



Saint Patrick's School Napier

Application for Enrolment

Pupil's Personal Information

Date of Birth _____

Surname _____ Christian Names _____ Male /Female

Address(Home) _____

Telephone: Home _____ Workplace _____

Present School/Preschool _____

Year Child will be in _____

Name of school dental clinic attended. _____

Health and Medication [Name any allergies etc.]

Family Doctor's Name _____

Ethnic origin: Maori (Iwi) _____ European Other? _____

Is the child a NZ Citizen? Yes / No. If not born in NZ please state date of arrival and country of origin.

In case of emergency if you cannot be contacted whom do we contact?

Name _____ Phone _____

Are there any other children in your family likely to attend Saint Patrick's School?

Name _____ Date of Birth _____

Name _____ Date of Birth _____

Parent/Guardian Information

Father's Name _____ Catholic Yes/ No

Occupation _____

Mother's Name _____ Catholic Yes / No

Occupation _____

Has your child been baptised? Yes / No

If baptised: in which church and where? _____ Year _____

Has your child made their first reconciliation Yes / No Communion Yes / No

Parents/Caregivers Agreement

Accounts, newsletters, reports to be addressed to

| | | | |
|----|-----|----------|----|
| Mr | Mrs | Mr & Mrs | Ms |
|----|-----|----------|----|

(Tick appropriate box)

Name _____

Address _____

I/We agree to pay;

1. By direct credit **or**
2. On receiving account **or**
3. By instalment at school office.

My preference is _____

Conditions for Enrolment

School Policies

1. I undertake to support the school policies and procedures authorised by the school's Board of Trustees.

Privacy Act

2. I agree that Saint Patrick's School may obtain my child's records on my behalf.
3. Information on this form may be disclosed to the school Proprietors or their agents for the purposes of attendance dues and other lawful purposes.
4. As a condition of enrolment (Private Schools Integration Act, 1975, Section 30) I agree that my child will participate in the general school programme that gives the school character as a Catholic School.
5. I recognise the need to practise what my child will be taught at school about the faith and practices of the Catholic Church. I recognise the need to:
 - Have a commitment ie. to participate in Sunday mass
 - Participate in programmes which prepare my child for First Reconciliation, First Eucharist, etc.
 - Attend parent/teacher meetings dealing with education in faith
6. As a condition of enrolment I undertake to pay the attendance dues as determined by the proprietor and approved by the Ministry of Education.
7. In cases of hardship concerning the payment of attendance dues, parents are asked to see their Parish Priest. Failure to pay without prior discussion is deemed as default and may be subject to further action.

GENERAL

1. I give permission for the school to act in my place, as parents, should the need arise, i.e. accident emergency
2. I give permission for my child / children to be taken out of school on a casual basis on outings e.g. Mass, library by bus / walking.
3. I give permission for my child / children to be tested for hearing and vision as required by an authorised professional.
4. I give permission for child's image to be included on the school website.

I/We agree to all of the above requirements

Signed _____ Date _____ Signed _____ Date _____
Parent/Guardian *Parent/Guardian*

ENROLMENT CONFIRMED

PRINCIPAL

DATE



**New Zealand Catholic Bishops Conference
Preference of Enrolment Certificate
for the
Diocese of Palmerston North**

This is to certify that In accordance with Private Schools' Conditional Integration Act, Section 29(1), and Catholic School Integration Agreements, through a general or particular religious connection as stated in the Preference Criteria Numbers 5.1, 5.2, 5.3, 5.4, 5.5.

(Please refer to Criteria details on back of form)

MR/MRS/MS

Address.....

Is/are eligible to have preference of enrolment for their child at

..... School/College

in Town/City

Name of child

I/We undertake to support our child in the formation of their faith and the practices of the Catholic church.

Parent(s)/Caregivers Signature Date

Under which Criterion (see reverse) is the child eligible for preference?.....

If Criterion 5.1 applies please complete:

Baptised in at on

If Criterion 5.4 applies please complete the section on the back of this form.

Certified by (Name): as authorized agent of the

Roman Catholic Bishop of the Diocese of

Position:

(see: Administration of the Criteria, 6.1.1-6.1.6, Agents who may sign, listed over page)

Address:.....

Signature..... Date

This form must be completed by the Parent(s)/Caregiver(s), and the Parish Priest or other designated authorities *prior* to the enrolment of a student in a Catholic Integrated School.

