

LOGAN PARK HIGH SCHOOL



Please return this enrolment form to:

The Principal
Logan Park High School
Private Bag
Dunedin 9054

STUDENT'S ENROLMENT DETAILS

Student's Surname _____

Student's First Names _____

Student's Preferred First Name _____

Street Address _____

Suburb _____ City _____ Post Code _____

Home Phone _____ Student's Cell _____ Student's Email _____

Gender Male / Female (please circle) Date of Birth ____/____/____ (day/month/year)

Year Level Enrolling in 9 10 11 12 13 (please circle)

Status Regular NZ Student / Overseas Student with Permanent Residency (Please Circle)

Nationality (Please circle) European/ Pacific Island/ Cook Maori/ Maori / Other _____

If **Maori**, where Maori and iwi is known, please state iwi

For information on iwi affiliation and regions go to www.minedu.govt.nz/goto/iwidata

1. _____ 2. _____

3. _____ 4. _____

A copy of your child's birth certificate/passport must be provided for New Zealand citizens and for those who have been born overseas. If born overseas some proof of residency must also accompany the application.

Language spoken at home English/Other (please specify) _____

Previous School (s) _____

(Please provide the latest school report from your previous School.)

Interests likely to be followed at LPHS (sporting/cultural/musical)

For Office Use Only:

Enrolment #	House/Group	Birth Certificate	Date Enrolled	Finish Date

Photo Taken	Visa	HOD English	HOD Math	Enrolment Dean

Confidentiality: Enrolment information is requested by the school in order to communicate with parents and caregivers, and to maintain the safety of the student whilst on campus and off-site on school-related activities. This information is held securely and only used by the school staff for school-related purposes. It meets the statutory requirements of the Ministry of Education. As required by law the contact details are also provided to the Ministry of Social Development to support provision of further education and training opportunities post school.

CAREGIVER DETAILS

CAREGIVER 1 DETAILS mother/father/ step-mother/step-father/ other _____

Surname _____ First Name _____ (Dr/Mr/Mrs/Miss/Ms)

Street Address _____

Suburb _____ City _____ Post Code _____

Place of Employment _____ Occupation _____

Home Phone _____ Work Phone _____

Cellphone _____

Email _____ (please write clearly)

Living with Invoices to be sent Legal Guardian Reports

CAREGIVER 2 DETAILS mother/father/ step-mother/step-father/ other _____

Surname _____ First Name _____ (Dr/Mr/Mrs/Miss/Ms)

Street Address _____

Suburb _____ City _____ Post Code _____

Place of Employment _____ Occupation _____

Home Phone _____ Work Phone _____

Cellphone _____

Email _____ (please write clearly)

(If different from caregiver 1)

Living with Invoices to be sent Legal Guardian Reports

EMERGENCY CONTACT (Someone not living with student)

Full Name _____

Relationship to Student _____ Cellphone _____

Home Phone _____ Work Phone _____

FAMILY HISTORY

Brothers/Sisters who are attending or who have attended Logan Park High School _____

Year(s) Attended _____ In House _____

Is there anyone who should not have legal access to your son/daughter? Name _____

Reason _____

STUDENT'S MEDICAL DETAILS

	Contact Caregivers	High Risk (Emergency Care Required)	Moderate Risk	Low Risk
Please indicate severity if student suffers from:				
Asthma	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Diabetes	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Epilepsy	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Severe Allergies (requiring a medical response)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(1) _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(2) _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Mental Health Condition(s)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(1) _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(2) _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Please provide further details (eg, appropriate medical response, especially if life threatening); and any other medical conditions and information that the school should be aware of:

Note: The School may administer Paracetamol if necessary

Doctor _____ **Medical Centre** _____
Phone Number _____

STUDENTS ENROLLING FROM ANOTHER HIGH SCHOOL

Subjects currently taken at previous school _____

Senior Student's NSN Number _____

Form Teacher/Dean from Previous School _____

Copies provided of previous reports and credits achieved from your previous school.

