

RIMU SCHOOL ENROLMENT FORM

PUPIL INFORMATION

Please note – the information from this form will be used to begin an Enrolment Record for your child or update an Enrolment Record from a previous school. This Enrolment Record will follow your child from school to school.

LEGAL FIRST NAMES: **LEGAL SURNAME:**
PREFERRED NAME TO BE CALLED: **Boy/Girl**

D.O.B:..... t:..... ENROLMENT DATE:.....
 ADDRESS:.....Postcode.....

PREVIOUS SCHOOL:.....YEARS OF SCHOOL

PLACE IN FAMILYOF

PREVIOUS DENTAL CLINIC:

PRIOR-PARTICIPATION IN EARLY CHILDHOOD EDUCATION - Did your child attend one or more Early Childhood Education service(s) in the six months prior to starting school? Please complete the table below for the last service(s) attended.

Please enter the number of hours per week for up to three services:	Service 1 (hrs/week)	Service 2 (hrs/week)	Service 3 (hrs/week)
a. Kohanga Reo			
b. Playcentre			
c. Kindergarten or Education and Care Centre			
d. Home based service			
e. Playgroup			
f. The Correspondence School – Te Aho o Te Kura Pounamu			

Did your child regularly attend Early Childhood Education?

Instructions: "Regularly attend means the child was booked in to a service for sessions each week/fortnight, and generally went to those sessions unless they were sick, or on holiday, or had a family occasion etc

- ☐ Yes, for the last _____ year (s)
☐ Not regularly, only occasionally with no on-going schedule
☐ No, did not attend ECE

PARENT / CAREGIVER INFORMATION

With whom does child live? (please circle) Both Parents Mother Father Other (please specify)
 Any Custody arrangements?

Caregiver 1: **Relationship:** **Occupation:**
 Address:..... t(hme)
 Employment Name & Address:..... t(bus).....
 Email Address t(mobile).....

Caregiver 2: **Relationship:** **Occupation:**
 Address:..... t(hme)
 Employment Name & Address:..... t(bus).....
 Email Address t(mobile).....

Emergency Contact 1: **Relationship:** t(hme)
Emergency Contact 2: **Relationship:** t(hme)

▶▶▶ PLEASE TURN OVER ▶▶▶

ETHNIC BACKGROUND (Required for Ministry of Education Statistics)			
Father:.....	Mother:.....	Child:.....	First Language:.....
Iwi Affiliation.....	Up to three	Unknown (Please tick) <input type="checkbox"/>	.
Was the pupil born in New Zealand?		Yes	No (Please circle)
Please state date of entry into New Zealand _____			
If No, documentation confirming entitlement to be a regular student must be provided to the school.			
(Copies will be retained with the pupils records).			
Please state Country of Birth:			

MEDICAL INFORMATION					
Doctor's Name & Address:..... {					
Asthma	N/Y	Glue Ear	N/Y	Hearing Problems	N/Y
Allergies	N/Y	Sight Problems	N/Y	Serious Health Concerns	N/Y
Medication Taken	N/Y	Brief Details			
Other	N/Y	Brief Details			
		Has your child had a 4 year old Health Check (B4 School Check) YES / NO			
GENERAL INFORMATION					
Members of family already attending this school	1:.....	Room:.....			
	2:.....	Room:.....			
Members of family who may attend in the future	1:.....	D.O.B:.....			
	2:.....	D.O.B:.....			
Participate in a Board of Trustees approved Bible in Schools Programme (30 minutes per week) YES / NO					
I am happy for my contact details to be shared with our parent association to give support for school wide projects YES / NO					
<ul style="list-style-type: none"> ▪ I understand the school will take action on my behalf in case of injury or illness ▪ I agree to my child participating in Rimu School organised and supervised visits, trips and events, undertaken during the school day. ▪ This enrolment form is a true and correct record concerning my child ▪ I confirm that the address which I have provided to the school will be the usual place of residence of _____ when the school is open for instruction. I will advise the school of any subsequent change of address. 					
Parent/Caregiver Signature:.....Date:.....					

PRIVACY ACT CONSENT FORM

I understand that the information contained on this form is personal information under the Privacy Act 1994.
I also understand as follows:

1. The information provided by me will only be used by the school for school purposes. However, the information about my child may also be disclosed to emergency services in the event of a medical emergency.
2. I have the right to have access to the information, and can amend or correct it if need be.
3. I understand that if I fail to provide the personal information on my child that it may prejudice my child's treatment in the event of a medical emergency.
4. I understand that the information may be disclosed to the Ministry of Education for educational purposes.

