

# International Student Application Form

• It is important that all relevant information about the student is included in this application. This information is used to ensure that the student is supported properly upon arrival and while enrolled, and to match them with suitable homesteads, teachers and courses. Where information is included relating to health issues or learning needs, disclosure of this information will not automatically disqualify the student from enrolment. However, failure to disclose information or providing misleading information may result in the withdrawal of an Offer of Place or termination of a Contract of Enrolment.

• The Catlins Area School has agreed to observe and be bound by the Code of Practice for the Pastoral Care of International Students published by the Minister of Education. Copies of the Code are available to read here: The Education (Pastoral Care of Tertiary and International Learners) Code of Practice 2021

Student Details (Name must be as it appears on your passport)							
Family Name:							
First Name:			Date of Birth:				
Preferred Name:	Preferred Name:			Gender:			
Email:							
Address (in home country):							
First Language:		Country of Citizenship:					
Passport Number:	Passport Expiry Date:						
Date of intended entry into NZ:	Student Visa Number:						
	Student Visa Expiry Date:						
Applying for Year Level (Please circl	e): Year 9	Year 10	Year 1	11	Year 12	Year 13	
Subject Choices: The school reserves the right to cha interest of the student to do so or if s course of study does not commence unavailable to new students	students do not r	meet the pren	equisite	for the	requested of	course. If the	
1	2			3			
4	5			6			
Background Information/Interests: List Hobbies and interests, including sports you participate in, in order of importance							

Parent One or Legal Guardian Details (Name must be as it appears on your passport):							
NOTE: Ot is requirement of New Zealand regulations that schools must maintain effective communication with parents and legal guardians. To comply with the requirements, contact information provided in this section MUST be the contact information for the parents or legal guardian.							
Title (Please circle):	Mrs	Mr	Miss	Ms	Dr	Other (Please Specify)	
Family Name:						Date of Birth:	
Given Name(s):							
Address							
Home Phone:	ne Phone: Mobile:		Email:				
Parent Two or Legal Guardian Details (Name must be as it appears on your passport):							
_	Guardia	n Details	s (Name m	ust be as	it appear	s on your passport).	
NOTE: Ot is requiren communication with	ment of N parents	lew Zea and leg	land regula al guardia	ations the	at schoo	Is must maintain effective th the requirements, contact nation for the parents or legal	
NOTE: Ot is requiren communication with information provided	ment of N parents	lew Zea and leg	land regula al guardia	ations the	at schoo	Is must maintain effective the the requirements, contact	
NOTE: Ot is requiren communication with information provided guardian.	nent of N parents d in this s	lew Zea and leg section	land regula al guardia MUST be t	ations thans. To co	at schoo mply wit ct inforn	Is must maintain effective th the requirements, contact nation for the parents or legal	
NOTE: Ot is requirent communication with information provided guardian.  Title (Please circle):	nent of N parents d in this s	lew Zea and leg section	land regula al guardia MUST be t	ations thans. To co	at schoo mply wit ct inforn	Is must maintain effective th the requirements, contact nation for the parents or legal  Other (Please Specify)	
NOTE: Ot is requiren communication with information provided guardian.  Title (Please circle): Family Name:	nent of N parents d in this s	lew Zea and leg section	land regula al guardia MUST be t	ations thans. To co	at schoo mply wit ct inforn	Is must maintain effective th the requirements, contact nation for the parents or legal  Other (Please Specify)	
NOTE: Ot is requiren communication with information provided guardian.  Title (Please circle): Family Name: Given Name(s):	nent of N parents d in this s	lew Zea and leg section	land regula al guardia MUST be t	ations thans. To co	at schoo mply wit ct inforn	Is must maintain effective th the requirements, contact nation for the parents or legal  Other (Please Specify)	
NOTE: Ot is requiren communication with information provided guardian.  Title (Please circle): Family Name: Given Name(s):	nent of N parents d in this s	lew Zea and leg section	land regula al guardia MUST be t	ations thans. To co	at schoo mply wit ct inforn	Is must maintain effective th the requirements, contact nation for the parents or legal  Other (Please Specify)	
NOTE: Ot is requiren communication with information provided guardian.  Title (Please circle): Family Name: Given Name(s):	nent of N parents d in this s	lew Zea and leg section Mr	land regula al guardia MUST be t	ations thans. To co	at schoo mply wit ct inforn	Is must maintain effective th the requirements, contact nation for the parents or legal  Other (Please Specify)	
NOTE: Ot is requirent communication with information provided guardian.  Title (Please circle): Family Name: Given Name(s): Address	nent of N parents d in this s	lew Zea and leg section Mr	land regula al guardia MUST be t Miss	ations thans. To co	at schoo mply wit ct inforn	Other (Please Specify)  Date of Birth:	
NOTE: Ot is requirent communication with information provided guardian.  Title (Please circle): Family Name: Given Name(s): Address	ment of N parents d in this s Mrs	lew Zea and leg section Mr	land regula al guardia MUST be t Miss	Ms	at schoo mply wit ct inforn	Other (Please Specify)  Date of Birth:  Email:	
NOTE: Ot is requirent communication with information provided guardian.  Title (Please circle): Family Name: Given Name(s): Address  Home Phone:	ment of N parents d in this s Mrs	lew Zea and leg section Mr	land regula al guardia MUST be t Miss	ms. To contains. Ms	at schoo mply wit ct inforn Dr	Other (Please Specify)  Date of Birth:  Email:	
NOTE: Ot is requirent communication with information provided guardian.  Title (Please circle): Family Name: Given Name(s): Address  Home Phone:	ment of N parents d in this s Mrs	lew Zea and leg section Mr	land regula al guardia MUST be t Miss	ms. To contains. To contains. Ms	at schoo mply wit ct inforn Dr	Other (Please Specify)  Date of Birth:  Email:	

