Applicant:	Last Nar	me:		F			
Date of birth:		/	/				
Year of entry:		2026					
Year Level at entr	Year 7	['] □ Year 8□	Year 9 □	Year 10 □	Year 11 □	Year 12 □	Year 13 □
(Sibling also apply	ing) Nar	me:			Year	level:	

P # Applic Rcd



Application for Enrolment Year Levels 7-13



Please affix a passport style photo of the applicant here.

		STUDEN	T INFORMATIO	N	
Legal Surname			Gender	Male 🗌	Female
Legal First names			Nationality		
Preferred name			Language/s spoken at home		
Date of birth			Country of Birth		
	School name:			v =	🗆
Current school	From (mm/yyyy)		NZ Residency	Yes 🗌	No 🗌
Previous schools			Date of Arrival		
			Ethnicity		
Present year level			If Maori please		
Religion			indicate iwi		
Baptism (place/date)					
Confirmation (place	e/date)				
First Communion	(place/date):				
		FAMILY INFO	ORMATION		
Custodial Parent/	Both parents	Father only	Mother only	Other (specify name	ne and relationship)
During the School	I week the Student lives	Both p	arents Father	only Mother only	/ Guardian
Mother / Stepn	nother / Caregiver (cir	cle as appropriate)	Father / Stept	father / Caregiver	(circle as appropriate)
Title			Title		
Surname			Surname		
First names			First names		
Preferred name			Preferred name		
Home address			Home address		
Suburb			Suburb		
City and Postcod	е		City and Postcode		
Phone (home)			Phone (home)		
Phone (mobile)			Phone (mobile)		
Phone business			Phone business		
Email Frequently checke	d		Email Frequently checked	1	
Occupation			Occupation		
Business name/address			Business name/address		
Religion			Religion		
Parish attending			Parish attending	•	



		SANCTA MA	ARIA COLLEGE	AFFILI <i>A</i>	TIONS		
		Name:		Υ	'ear level		
Siblings current		Name:		Υ	'ear level		
attending Sanct College	a Iviai ia	Name:		Υ	'ear level		
		Name:		Υ	'ear level		
Siblings who pro	eviously	Name:			Dates attend	ed	
attended Sancta		Name:		[Dates attend	ed	
College		Name:		[Dates attend	ed	
Other family me	mbers	Name:		1	Dates attend	ed	
who attended Sa		Name:			Dates attend	ed	
Maria College		Name:			Dates attend	ed	
Other siblings (please give names, ages and current schools of other brothers and sisters not mentioned above)							
EMERGENCY CONTACT 1 (other than parent) The person nominated should be a person who is available to come and collect your child at short notice if the need should arise and a parent is not available.							
Title	Surname			Name			
Home address							
Suburb			City			Postcode	
Phone (home)				Mobile			
Relationship to the Student							

EMERGENCY CONTACT 2 (other than parent) The person nominated should be a person who is available to come and collect your child at short notice if the need should arise and a parent is not available. Title Surname Name Home address Suburb City Postcode Phone (home) Mobile Relationship to the Student



DIRE	CTIONS FOR CORRESPONDENCE Please mark 12 v	where applicable	***Contract*			
As family structures can vary, the	ne following information is requested to ensure that correspondence is	s sent to the correct fa	mily members)			
Send College Reports via email to	Both parents Father only Mother only Email address(es):	Other (specify nam	e and relationship)			
Send Newsletters and other publications via email to:	Both parents Father only Mother only Email address(es):	Other (specify nam	e and relationship)			
Name/s and Home Address/es for accounts to be sent via post to	Name: Address:					
Parent not living at same address as the student but is eligible to vote in the BOT election	Name: Address:					
	F PROGRAMMES AND SPECIAL LEARNING RE Please mark Where applicable	EQUIREMENTS				
Is your child involved i current school? If YES, please state sub	n any Gifted and Talented Programme at his/her ect area:	Yes	□No			
Is your child receiving of the following condit Autism Dyslexia Down's Syndrome Other (please specify)	☐ Asperger's☐ ADHD☐ Behaviour or Psychological Problems	Yes	□No			
Would you like to disc	uss your child's medical condition/s?	Yes	□No			
What language/s does your child speak? What is the main language spoken at home?						
Is your child currently support?	receieving ESOL (English for Speakers of Other Languages)	Yes	□No			
Do you believe that he Maria College?	she will require continued support in ESOL at Sancta	Yes	□No			



