

Please affix a  
Passport style photo  
of the applicant here

# MARIAN COLLEGE APPLICATION FOR ENROLMENT



THIS YEAR OR NEXT (All others use a notice of intention to enrol form)

Proposed year of entry:

Proposed academic year level at entry: Year 9  Year 10  Year 11  Year 12  Year 13

## Student information

Family name: \_\_\_\_\_  
First names: \_\_\_\_\_  
Preferred name: \_\_\_\_\_  
Date of birth: \_\_\_\_\_  
Previous schools and years: \_\_\_\_\_  
Present school & location: \_\_\_\_\_  
Present year level: \_\_\_\_\_  
Number of years there: \_\_\_\_\_  
Religion: \_\_\_\_\_  
Baptised (place/date): \_\_\_\_\_  
First communion (place/date): \_\_\_\_\_  
Confirmation (place/date): \_\_\_\_\_

Nationality: \_\_\_\_\_  
Languages spoken at home: \_\_\_\_\_  
Country of birth: \_\_\_\_\_  
NZ citizen: Yes [ ] No [ ]  
NZ residency: Yes [ ] No [ ]  
NZ permit number: \_\_\_\_\_  
Date of arrival: \_\_\_\_\_  
**Ethnic group:** \_\_\_\_\_  
If Māori, which iwi: \_\_\_\_\_  
If Pacific, which Island/s: \_\_\_\_\_  
If Asian, which countries: \_\_\_\_\_

## Family information

Care and contact parent/s:  Both parents  Father only  Mother only  Other (specify name and relationship)  
During the school week the student lives with:  Both parents  Father only  Mother only  Guardian

### Father/caregiver (circle as appropriate)

Title (eg. Mr): \_\_\_\_\_  
Family name: \_\_\_\_\_  
First names: \_\_\_\_\_  
Preferred name: \_\_\_\_\_  
Home address: \_\_\_\_\_  
Suburb: \_\_\_\_\_  
Town/city: \_\_\_\_\_  
Postcode: \_\_\_\_\_  
Country: \_\_\_\_\_  
Phone home: \_\_\_\_\_  
Mobile: \_\_\_\_\_  
Phone business: \_\_\_\_\_  
Email personal: \_\_\_\_\_  
Email business: \_\_\_\_\_  
Occupation: \_\_\_\_\_  
Business name: \_\_\_\_\_  
Business address: \_\_\_\_\_  
Religion: \_\_\_\_\_  
Parish attending: \_\_\_\_\_

### Mother/caregiver (Circle as appropriate)

Title (eg Ms/Mrs): \_\_\_\_\_  
Family name: \_\_\_\_\_  
First names: \_\_\_\_\_  
Preferred name: \_\_\_\_\_  
Home address: \_\_\_\_\_  
Suburb: \_\_\_\_\_  
Town/city: \_\_\_\_\_  
Postcode: \_\_\_\_\_  
Country: \_\_\_\_\_  
Phone home: \_\_\_\_\_  
Mobile: \_\_\_\_\_  
Phone business: \_\_\_\_\_  
Email personal: \_\_\_\_\_  
Email business: \_\_\_\_\_  
Occupation: \_\_\_\_\_  
Business name: \_\_\_\_\_  
Business address: \_\_\_\_\_  
Religion: \_\_\_\_\_  
Parish attending: \_\_\_\_\_

**Person/people responsible for payment of costs:** (add extra sheet if necessary)

Title:  Family name: \_\_\_\_\_ First name: \_\_\_\_\_

Title:  Family name: \_\_\_\_\_ First name: \_\_\_\_\_

Relationship to student of each person: \_\_\_\_\_

Address/es: \_\_\_\_\_

Phone (home): \_\_\_\_\_ Mobile: \_\_\_\_\_

**Emergency contact** (other than parent): The person nominated should be a person who is available to come and collect your child at short notice if the need should arise and a parent is not available.

Title:  Family name: \_\_\_\_\_ First name: \_\_\_\_\_

Home address: \_\_\_\_\_

Suburb: \_\_\_\_\_ Town/city: \_\_\_\_\_ Postcode: \_\_\_\_\_

Phone (home): \_\_\_\_\_ Mobile: \_\_\_\_\_

Relationship to student: \_\_\_\_\_

**Directions for correspondence:** As family structures can vary, the following information is requested to ensure that correspondence is sent to the correct family members.