### Uniform

All students wear our school uniform. International students soon appreciate the convenience of wearing a uniform and the part it plays in school spirit and pride. The cost of the school uniform is in addition to the tuition fees and accommodation expenses.

#### **Accommodation**

We require our International Students to live in an approved accommodation while in New Zealand. Private arrangements such as living in a flat or apartment will not be permitted. Homestay accommodation will be arranged by The Catlins Area School.

#### **Health and Travel Insurance**

Most students are not entitled to publicly funded health services while in New Zealand unless they are:

- 1. A resident or citizen of Australia: or
- 2. A national of the United Kingdom in New Zealand; or
- 3. The holder of a temporary permit that is valid for two years or more.

If you do not belong to one of these special categories and you receive medical treatment during your visit, you will be liable for the costs of that treatment. **It is compulsory to have insurance** that will cover the cost of medical treatment in New Zealand for the duration of your stay in New Zealand. We also strongly recommend that you obtain insurance to cover your travel to and from New Zealand.

#### **School Rules**

Parents enrolling a student at The Catlins Area School undertake to ensure that their son/daughter abides by the school rules.

#### Those rules include:

- 1. Students are expected to behave in a courteous manner and to show consideration towards other people.
- 2. Students are to be tidily dressed in the school uniform as set out in the school prospectus.
- 3. Students are required to attend all classes, on time, and to remain at school throughout the school day.
- 4. Students are forbidden to bring cigarettes, tobacco, alcohol, drugs or solvents to school, or use such material while under school discipline.
- 5. International students are to reside in a homestay residence approved by the School.
- 6. International Students will not be permitted to own or drive motorcars or motorcycles whilst enrolled at The Catlins Area School.
- 7. International Students must not travel outside Owaka and its immediate environs without having obtained the permission of the Director of International Students.

## **General Homestay Family Rules**

- 1. You are expected to be home early from school, unless of course you have asked permission from your family first, for example you may wish to participate in after-school sport, or visit a friend's home. Whatever the reason you must tell your family where you are going and what time you will be home. You MUST be home for dinner each evening.
- 2. At no time are you allowed to out at night alone. Family outings or group functions are acceptable. However, you must ensure that you are back home at a reasonable hour, for example not later than 9.00pm during the week and not later than 11pm at the weekend.
- 3. If you wish to stay with a friend overnight, you should ask your host family first, who will then telephone the family you wish to stay with and confirm that this is acceptable.
- 4. At no time are you permitted to go away for weekends or holidays without confirming with the school and your homestay family. This is to ensure that you are safe at all times. The telephone number and name of the person you will stay with must be left with your homestay family so that you can be contacted if anything should happen.
- 5. You are expected to help with any household chores, as New Zealand children do.
- 6. At no time are you permitted to purchase or drive a car or motorbike on a public road in New Zealand
- 7. You are not permitted to participate in activities that contravene your health insurance, for example bungy jumping, paragliding etc. Parental consent in writing must be obtained to receive an exemption from this policy.

## **Acceptance of Terms**

Before your application can be considered please sign the following acknowledgments (to be signed by a parent or guardian of a student under the age of 20 years):

- 1. I agree to abide by the rules and policies of the School at all times.
- 2. I accept the right of the School to effect a change of course if this is considered to be in my best interests.
- 3. I have read, understood and signed the attached tuition agreement which shall apply if my application is successful.

Signed (Student):	Date:
Signed (Parent/Caregiver):	Date:
Full Name:	
Relationship to Student:	
Address:	
Phone:	