PTO

NEW ZEALAND CATHOLIC BISHOPS' CONFERENCE

Criteria for Preference of Enrolment in Integrated Catholic Schools

- 5.1 The child has been baptised or is being prepared for baptism in the Catholic Church.
- 5.2 The child's parents/guardians have already allowed one or more of its siblings to be baptised in the Catholic faith.
- 5.3 At least one parent/guardian is a Catholic, and although their child has not yet been baptised, the child's participation in the life of the school could lead to the parents having the child baptised.
- 5.4 With the agreement of the child's parent/guardian, a grandparent or other significant adult in the child's life, such as an aunt, uncle or godparent, undertakes to support the child's formation in the faith and practices of the Catholic Church.
- 5.5 One or both of a child's non-Catholic parents/guardians is preparing to become a Catholic.

Agents of the Bishop, Who May Sign the Certificate on his Behalf

- 6.1.1 Parish Priest of their Parish of Residence
- 6.1.2 Assistant Priest of their Parish of Residence
- 6.1.3 Priests appointed under c. 517/1
- 6.1.4 Deacons and lay persons appointed to pastoral care under c. 517/2
- 6.1.5 Ethnic chaplains who liaise with parish priests or their delegate
- 6.1.6 Local committees appointed by the Bishop or by any of the above agents of the Bishop.

Process of Appeal

Handbook for Boards of Trustees of New Zealand Catholic Integrated Schools.

- 8.3.1 If a preference certificate has been refused and the parents, either directly or through the Principal, wish to appeal the matter, the application can be referred to the proprietors' Office (Diocesan Education Office). The Director of the Office, or whoever is the appointed appeal authority in the diocese, after making whatever investigation is necessary, including consulting the parish priest if appropriate, will make a ruling, or seek a ruling from the Bishop. The parish priest or delegated person who refused the certificate in the first instance is normally informed whenever a preference certificate is issued in virtue of this paragraph.

Please note that in the Diocese of Palmerston North the appointed appeal authority is the Manager for Schools (Mrs Lynette Roberts-King). Contact Ph: 06 354 1780 (Ext 853).

If Criterion 5.4 (above) applies the parents/caregivers and significant adult completes the following:

Significant adult:

I agree to support (child's name)
formation in the faith and practices of the Catholic Church.

Mr/Mrs/Ms:.....

Address:

Relationship to child:.....

Signature Date:.....

Parish

Parent(s)/Caregiver(s):

I agree that my child will be supported by in the formation
of the faith and practices of the Catholic Church.

Signature: Date:

Attendance Dues Agreement

Between:

Bishop of Palmerston North ("the Proprietor") as owner of

St Patrick's School - Napier ("the School")

And: the following parents or caregivers:

Parent /Caregiver 1

| | | | | | |
|--------------------------------|--|--------------|-------|----------|--|
| Title : | | First names: | | Surname: | |
| Residential address: | | | | | |
| Postal Address (if different): | | | | | |
| Daytime Phone: | | | Cell: | | |
| Email | | | | | |

Parent /Caregiver 2

| | | | | | |
|--------------------------------|--|--------------|-------|----------|--|
| Title : | | First names: | | Surname: | |
| Residential address: | | | | | |
| Postal Address (if different): | | | | | |
| Daytime Phone: | | | Cell: | | |
| Email | | | | | |

WHO have enrolled the following student(s) at the school:

| First and middle names of Student(s) | Surname of Student(s) | Start Date | Year Level | Enrolment # (School to complete) |
|--------------------------------------|-----------------------|------------|-------------------------|----------------------------------|
| | | | | / |
| | | | | / |
| | | | | / |
| | | | | / |
| School to Complete | | | | |
| School Number: | | 142 | Existing Family Number: | |

INTRODUCTION

1.1 The Proprietor has entered into an Integration Agreement with the Minister of Education in respect of the school.

PTO for agreement fine print and to sign

To authorise the Diocese of Palmerston North (DPN) to make deductions from your credit card please complete the details below and return to the DPN Attendance Dues offices:

Attendance Dues Office, Private Bag 11 012 Palmerston North 4442

Phone 06 350 3825 or 0800 200 208

Attendance Dues Account Number

| | | | | | | | | | |
|--|--|--|--|--|--|--|--|--|--|
| | | | | | | | | | |
|--|--|--|--|--|--|--|--|--|--|