Send college reports to:  Both parents  Father only  Mother only  Other (specify name and relationship)

Send newsletters and other publications to:  Both parents  Father only  Mother only  Other (specify name and relationship)

**Marian College links:**

Sisters currently attending Marian College: Name: \_\_\_\_\_ Year level: \_\_\_\_\_

Sisters who previously attended Marian College Name: \_\_\_\_\_ Years attended: \_\_\_\_\_

Name: \_\_\_\_\_ Years attended: \_\_\_\_\_

Mother who previously attended Marian College: Maiden name: \_\_\_\_\_ Years attended: \_\_\_\_\_

**Other brothers and sisters** (please give names, ages and current schools of other brothers and sisters not mentioned above):

\_\_\_\_\_

Other links with the college (eg. Links to Mercy or Josephite sisters):

\_\_\_\_\_

**Health details** Please state any serious illness, disability or allergy. (This information will be treated with strictest confidence):

\_\_\_\_\_

\_\_\_\_\_

Doctor: \_\_\_\_\_ Surgery phone: \_\_\_\_\_

**Special learning requirements** Please let us know about any special learning needs or talents your child may have:

\_\_\_\_\_

\_\_\_\_\_

## Conditions of enrolment

I/we the undersigned accept the conditions of enrolment. We undertake and agree:

- That the herein named student will participate in the general school programme that gives Marian College its special character.
- To pay the attendance dues and financial contributions one term in advance. Attendance dues are approved by the Minister of Education under Section 36 of the Private Schools' Conditional Integration Act 1975. The financial contributions are tax deductible.
- To pay immediately on receipt of the account, such disbursements as are incurred by the herein named student at the college.
- That the proprietor (owner), the Catholic Bishop of Christchurch, is entitled to increase the attendance dues and the Catholic Education Office financial contribution and that the board of trustees is entitled to increase other financial contributions from time to time.
- That we will ensure that the policies and rules as laid down by the board of trustees and the college are observed, including the school's behaviour management policies and procedures.
- Enrolment is subject to the college's enrolment scheme and policy, and the availability of places within the prescribed allocation; and that
- The final decision on whether a student meets the enrolment criteria and is able to be offered a place as a student at Marian College rests with the principal.

Parent/caregiver 1 name: \_\_\_\_\_ Signature: \_\_\_\_\_

Parent/caregiver 2 name: \_\_\_\_\_ Signature: \_\_\_\_\_

Parent/caregiver 3 name: \_\_\_\_\_ Signature: \_\_\_\_\_

Student name: \_\_\_\_\_ Signature: \_\_\_\_\_

Date: \_\_\_\_\_

## Information privacy

I agree to Marian College collecting personal information on:

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*Full name of individual student applying to enrol*

I have been advised by the college that the information I provide will be used for:

- Student records (and, if necessary, transfer to another school).
- Accounting purposes of the Marian College board of trustees.
- The Catholic Bishop of Christchurch (the proprietor).
- Marian College PTA.
- The Marian College past students' association.
- The Marian Foundation.
- The Marian Netball Club.
- Parent contact booklet for year level parents

I accept the fact that this information may later be disclosed to a government agency such as NZQA, CYFS, police, and Group Special Education or a medical service, where it will assist the student, or be used for statistical and/or research purposes and agree to its use for that purpose, provided that if the information is published in any way it will not identify me or the individual concerned.

I give permission for my school to provide my contact details to the Canterbury Youth Transition Service so I can be contacted after I have left school.

I understand that under Principle 3 (1) (d) of the Privacy Act 1993 the information I provide will be held at the offices of Marian College whose address is 126 North Parade, Shirley, Christchurch.

I am aware of the rights of access to, and collection of this information.

Parent/caregiver 1 name: \_\_\_\_\_ Signature: \_\_\_\_\_

Parent/caregiver 2 name: \_\_\_\_\_ Signature: \_\_\_\_\_

Parent/caregiver 3 name: \_\_\_\_\_ Signature: \_\_\_\_\_

Date: \_\_\_\_\_

**Student's profile** Students please use this page to tell us about your interests and achievements:

**Interests and activities at school:**

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**Hobbies and activities outside of school:**

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**Community involvement** (church, Guides, clubs etc):

Past involvement (indicate years)

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Current involvement

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**Music / drama**

Do you play an instrument? Yes  No  Instrument and level/years  Do you sing in a choir? Yes  No

Other music /drama involvement

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**Sports club background**

Sport	Club you belong to	Years	Any special representation or achievement
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Other achievements (certificates, awards etc.)

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School or club responsibilities (prefect, librarian, monitor, captain etc. Please indicate school/club and year)

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Why I would like to come to Marian College:

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**Please check this application form includes:**

- |  |  |
|--|--|
| <input type="checkbox"/> Passport style photograph affixed to the first page   | <input type="checkbox"/> Photocopy of passport/visa entry first page and work permit or residency/citizenship page for non-New Zealand born students. (Original must be sighted at interview). |
| <input type="checkbox"/> Photocopies of most recent full school report, the pre-entry learning information report and most recent Australian English/mathematics/science competition certificates. | <input type="checkbox"/> Photocopy identifying date of birth in birth certificate or passport. (original must be sighted at interview).  |
| <input type="checkbox"/> Completion of all sections of the enrolment form.   | <input type="checkbox"/> Certificate of eligibility for preference enrolment signed by the parish priest.  |
|  | <input type="checkbox"/> The acknowledgement reply slip, completed.  |

**Please return to:** The enrolment officer, Marian College, P O Box 27-064, 126 North Parade, Shirley, Christchurch 8640, New Zealand.  
**Phone:** 64 3 385-8449    **Fax:** 64 3 385-1022    **Email:** [exec@mariancollege.school.nz](mailto:exec@mariancollege.school.nz)    **Website:** [www.mariancollege.school.nz](http://www.mariancollege.school.nz)