MEDICAL DETAILS							
Please give us relevant details regarding student's Medical History							
Family Medical Centre (name and							
address)							
De starle Name			Phone				
Doctor's Name			Number				
Please circle as	ALLERGIC REACTION	Circle as appropriate	PLEASE PROVID	DE DETAILS			
appropriate and provide details	Bee/ Wasp stings	Yes / No					
regarding allergies and/or medical	Medication e.g. penicillin	Yes / No					
conditions of the student	Food e.g. <i>peanut</i> s	Yes / No					
	Other	Yes / No					
	MEDICAL CONDITION	Circle as appropriate	MEDICATION RE	EQUIRED			
	Asthma	Yes / No					
	Diabetes	Yes / No					
	Epilepsy	Yes / No					
	Heart Conditions	Yes / No					
	Tuberculosis	Yes / No					
	Hepatitis A or B / HIV	Yes / No					
Any other medical conditions that the school should be aware of							
Is your child immunised	Yes / No (A copy of your	child's immu	nisation certificate n	nust be provided upon enrolment)			
	IN CASE OF ILLNE		DENT OR EME	RGENCY			
Laive my permission				the Callege pures			
I give my permission		dminister non	-prescription medic	ines to my child for the relief of minor all relevant medical information (incl.			
	n for the College staff to take m ccident or emergency when the			d Emergency, hospital or medical centre in			
I give my permission for the school to make the necessary arrangement for the treatment of my child in an emergency and I agree to meet any costs incurred.							
	I accept that while my child is a student at Sancta Maria College, it is my responsibility to inform the College of any important medical condition relevant to my child.						
Name of Parent/Caregive	er:		Signature				
Relation to the Student: _			Date:				
	act you, then we will endeavour nent form. Please ensure that yo			ntact details provided by you on page 3 of ails as possible. Thank you.			



A: PRIORITY OF ENROLMENT



Sancta Maria College has a Ministry of Education approved enrolment scheme that has clearly defined priorities of enrolment. The information on College boundaries has been included in the booklet 'Sancta Maria College - Enrolment Information Booklet' in your application pack.

A copy of this is also available on our website: www.sanctamaria.school.nz

NOTE: Incomplete Application for Enrolment Forms that do not include all required information WILL NOT be processed and will be returned. (We do not photocopy forms)

Please identify the category under which you are making application – tick each box and provide PHOTOCOPIES (not originals) of documents required.

PRIORITY 1	In-Zone Catholic Student at one of our feeder schools: Our Lady Star of The Sea, St Mark's School or Sancta Maria Catholic Primary School	 □ Preference form signed by Priest □ Baptism Certificate □ Other Sacramental certificates (Confirmation/First Communion) □ 2 forms of evidence of residential address (e.g. power or water bill) □ Student's most recent school report □ Current immunisation certificate
PRIORITY 2	Out Of Zone Catholic Student at one of our feeder schools: Our Lady Star of The Sea, St Mark's School or Sancta Maria Catholic Primary School	 □ Preference form signed by Priest □ Baptism Certificate □ Other Sacramental certificates (Confirmation/First Communion) □ Student's most recent school report □ Current immunisation certificate
PRIORITY 3	Other In-Zone Catholic Student	 □ Preference form signed by Priest □ Baptism Certificate □ Other Sacramental certificates (Confirmation/First Communion) □ 2 forms of evidence of residential address (e.g. power or water bill) □ Student's most recent school report □ Current immunisation certificate
PRIORITY 4	Out Of Zone Catholic Student	 □ Preference form signed by Priest □ Baptism Certificate □ Other Sacramental certificates (Confirmation/First Communion) □ Student's most recent school report □ Current immunisation certificate
PRIORITY 5	In-Zone Non Catholic Student	 □ 2 forms of evidence of residential address (e.g. power or water bill) □ Student's most recent school report □ Current immunisation certificate
PRIORITY 6	Out Of Zone Non Catholic Student	□ Student's most recent school report □ Current immunisation certificate
NOTE: For enrolme	nts at Year Levels 8 to 13 will be in acco	ordance the above priorities 3 to 6.

If there are more applicants within any of the priority categories than there are spaces available, enrolments will be prioritised in the following order and then, if required, by an independently supervised ballot.

