



De La Salle College

Application for Enrolment

81 Gray Avenue Mangere East 2024

PO Box 86-001 Auckland New Zealand

Phone: 276 4319 ext 816 Email: enrolments@delasalle.school.nz

Please attach a
recent passport
photo here

Proposed Year of Entry: 20_____ Year 7 Year 8 Year 9 Year 10 Year 11 Year 12 Year 13 (PLEASE CIRCLE)

Student Information

Legal First Name		Legal Last Name	
Preferred First Name		Preferred Last Name	
Date of Birth		Country of Birth	
If born overseas			
Date of Arrival into NZ		Type of Visa	
Home Address			
Present School & Year Level			Year
Previous School If applicable			
Ethnic Group(s)		Language(s) spoken at home	
If Maori: Iwi/Hapu			
Religion		Parish (Catholic)	
Catholic Sacraments	(Please circle and provide certificates)		
Baptism	YES	NO	Holy Communion YES NO
Reconciliation	YES	NO	Confirmation YES NO

Applicants Profile

Interests and Activities at School: Please include any school responsibilities

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Hobbies and Activities Outside of School: Please include any community or church groups

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Sports Involvement:

Sport	Name of Club	Special Representation or Achievements

General Information

Does your son have special learning needs? Please specify and/or attach documents.	PLEASE CIRCLE	
	YES	NO
Is your son receiving support from a specialist or teacher aide? If Yes, what are the details? Eg ORS, RTLB, ACC etc	YES	NO
Has your son been stood down / suspended / excluded from any other school? If yes, please circle and state school and reason.	YES	NO
I give permission for the school to text me about my son's non-attendance at school.	YES	NO
I give permission for my son to use the internet at school.	YES	NO
I give permission for a photograph/video of my son to be included in the De La Salle College newsletter, College website, College facebook page or College app.	YES	NO

De La Salle College Affiliations

Brother(s) currently attending De La Salle College	Name(s):	Year Level: House:
Brother(s) previously attending De La Salle College	Name(s):	Last Year Attended: House:
Father who previously attended De La Salle College	Name:	Last Year Attended: House:
Other Affiliations (eg Uncle, Cousin):		

Please state two reasons why you want your son to come to De La Salle College

1.	
2.	

Family Information

Student Mainly Lives With: (Please Circle)	Both Parents	Mother Only	Father Only
	Other (Please specify & circle)	Aunty Brother Caregiver	Uncle Sister Grandfather Mothers' Cousin Grandmother Fathers' Cousin
Your Relationship to Student:		Your Relationship to Student:	
First Name:		First Name:	
Last Name:		Last Name:	
Address:		Address:	
Phone Home:		Phone Home:	
Mobile:		Mobile:	
Email:		Email:	
Ethnicity:		Ethnicity:	
Occupation:		Occupation:	
Work Name & Address:		Work Name & Address:	
Religion:		Religion:	
Parish:		Parish:	
Emergency Contact Name:		Phone Home: Mobile:	
Relationship to student			
Any extra relevant information			
Eg Custody order, living arrangements			

Conditions of Enrolment

I / We the undersigned, accept as conditions of enrolment that

Participation In School Programme: I/We the undersigned, undertake as a condition of enrolment that the above named student will participate in the general school programme that gives De La Salle College it's Catholic Special Character;

Attendance Dues: I/We the undersigned, 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 the above named student in default of this undertaking;

Fees: I / We agree to pay De La Salle College fees, as determined from time to time by the Board of Trustees and Board of Proprietors;

School Trips: I/We agree that all costs associated with our son's education at De La Salle will be up to date before permission is granted by the College to attend any trip outside the College.

Privacy Act 1993: Our school undertakes to collect, use and store information you provide on this form according to the principles of the Privacy Act 1993. The information may be provided to the Proprietor or Proprietor's agent, the Minister of Education and the Education Review Office, and for administration purposes within the school.

I/We agree that this information can be used for the above purpose.

College rules: Our son will at all times abide by the College rules as stated in the Student Diary.

It is the responsibility of the parents to keep the school advised of any change in circumstances including contact details, custodial arrangements and matters pertaining to the health and safety of the child.

Decision on Enrolment:

We acknowledge that enrolment at the College is subject to availability of places within the prescribed allocation; and that the final decision on whether a student meets the enrolment criteria and is therefore able to be accepted as a student of De La Salle College rests with the Principal.

Mother / Caregiver Name & Signature		Date:
Father / Caregiver Name & Signature		Date:
Student Name & Signature		Date:

PREFERENCE OF ENROLMENT (Signature of Principal / Senior Leadership)

I have sighted evidence that the Proprietor has stated the abovenamed student should be given preference of enrolment.

This enrolment is: Preference / Non Preference (circle one)

Signed: _____ **Principal / DP) Date:** _____