

<b>Residency Status of Applicant:</b>	<i>Citizenship other than NZ</i>	
New Zealand Citizen <input type="checkbox"/> Permanent Resident <input type="checkbox"/> Other <input type="checkbox"/>		
If you were <b>not</b> born in NZ please provide proof of Residency or Citizenship. Permanent Residents, please indicate the type of Visa you hold: Student Visa <input type="checkbox"/> Work Visa <input type="checkbox"/> Visitor Visa <input type="checkbox"/>		
Where was your Visa issued?	Date issued	Expiry date.

**Custodial Information** (If there is any court issued custodial documentation, we will require a copy prior to start of year)

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

If parents are separated who is the contact, if required? \_\_\_\_\_

Does the other parent require newsletters or extra reports? Yes / No

**Account Information:**

Person responsible for Accounts: Father Mother Guardian Other (Please state) \_\_\_\_\_

I \_\_\_\_\_ agree to take responsibility for the financial obligations of the above named student should she gain a place at Waikato Diocesan School for Girls

Signature of person agreeing to be responsible: \_\_\_\_\_

**Details of Prior Connection to Waikato Diocesan School for Girls**

Sister of current pupil: Name \_\_\_\_\_ Year level \_\_\_\_ School House \_\_\_\_\_

Sister of Old Girl: Name \_\_\_\_\_ Leaving year \_\_\_\_ School House \_\_\_\_\_

Daughter of Old Girl: Surname when attending \_\_\_\_\_ School House \_\_\_\_\_

Niece / Granddaughter of Old Girl: Surname when attending \_\_\_\_\_ School House \_\_\_\_\_

School Houses are: Ross (Yellow), Scott (Blue), Shackleton (Red), Wilson (Green) Hilary (White) or Blake (Black)

**Religious Information**

Are you in sympathy with the Special Character of Waikato Diocesan \_\_\_\_\_ Yes / No

Our family is on the Parish roll of \_\_\_\_\_ Anglican / \_\_\_\_\_ Church.  
(Other denomination)

Our Minister is \_\_\_\_\_ and he / she can be contacted by phone on \_\_\_\_\_

Or by email at \_\_\_\_\_

We actively attend our local church - weekly fortnightly monthly occasionally (please circle)

Please note: Places are highly sought after and we use this information to help establish an applicants preference status.

**Sibling Details:**

Does this applicant have younger sisters who may apply at a later date? \_\_\_\_\_ Yes / No

Name: \_\_\_\_\_ Current school \_\_\_\_\_ Year: \_\_\_\_ Current age: \_\_\_\_\_

Name: \_\_\_\_\_ Current school \_\_\_\_\_ Year: \_\_\_\_ Current age: \_\_\_\_\_

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**Medical History – (Briefly)**

Please state any illnesses, conditions or needs your daughter might have that we should be aware of in dealing with her on a day to day basis, or which may affect her ability to fully participate in any area of school, academically or physically. (This will be kept confidential and more detailed information will be requested upon enrolment).


Is there any other information relevant to this application you feel we should be aware of prior to beginning our admissions procedures? (You may use another sheet if required)


- I/we agree that if so admitted, my/our daughter shall be subject to the rules and regulations of the school. (Copies of the current Rules and Regulations form part of the Enrolment Agreement)
- I/we also agree to pay by the beginning of each term such fees and donations as may from time to time be required by either the school Board of Trustees or the Proprietor’s Board.
- I/we undertake that all the information contained in this application is true and correct at time of application
- I/we undertake to update all changes at time of enrolment should the applicant be accepted into Waikato Diocesan School and to keep the school up to date with future changes.
- I/we understand that there is a culture of philanthropy at Waikato Diocesan School for Girls and that we may be approached from time to time to support fundraising initiatives.
- I/we understand that this information is retained by the school and will be used for the following purposes:
  - To maintain contact with parents and caregivers
  - To facilitate the operation and administration of the school.
- I/we agree that this information may be released to appropriate parties outside the school at the discretion of the Principal where it relates to education, health, welfare, or safety of the student.