Student name(s)

Name of Card Holder

Card Number

| | | | | | | | | | | | | | | | | | |
|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|
| | | | | | | | | | | | | | | | | | |
|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|

Card Expiry Date:

___/___

Card Type:

VISA

MASTER CARD

Payment Frequency: (please tick one)

IN FULL

WEEKLY

FORTNIGHTLY

MONTHLY

FOUR INSTALMENTS

(March, May, July, September)

First Payment Date:

Amount per Payment:

\$

Duration:

(please tick one)

UNTIL FURTHER NOTICE

2016 ONLY: last payment date ___ / ___ / _____

Signature of Card Holder:

Date:

The Integration Agreement, made pursuant to *the Private Schools Conditional Integration Act 1975* ("the **Integration Act**"), provides that the Proprietor may enter into an agreement with the Parents or other persons accepting responsibility for the education of a child providing that, as a condition of the enrolment or attendance of the child at the school, the Parents or other persons shall pay attendance dues.

- 1.2 Attendance dues are used by the Proprietor to service school debt, insure school buildings and other costs as specified in the Integration Act.

ATTENDANCE DUES PAYMENT

- 2.1 I/we agree to pay attendance dues to the Proprietor as approved by the Minister of Education from time to time in terms of the Integration Act and as a condition of enrolment of the student(s) at the School.
- 2.2 I/we acknowledge that the Proprietor: (a) May increase attendance dues from time to time provided such increases are within the maximum attendance dues permitted to be charged by the Ministry of Education; and (b) Is likely to review and, if necessary, increase the level of attendance dues payable at least annually.
- 2.3 I/we understand that if I/we default in paying my/our attendance dues then any recovery costs incurred by the Proprietor will be an additional expense to be paid by me/us (and will be added to the total attendance dues owing and payable by me/us).
- 2.4 I/we understand that, each year, the Proprietor will issue me/us an invoice for all attendance dues payable in respect of the student(s) and I/we agree to pay the total attendance dues payable in full by the date stipulated in the invoice unless I/we have previously made alternative payment arrangements with the Proprietor.

STUDENT ENROLMENT INFORMATION AND THE PRIVACY ACT 1993

- 3.1 The Proprietor is committed to respecting your privacy by protecting the information you voluntarily provide. The information will be held and stored securely by the Diocese of Palmerston North (DPN), which administers attendance dues on behalf of the Proprietor.
- 3.2 Information entered into the DPN database is protected using industry standard technology. Information is only accessible to personnel who need access to do their work and will be used primarily for administration of attendance dues.
- 3.3 Information about outstanding attendance dues may be shared by the DPN with the Proprietors and personnel of other Catholic Schools attended by members of your family, and with their attendance dues collection agents.
- 3.4 Information voluntarily provided by you to the Proprietor may also be shared with your Parish for the purpose of supporting the student(s) formation of the faith and practices of the Catholic Church.
- 3.5 The information will not be shared with any other party without your permission.
- 3.6 You can ask for a copy of any personal information the proprietor holds about you, and ask for it to be corrected if you think it's wrong. If you would like a copy of your information, or want to have it corrected, please contact DPN.

The DPN ATTENDANCE DUES TEAM

- 4.1 The Proprietor has appointed the Diocese of Palmerston North Attendance Dues Team (the DPN Attendance Dues team) to administer the invoicing and collection of attendance dues in respect of the school.
- 4.2 The DPN Attendance Dues office is at the Diocesan Centre, 33 Amesbury Street, Palmerston North.

ACKNOWLEDGEMENT

- 5.1 I/we acknowledge that we have read and understand this agreement and agree to comply with the terms and conditions.
- 5.2 I/we agree to advise the Proprietor and/or the DPN Attendance Dues team in writing if our circumstances change.

Signature of parent/caregiver

Date

Signature of parent/caregiver

Date

Once completed, this form and all other enrolment information required by the Proprietor for the purposes of charging and collecting attendance dues, are to be forwarded, by the principal, to the DPN Attendance Dues team, Private Bag 11 012, Palmerston North 4442.

Contact for all enquiries: 06 350 3825 or 0800 200 208; dues@pndiocese.org.nz