- Applicants who are siblings of current students
- Applicants who are currently enrolled in other Catholic Primary Schools
- Parents/Caregivers who are regularly and actively involved in parish ministries
- Applicants who attend Our Lady Star Of The Sea, St Mark's School or Sancta Maria Catholic Primary School (reference priority 5&6 only)
- All other applicants



B: ALL APPLICANTS MUST INCLUDE PROOF OF RESIDENCY



Please tick your residency status and include copies of documentation listed.

NEV	NEW ZEALAND CITIZEN		As of application date, how long has the applicant				
	The Ap	pplicant is a New Zealand Citizen	resided in New Zealand?				
	New Ze	ealand Birth Certificate or New Zealand Passport photo page		Less than 3 years			
	enclose	ed		3 years or more			
NOT	A NEW	ZEALAND CITIZEN – if student is not a New Zealand Citize	n, att	ach proof of Residency and Date of Entry			
	Perma	nent Resident					
		Photocopy of Residency Visa attached					
		Photocopy of Front Photo Page of Passport attached					
		Photocopy of Date of Entry into NZ Stamp attached					
		All of the above documents must be included					
	Work F	Permit (must be current at start of school)					
		Photocopy of Student Visa attached					
		Student Passport - Photocopy of Front Photo Page attached					
		Student - Photocopy of Date of Entry into NZ Stamp attach	ed				
		Photocopy of Parent Work Permit attached					
		Parent Passport - Photocopy of Front Photo Page attached	t				
		Parent - Photocopy of Date of Entry into NZ Stamp attache	ed				
		All of the above documents must be included					
_		DMPLETE APPLICATION FORMS THAT DO NOT INCLUDE D AND WILL BE RETURNED. (We do not accept original do					

PARENTAL INVOLVEMENT

We pride ourselves in having strong partnership with Parents/Caregivers and their involvement in the College events, sport coaching

	community projects. We always need more volunteers and value each person who can support us in any way. If you are if in volunteering your time at the College, please complete the fields below specifying which area you can help us with. u.
	be interested in helping in the following areas of the College as many areas as you are interested in getting involved in):
	Sancta Maria College Parents Association
	Sport Coaching/Managing (please specify sport)
	Cultural
	Other
	Parent/Caregiver: Signature to the Student: Date:
iveiation	to the Student: Date:



FINANCIAL CONTRIBUTION AND REGULATIONS NOTICE



Agreement in Respect of the Conditions of Enrolment at Sancta Maria College

We understand that by accepting a place at Sancta Maria College, **we agree** to meet our financial commitments. These can be paid by instalments or automatic payment.

Please refer to 'Sancta Maria College – Enrolment Information Booklet' regarding all financial contributions. Course fees are charged for practical and specialist subjects such as Technology and Art, in which students use materials that are not paid for by the Government. Details of subject fees will be provided at the time of enrolment. Students may also be required to purchase workbooks for specific subjects. Costs for these will be detailed in stationery lists and course information. Workbooks can be purchased through the school and stationary online on www.myschool.co.nz

PREFERRED OPTION OF PAYMENT

We agree that by 31st March of the next year, if my child is accepted at SMC: (please circle your preferred option of payment)

- A The financial contribution would have been paid in full
- B Automatic monthly payments would have been established that will result in the contribution being fully paid by the end of the year. (Weekly or fortnightly payments can be arranged if this is your preferred option).
- C A written agreement that the financial contribution will be paid on a term by term basis with payments being made by the first week of each term.

We are aware that the Board of Trustees reviews the financial contribution annually, which may result in a small increase in the future.

Parent/Caregiver's name	Signature
Relation to the Student	Date
Parent/Caregiver's name	Signature
Relation to the Student	Date

ATTENDANCE DUES

I/ We understand and undertake as a condition of enrolment and attendance to pay Attendance Dues as determined from time to time by the Proprietor and approved by the Minister of Education. Furthermore, I/We accept that the school can discontinue attendance of our child in default of this undertaking.

NOTE: IF YOUR CHILD IS OFFERED A PLACE, YOU WILL BE REQUIRED TO PAY THE ATTENDANCE DUES AT THE TIME OF YOUR ACCEPTANCE. BY SIGNING, YOU ACCEPT THESE CONDITIONS.