Yes No (*please tick*)

EDUCATION OUTSIDE THE CLASSROOM

Education outside the classroom (EOTC) is the name given to all activities that occur outside the classroom, both on and off the school site. This includes curricular and extra-curricular activities.

- Our staff believes in using a range of environments and experiences to enhance student learning.
- Our staff value giving students EOTC opportunities. Hence we need your consent for your son/daughter to take part in EOTC learning.

This consent is to cover:

- A. Activities in the school grounds conducted outside the classroom and may include activities where some level of risk may have to be managed, for example, use of the climbing wall.
- B. Off-site activities in the local community including visits to local galleries, sport and recreation facilities.

N.B. All EOTC activity categories require staff to undertake an analysis of risks, and identify management strategies to eliminate, isolate and minimise risk.

Specific consent will be sought where higher risk-activities are to be undertaken.

Logan Park High School Internet & ICT Use Agreement

Logan Park High School staff wish to ensure that all students and staff get maximum educational benefit from the use of the internet and Information and Communication Technology (ITC) in a safe environment.

As a safe and responsible user of ICT I will help keep myself and other people safe by following the rules below.

- While at school or a school-related activity, I will not have any involvement with any ICT material or activity which might put myself or anyone else at risk (e.g. bullying or harassing). Use of computer, Internet facilities including wireless and any other form of information and communication technologies at Logan Park High School is at all times consistent with school policies and school values: For students to be respectful, motivated and inclusive.
- I cannot use school ICT equipment until I have read and understood this ICT Use Agreement and the conditions of access at Logan Park High School. All users will be issued with individual log-in names and passwords. I must not tell anyone else my password. All files and documents must be stored in each user's provided network space and not on the local computer. I will always use my own log-on when using a computer.
- I understand that I must not at any time use ICT to upset, offend, harass, threaten or in any way harm anyone connected to the school or the school itself, even if it is meant as a "joke". Staff will explain the internet and information and communication technologies policy to their students, taking care to note if there are students for whom English is a second language.
- I understand that the rules in this use agreement also apply to mobile phones and other devices. I will only use my mobile phone or other devices at the times that I am permitted to during the school day. Otherwise staff may require its removal.
- Students should be aware that the school has an electronic security system. The school may choose at any time to undertake a safety audit of its computer systems, which includes personal network storage folders, and monitoring of individual users. If I accidentally access inappropriate material, I will **not** show others. I will turn off the screen or minimise the window and then report the incident to a teacher or the Assistant Principal immediately.
- I understand that I must not download any files such as music, videos, games or programmes without the permission of a teacher. This makes sure the school complies with the Copyright Act 1994 and the Copyright (Infringing File Sharing) Amendment Act 2011. I also understand that anyone who infringes copyright may be personally liable under this law. I will not connect any device (such as a USB drive, camera or phone) to, or attempt to run any software on, school ICT without a teacher's permission.
- All users should be aware that any incident involving a violation of this agreement, involvement with improper, objectionable, offensive or illegal materials, as well as material which is detrimental to the safety of the school or its community will be treated seriously by the school and may result in disciplinary consequences. Users should also be aware that some forms of misuse are illegal and could be dealt with as such.

I have read and understood and agree to abide by the school's ICT Use Agreement.

STUDENT'S SIGNATURE _____ Date _____

Parental Donations: Donations are used to help provide the best possible learning environment for your child. We appreciate your support.

Parents/ Caregivers Agreement: I apply to enrol my daughter/son at Logan Park High School and agree to comply with the uniform, attendance, discipline and all other requirements covered in the school rules and policies.

I/we will keep the school up to date with medical, family and all other changes of information.

I/we agree to allow the school to use unnamed and named images of my daughters/sons for school communications and marketing.

I/we have read and understood the enrolment form.

I/we have read and understood the EOTC section and give permission for my daughter/son to participate.

Parent/Caregiver _____ (sign) Date _____

Student _____ (sign) Date _____