**Both parents (guardians) are required to sign this declaration.**

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

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

Full Name: \_\_\_\_\_

Full Name: \_\_\_\_\_

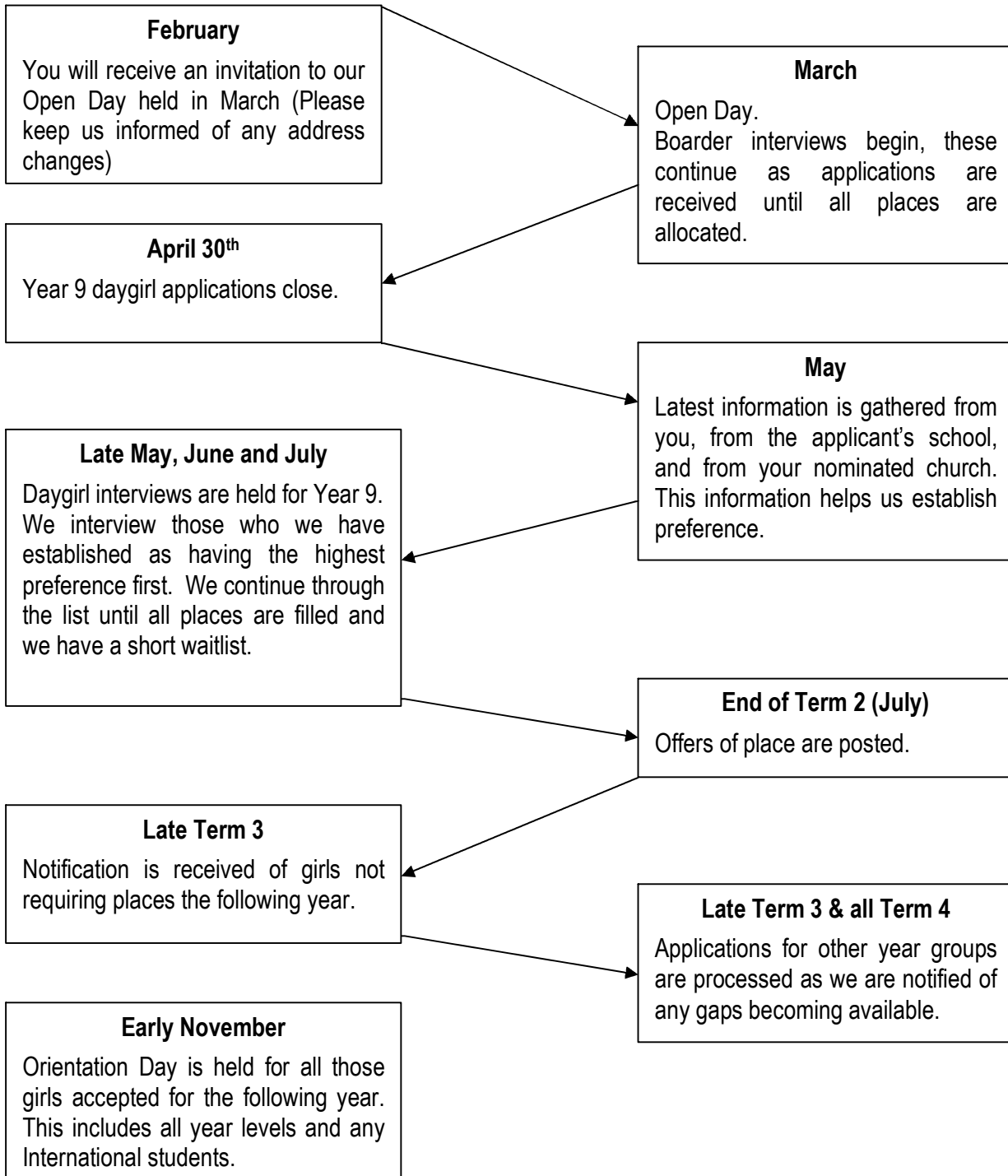
Date: \_\_\_\_\_

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

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## Timeline:

In the Year prior to your anticipated date of entry the following timeline applies:



### Checklist: I have included the following in my application:

- Copy of applicant's Birth Certificate
- Copy of applicant's latest school report
- Two character references (These could be from either your daughter's current school, a family friend or your clergy person)
- Copy of applicant's Baptism Certificate
- \$40 (GST inc)