

<b>Child's details</b>	Requested year of entry		Requested year level of entry	
Legal Surname				
Legal First Names				
Preferred Name (if different)				
Sex	Female <input type="checkbox"/> Male <input type="checkbox"/>			
Date of Birth				Age
Country of Birth				
Date of arrival in NZ (if born overseas)				
Ethnic Origins (up to 3)				
Iwi affiliations (Māori, up to 3)				
Languages spoken at home				
Child's first language				

<b>Parents' details</b>	<b>Mother</b>	<b>Father</b>
Name		
Country of birth		
Residential address		
Postal address (if different)		
Length of time at this address:		
Home phone		
Cell phone		
Occupation		
Employer		
Work phone		
Email contact		
Marital Status (circle)	Never Married / Married / De Facto / Separated / Divorced	

**Caregiver's details** (if different from above)

Name		Phone:	
Address			

**Emergency contact personnel** (eg: grandparent/family member/family friend)

Name: Relationship to child: Phone:

Emergency contact			
Church (pastor)			
Doctor			

**Family details**

Please circle Y (Yes) or N (No)

Is this child a sibling of a student currently enrolled at CCS?	<b>Y / N</b>
Is this child a sibling of a student formerly enrolled at CCS?	<b>Y / N</b>
Is a parent of this child a former student of CCS?	<b>Y / N</b>
If you answered Y to any of the 3 questions above, please name the sibling/parent here:	

(for office use only)

Form received \_\_\_\_\_ All required documents received \_\_\_\_\_ Preference Non-Preference Zone \_\_\_\_\_ Priority \_\_\_\_\_

Acknowledged \_\_\_\_\_ Letter of outcome \_\_\_\_\_ Acceptance \_\_\_\_\_ Meeting \_\_\_\_\_ Commenced \_\_\_\_\_

## Further details

Please give a brief summary of why you have selected Cornerstone Christian School for your child's schooling:	Y / N
If a pre-schooler, has your child been under, or referred to Special Education Services by their ECE centre (including speech)? If so, what is the referral for?	Y / N
Where attending a previous school, has your child been working with competence at their current age level? Previous School: _____ Class level of last completed year: _____ Please enclose a copy of the child's most recent school report.	Y / N
Where attending a previous school, has your child been in a learning support programme (Literacy/Maths/Remedial reading)? If yes, please give details:	Y / N
Where attending a previous school, has your child been in an ESOL (English as a Second Language) programme at another school?	Y / N
Does your child have any learning difficulties that you are aware of, or have a family history of, e.g. dyslexia, special needs? If yes, please give details:	Y / N
Does your child have any physical disabilities/difficulties (including toileting) that you are aware of? If yes, please give details:	Y / N
Does your child have any behavioural difficulties or problems, e.g. anxiety, withdrawal, ADHD? If yes, please give details:	Y / N
Does your child have any allergies? If yes, do you have an existing action plan? <i>Please discuss the management of your child's allergy with their teacher prior to the child starting.</i>	Y / N
Does your child have any medical condition that you are aware of? If yes, please give details:	Y / N
Is your child regularly taking any medication? If yes, please state medication and dosage:	Y / N
If your child uses regular medicine (eg: inhalers for asthma), where will this be stored at school for access (ie: classroom, school bag, sick bay):	Y / N
Are you happy to allow the sick bay to offer pain relief when needed without contacting you each time for permission? If yes (Y), please circle <b>one or both</b> medications: Paracetamol / Ibuprofen	Y / N
Are there any special custodial/access relationships for your child? If yes, please give details:	Y / N
Has your child ever been suspended, dismissed, or refused admission to another school? If yes, please state details:	Y / N
Do you intend for your child to use the CCS Ashhurst or Feilding Bus service?	Y / N

## Early Childhood attendance (for the last 6 months before school):

Please circle all that apply	Hours per week
Kohanga Reo/Playcentre/Kindergarten/Home based service/Playgroup	
Kohanga Reo/Playcentre/Kindergarten/Home based service/Playgroup	

Name of centre attended \_\_\_\_\_ **or** (Please tick)

Attended, but only outside of New Zealand	
Attended, but I don't know what type of service	
Did not attend	

### Preference of Enrolment

Cornerstone is required under **Schedule 6 – 26 of the Education and Training Act 2020** to give a preference of enrolment to students whose parents or guardians have established a particular or general connection with the special character of the school.

Preference is determined by the Proprietor (Cornerstone Christian Education Trust) and is dependent on the child having a parent who is a committed Christian. This is ascertained by requiring a signed Pastor's reference form stating that the family regularly worships at an established Christian church, and that they are committed Christians.

**It is most important** that you fill in the section below and, if applicable, forward the pastor's reference form to your church's senior Pastor/Minister/Priest/Elder.

**Christian commitment** (tick appropriate boxes)      **Family**    **Father**    **Mother**    **Caregiver**    **Child**

Regularly worship/committed Christians					
Occasionally attend church, but not really involved					
Not interested					
Name of church					

Please **also** fill in this section if you currently live outside of, or are new to the Manawatu: (tick appropriate boxes)

I intend to find and regularly attend a Christian church in the Manawatu region	
I have recently found and intend to regularly attend _____ Church	
I will forward an additional pastor's reference once I am settled into a church	
I do not intend to regularly worship at a Christian church in the Manawatu	

### Privacy Act 2020

Information received about parents and children needs to be used by Cornerstone Christian School in the following ways:

1. Management of the school
2. For the child's records to be forwarded on request to their next school
3. For sharing of information with the Cornerstone Christian Education Trust, the Ministry of Education, the Ministry of Social Development and other agencies / personnel involved in the education of the child

Do you give permission for the above uses of information about you and your children? <b>Y / N</b>
Do you give permission for your child's work to be identified and displayed online? <b>Y / N</b>
Do you give permission for your child's photo and identification to be used for promotional and publications, both online and in paper-based publications? <b>Y / N</b>
Please explain if answer to any of the above 3 questions is "N":
In terms of the Privacy Act 2020, I understand that the information on this form is collected as part of the essential information the school holds on my child.
Signed: _____ Your name: _____

