



**Medical Details:**

Doctor's Name:	Phone Number:
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Does the student have any medical condition the school should be aware of? *(please circle)* Yes / No  
If yes please provide details:

Is the student required to take prescription medicine (e.g. Insulin) during the school day? *(please circle)* Yes / No  
If yes please provide details:

I agree for the student to be given paracetamol for pain relief at Onehunga High School: *(please circle)* Yes / No

I agree for the student to receive free dental care at Onehunga High School: *(please circle)* Yes / No

**I understand that:**  
Students are able to access registered nurses through the Health Centre, as well as a visiting doctor, physiotherapist and psychologist. All Year 9 students are seen for a health assessment by the registered nurses. If I do not wish my child to access these services, or if there is any medication he/she cannot have I will notify the principal in writing.

**Learning Support:**

Has your child received learning support *(please circle)* Yes / No  
If yes please provide details:

**Junior Emerging Talent Squad (JETS):**

Onehunga High School offers Junior Emerging Talent Squads in rugby (boys), netball (girls), football (boys and girls) and basketball (boys and girls). These training squads are designed for students who wish to commit to improving their ability in these sports. JETS trainings take place in the mornings throughout terms 1-3. All Year 9 and 10 students are eligible to apply for these squads. Trials will be held in term 4 of 2019 to select the JETS for the start of 2020. Students and families will be notified of the trial dates towards the end of term 3 2019. If your child is interested in JETS for 2020 please state sport they are interested in trailing for. (Rugby / Netball / Football / Basketball (select ONE only)

**Whanau classes at each year level:**

Onehunga High School offers Whanau classes at each year level. These are Kaitiaki classes that meet together every morning from 8:40-8:55 and once per week on a Wednesday during mentoring period. The Whanau classes are held in the school marae (Te Haerenga) and whare kai. Tikanga Maori principles and practices are used to guide the interaction between students and staff. All students are eligible to apply for a place in the Year 9 Whanau class. If you would like your child to be part of the Whanau class please indicate this below.

**BYOD: (Bring your own Device)**

My child will have their own device (Chromebook / Laptop etc) to use at school *(please circle)* Yes / No

**Parent Caregiver Details:**

The **Education Act** gives the right to vote in Board of Trustees elections to both natural parents and caregivers with whom the student is resident. We therefore ask, firstly for the names, address and contact telephone numbers of the adults with whom the student lives and, secondly, the name and address of the student's natural parent(s) in cases where this differs.

**Parent / Caregiver One:**

Title: <i>Mr / Mrs / Ms / Dr</i>	Surname:	First Name:
Physical Address:		Postal Address: <i>(if different from physical address)</i>
Email Address:		
Relationship to student:		Home Phone:
Mobile:		Work Phone:

Is this caregiver the student's legal guardian?	Yes / No
Does this caregiver have legal access rights to the student?*	Yes / No
Does this caregiver have legal access to personal information about the student?*	Yes / No
<i>*Answering "No" for these questions means that the caregiver will not have access to the student or to information relevant to the student without permission from the legal guardian.</i>	

**Parent / Caregiver Two:**

Title: <i>Mr / Mrs / Ms / Dr</i>	Surname:	First Name:
Physical Address:		Postal Address: <i>(if different from physical address)</i>
Email Address:		
Relationship to student:		Home Phone:
Mobile:		Work Phone:

Is this caregiver the student's legal guardian?	Yes / No
Does this caregiver have legal access rights to the student?*	Yes / No
Does this caregiver have legal access to personal information about the student?*	Yes / No
<i>*Answering "No" for these questions means that the caregiver will not have access to the student or to information relevant to the student without permission from the legal guardian.</i>	

**Parent: (if differs from above)**

Title: <i>Mr / Mrs / Ms / Dr</i>	Surname:	First Name:
Physical Address:		Postal Address: <i>(if different from physical address)</i>

Email Address:	
Relationship to student:	Home Phone:
Mobile:	Work Phone:

Is this caregiver the student's legal guardian?	Yes / No
Does this caregiver have legal access rights to the student?*	Yes / No
Does this caregiver have legal access to personal information about the student?*	Yes / No
<i>*Answering "No" for these questions means that the caregiver will not have access to the student or to information relevant to the student without permission from the legal guardian.</i>	

<b>Emergency Contact:</b>		
Title: <i>Mr / Mrs / Ms / Dr</i>	Surname:	First Name:
Email Address:		
Relationship to student:	Home Phone:	
Mobile:	Work Phone:	

**Internet/ICT Responsible Use Agreement:**

When using information and communications technologies (ICT) at Onehunga High School I will always be a good digital citizen. This means that I;