Signed: Parent / Caregiver

RIMU FULL PRIMARY SCHOOL

Cybersafety Agreement



RATIONALE

To promote and ensure the welfare and safety of students when using the internet. To promote appropriate use by staff and students

PURPOSE

To provide Internet access, so all staff and students can:

1. Become effective and safe users of the Internet
2. Extend their awareness and knowledge of the Internet
3. Become motivated, responsible, independent users of the internet

GUIDELINES

1. Internet use is provided to all staff and students to enable access to materials which support teaching and learning in the classroom, provide students with access to up-to-date, relevant and appropriate research material and provide opportunities for users to develop information and computer skills.
 2. Students are able to use the Internet ONLY when they have signed (along with their parents/caregivers) a copy of the Internet agreement. These are to be kept in the classroom with student information files.
 3. Students must seek permission to access the Internet. An adult supervisor must be in the room at all times when students are on the Internet.
 4. Any child who comes across any inappropriate site will immediately exit the site and report it to their classroom teacher.
 5. Deliberate attempts to gain access to sites containing material of pornographic, racially or religiously offensive, illegal or offensive material will be dealt with as a serious breach of the school rules. All Internet usage may be monitored electronically.
 6. Staff need to be aware of copyright laws on the website and enforce these with regard to student material taken from the web.
 7. Students will not give anyone on the Internet information about themselves or anyone else.
 8. Failure to meet these guidelines will result in the loss of computer use and disciplinary action will be taken.
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**Rimu Full Primary School
INTERNET USER AGREEMENT- STUDENTS**

Please read the INTERNET SAFETY POLICY that is attached to this document (you will need to read this through with your families).
THEN... Read the following points and sign below. Signing of these points indicates that you have understood and accept the terms listed.

1. I have read the INTERNET SAFETY POLICY and understand all points listed.
2. I will use the internet in a way which supports my learning.
3. I will not intentionally search for materials on the internet that are offensive.
4. If I locate a site which is offensive I will close the site down and inform an adult in the room.
5. I will behave at all times in a responsible and appropriate manner when using email to communicate.
6. I understand that my individual internet usage will be monitored for safety purposes.
7. I will not download programmes or files without first seeking permission.
8. I understand that I CANNOT use the internet until both myself and one of my caregivers has signed this agreement.

Student name: _____

Student signature: _____ Date: _____

Parent/Caregiver name: _____

Parent/Caregiver signature: _____ Date: _____



RIMU FULL PRIMARY SCHOOL

Image permission

At Rimu school we often take photos of our students in class and outside, which are used for many purposes. Our school is promoted through newsletter, pamphlets and our image screen in the office. This year we will also launch our website and images will be uploaded on to the site.

To allow us to use photographs of your child in any of the above means, we require written permission from parents or caregivers. Please fill in the slip below, either giving permission or not for the use of the photographs and return it to school.

Thank you
Pania McVay-Stewart

Image permission 2013

Child's name: _____

PHOTOS

☐ I give permission for the use of my child's image on Rimu School materials such as newsletters, powerpoint presentations etc.

INTERNET/WEBSITE

☐ I give permission for the use of my child's image on the school website and /or blog. Only first names if any, will be used to support the image.

Signed: Date:

Parent/caregiver name:.....



RIMU SCHOOL - Blanket consent for EOTC

Education Outside The Classroom (EOTC) is the name given to all events/activities that occur outside the classroom, both on and off the school site.

Rimu School believes in using a range of environments and experiences to enhance our students' learning. Some learning for students can occur beyond the school site. This document is seeking your consent for your child to participate in such EOTC learning opportunities.

The Ministry of Education's **EOTC guidelines** identify four EOTC activity types, each with recommended types of parental/caregiver consent. In brief they are:

Type of event	Description	Type of consent
A	On site- in the school grounds (i) Lower risk environments (ii) Higher risk environments*	(i) No consent sought or blanket consent (ii) Separate consent for each event or programme
B	Off-site events in the local community occurring in school time. (i) Lower risk environments (ii) Higher risk environments*	(i) Blanket consent at enrollment. (ii) Separate consent for each event or programme
C	Off-site events - finishing after school finishes (i) Lower risk environments (ii) Higher risk environments*	(i) Blanket consent at enrollment. (ii) Separate consent for each event or programme
D	Off-site residential overnight events (i) Lower risk environments (ii) Higher risk environments*	(i) Separate consent (ii) Separate consent for each event or programme

*Involves risk assessed to be greater than that associated with the average family activity.

All EOTC activity categories require staff to undertake an analysis of the risks, and identify the management strategies required to eliminate, isolate and minimise the risks. Emergency procedures are also in place.

BLANKET CONSENT

I/we agree to the participation of _____ in *lower risk* category A and B and C, EOTC events while a student of Rimu School.

I/we have provided the school with up-to-date medical, supervision and learning information through the enrollment form, and will make every endeavour to keep this information current.

Name	signature	date
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