Parent/Caregiver's name	Signature
Relation to the Student	Date
Parent/Caregiver's name	Signature
Relation to the Student	Date



DECLARATION BY PARENTS/ CAREGIVERS AND STUDENT APPLICANT



PART ONE DECLARATION Parents/Guardians I/We accept that my/our child, while a student at Sancta Maria College, will comply with and respect the College's regulations, attendance and uniform requirements, and standards of behaviour as set out by the Board of Trustees and in the 'Sancta Maria College - Enrolment Information Booklet' included in your application pack. Signature _____ Relation to the Student ____ Date ____ Signature Relation to the Student Date Student I will comply with and respect the College regulations, attendance and uniform requirements, standards of behaviour, and will act with consideration of others. I understand that my educational progress will be discussed with, and communicated to, my parents(s)/caregiver(s). Student's Name Signature Date

PART TWO PRIVACY INFORMATION

I/We agree to Sancta Maria College collecting personal information on

Full name of the student applying to enrol

I/We have been advised by Sancta Maria College that the information I/We provide will be used for:

- the College and Ministry of Education purposes
- Ministry of Social Development purposes to identify possible future employment training or educational needs
- Accounting purposes of Sancta Maria College Board of Trustees
- Sancta Maria College Parents Association
- The Alumnae Association (past pupils association)

I/We accept the fact that this information may later be disclosed to a Government agency such as NZQA, CYF, Police, Special Education Service or a medical service, where it will assist the student, or be used for statistical and/or research purposes and agree to its use for that purpose, provided that the information is published in any way that it will not identify me or the individual concerned.

I understand under the Principle 3(1)(d) of the Privacy Act 1993 the information provide will be held at the offices of Sancta Maria College whose address is 319 Te Irirangi Drive, Flat Bush, Auckland 2016.

I am aware of the rights of access to, and collection of, this information.

Signature	Relation to the Student	Date
Oi manatama	Deletion to the Otypical	Data



PART THR	EE PHOTOGRAPHS AND WEBSITE	Negota Addin
events in whimage of you	website current, we would like to be able to share and display photographs of our recent school and wider co inch our students have be involved in. We need the permission of parents/guardians to use photographs that may ur child. In most cases, photographs will be of groups of students. I/We give permission I/We do not give permission Relation to the student Date	show an
	ermission that any promotional material for Sancta Maria College involving my child is available for College use. I/We give permission I/We do not give permission	
Signature _	Relation to the student Date	
Signature _	Relation to the student Date	
Discour	CHECKLIST	
□ Pa □ Bir □ Pre □ Ba □ Ott □ 2 fe □ Stu □ Cu	check that your Application Form includes the following photocopied documents – (We do not accept original forms) ssport style photograph affixed to the first page th Certificate or Passport identifying date of birth eference form signed by your Parish Priest (required when applying under: Priority 1, Priority 2, Priority 3 and Priority 4) ptism Certificate (required when applying under: Priority 1, Priority 2, Priority 3, Priority 4) ner Sacramental certificates (Confirmation/First Communion) forms of evidence of residential address (e.g. power or water bill) (required for in-zone applications only)) udent's most recent school report in your possession attached frent immunisation certificate Citizens ONLY – PHOTOCOPY of NZ Passport or NZ Birth Certificate Ork Permit Holders ONLY	TIS)
□ PH □ Pa □ Pa □ Stu	OTOCOPY of Parent Work Permit rent Passport - PHOTOCOPY of Front Photo Page rent - PHOTOCOPY of Date of Entry into NZ Stamp ident Passport - PHOTOCOPY of Front Photo Page ident - PHOTOCOPY of Date of Entry into NZ Stamp ident - PHOTOCOPY of Date of Entry into NZ Stamp	



APPLICANT'S PROFILE

Please use this page to tell us about your child's interests and achievements

Interests and activities at school:			
Hobbies and activities outside of school:			
Community involvement (church, scouts, guides, clubs etc): Past involvement (indicate years):			
Current involvement:			
Music / Drama / Dance Do you play an instrument? Yes No Instrument name and level/ years			
Do you sing in a choir? Yes No Would you like to learn to play an instrument?			
Yes No No	Please specify the instrument		
Other Music/ Drama/ Dance involvement:			
Sports Club Backgrou	und		
Sport	Club you belong to	Years	Special representation or achievement
Other achievements (certificates, awards etc.):			
National Representation. List any activities where you have represented your activity at a National and/or International level:			
School or Club Responsibilities (Prefect, Librarian, Monitor, Captain etc.). Please indicate school/club and year:			





Sancta Maria College

319 Te Irirangi Drive, Auckland 2016 PO Box 64 437, Botany, Auckland 2016 Ph: (09) 274 4081 | E: enrolments@sanctamaria.school.nz