- o **will use ICT for learning as well as other activities.**  
I understand that technology can help me to learn. I know it can also be used to talk to people, to buy and sell things and to share my opinion. I know when and where it is OK to do each of these.
- o **will think carefully about whether the information I see online is true.**  
I know that it is easy to put information online. This means that what I see is not always right. I will check to make sure information is real before I use it.
- o **will be able to speak the language of digital technologies.**  
When people talk online the things they say can be different from a conversation they might have if they were sitting next to each other. I know that I must try to understand what people are saying before I react. If I am not sure, I can ask them or someone else to explain.
- o **understand that I may experience problems when I use technology.**  
I understand that there will be times when technology may not work as I expect it to, or that people may be unkind online. When these things happen, I know that there are constructive ways I can deal with it. I know there are people I can go to, to get help if I am not sure what to do.
- o **will always use ICT to communicate with others in positive, meaningful ways.**  
I will talk politely and with respect to people online and not do anything to hurt anyone.
- o **will be honest in all of my actions using ICT.**  
I will make sure what I do is not against the law (in particular does not break copyright law) and does not break the rules of the websites that I use. I understand that there is Ministry of Education approved internet filtering in place at the school to keep us safe and I will not do things to try and circumvent this filtering. I will keep my login details safe, only use my own login and not use other people's logins. When I am not sure about anything I will ask for help.
- o **will always respect people's privacy and freedom of speech online.**  
I understand that some information is private. I will be careful when using names, birthdays, addresses or photos.
- o **will help others to become better digital citizens.**  
Being a good digital citizen is something that we all have to work at. If I see that someone is being unfairly treated online then I will speak up rather than just watch it happen.

**Student Declaration:**  
I understand that this agreement is to be followed when using any technology at school or while on any school activity, this may include the use of a device that the school does not own. I understand that if I breach this agreement, I may lose access to school ICT services including the use of the internet, on school owned devices or any personally owned device at school.

**Student:** ..... **Date:** .....

**Parent Declaration:**  
I have read the student declaration. I am happy that my child understands what this means, and is capable of working within the guidelines. If I have questions or concerns about the way in which technology is being used by my child at school, I am aware that I am welcome to discuss this with the school at any time.

**Parent:** ..... **Date:**.....

**In-Zone – Declaration – Please complete if living in-zone**

The address given at the time of application for enrolment must be the student's usual place of residence when the school is open for instruction.

The Ministry of Education has advised that parents should also be warned of the possible consequences of deliberately attempting to gain unfair priority in enrolment by knowingly giving a false address or making an in-zone living arrangement which they intend to be only temporary; e.g.

- Renting accommodation in-zone on a short term basis
- Arranging temporary board in-zone with a relative or family friend
- Using the in-zone address of a relative or friend as an "address of convenience", with no intention to live there on an ongoing basis

If the school learns that a student is no longer living at the in-zone address given at the time of application for enrolment and has reasonable grounds to believe that a temporary in-zone residence has been used for the purpose of unfairly gaining priority in enrolment at the school, then the Board may review the enrolment. Unless the parents can give a satisfactory explanation within 10 days, the Board may annul the enrolment. This course of action is provided for under Section 110A of the Education Act 1989.

***I confirm that the address which I have provided to the school will be the usual place of residence of my child when the school is open for instruction. I will advise the school of any subsequent change of address.***

Parent/Guardian: \_\_\_\_\_

**Conditions of Enrolment**

- I enrol at Onehunga High School under the terms and conditions of the prospectus.
- I agree that I will be subject to school rules and I will endeavour to obey them.

**Student Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

- I/we enrol my son/daughter at Onehunga High School under the terms and conditions of the prospectus.
- I/we agree that he/she will be subject to school rules and I/we will endeavour to see that he/she obeys them.
- I/we understand the school will take action on my behalf in case of injury or sudden illness.
- I/we give permission for my child's photo to be used in school related publications.
- To the best of my knowledge the details in this application are true and correct.

**Parent/Caregiver 1 Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Parent/Caregiver 2 Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Enrolling Officer:** \_\_\_\_\_

**Privacy Statement**

Address and phone number details are collected at the time of enrolment and during the student's time at school so that the school can contact the parent or student as necessary. The records made from this information may be viewed on request at the school. The information collected may be disclosed to other agencies in accordance with the principles of the Privacy Act.

**Enrolment Interview notes: to be completed by the enrolling officer**

	<i>Y9 Language Option</i>	
		Chinese
		ESOL
		Maori
		Samoan
		Tongan

