** \_\_\_\_\_

## ENROLMENT DECLARATION

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

### **Learners' Guarantee**

I request that I be admitted to Alfriston College. I understand and will abide by the conditions and rules as set out in the school's Digital Technologies & Cybersafety Learner Use Agreement (See page 8). I further understand that there may be consequences (including the possible loss of access and even disciplinary action) if I should commit any breach of these conditions.

I will attend regularly, wear the correct uniform and abide by the AC Way. (refer to AC Hauora Procedure #6)

**Signature of Learner** \_\_\_\_\_ **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, well-being, benefit, or safety of the learner concerned.
- ☐ I/we will ensure our child **will attend school regularly wearing correct school uniform**, engage with learning and will abide by the school rules.
- ☐ I/we have read and agree to the Computing/Cybersafety Learner Use Agreement. My son/daughter/ward must restrict his/her actions in using the computers and the internet to those allowed by the Alfriston College.
- ☐ I/we are willing for my child's photograph or schoolwork to be used for publicity material (eg prospectus, website, Alfriston College Facebook page or in public displays).
- ☐ I/we understand the importance of participating in the Learner Progress Conversations programme at Alfriston College and I/we will endeavor to be an active partner in this.
- ☐ I/we understand that all learner possessions (personal, electronic gear, wallets and uniform items) are the responsibility of the learner and that Alfriston College takes no responsibility for any loss of these possessions.
- ☐ I/we agree to abide by Board of Trustee's decisions in relation to the wellbeing of learners at Alfriston College.
- ☐ My child will have their own Chromebook/laptop for use at school.

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

## Alfriston College Kai for Learning

Alfriston College currently feeds all learners five days a week. This programme is called “Kai for Learning”. Hot lunch is available from our cafeteria during the following hours.

Junior Learners - 11.30 – 12 noon

Senior Learners - 1.30 – 2.00pm

In order to cater for every learner, we require the following information. Please tick relevant dietary requirements.

**Learner's Name:** \_\_\_\_\_

- ☐ **Dairy Free**
- ☐ **Gluten Free**
- ☐ **Halal**
- ☐ **Nut Allergy**
- ☐ **Vegetarian**
- ☐ **Vegan**
- ☐ **Other Dietary Requirements? Please state:** \_\_\_\_\_

\_\_\_\_\_

**Parent/Caregiver's Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

## Place of Residence

The address given at the time of application for enrolment must be the learner's place of residence when the learner begins their first day of attendance. This means that if you currently live at an in-zone address but move to an out-of-zone address before your child's first day of attendance at the school, your child will not be entitled to enroll at the school.

**The Ministry of Education has advised that parents should also be warned of the possible consequences of deliberately attempting to gain unfair priority in enrolment by knowingly giving a false address or making an in-zone living arrangement intended to be only temporary.**

I have read the following information and I confirm that the address which I have provided to the school will be the usual place of residence of \_\_\_\_\_ (learner's name) when they begin their first day of attendance. I will advise the school of any subsequent change of address.

**Signed:** \_\_\_\_\_

**Name:** \_\_\_\_\_

**Relationship to learner:** \_\_\_\_\_

### **PRIVACY OF INFORMATION**

The information you provide is used for communication with home, official documents for your child and statistics.

Information is supplied to the Ministry of Education who may pass contact details on to the Ministry of Social Development should it be required to help school leavers into work or further training.

The information is kept in a Learner File and on a computer database.

The Learner File may also contain school agreements eg, copies of cybersafety agreement, copies of reports, letters and other relevant information.

School Staff have access to the information.

In an emergency, at the discretion of the Principal, information from the file may be given to an agency such as Police or Doctor.

Learners may see their file by making a written application to the School Leader.