



## The Catlins Area School

### INTERNATIONAL STUDENT APPLICATION FORM 2026

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 to match them with suitable homestays, 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.

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:	
Preferred Name:	
Date of Birth:	Gender:
Age on application:	
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:
Year Level (Please circle):    Year 9    Year 10    Year 11    Year 12    Year 13	

**Parent One or Legal Guardian Details (Name must be as it appears on your passport):**

**NOTE: It is a 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:					Mobile:	
Email:						

**Parent Two or Legal Guardian Details (Name must be as it appears on your passport):**

**NOTE: It is a 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:					Mobile:	
Email:						

**Emergency Contact (In home country, other than parents/caregivers)**

Contact's name:	Relationship to Student:
Mobile Phone:	Home Phone:
Email:	

Agent Information (If using an agent)
Agency name:
Agents name if known:
Agent email address:
Agent phone contact:

Medical Information
Name of doctor (in home country):
Phone number of doctor:
Does the student have any history of previous physical or mental health illness or problems that may affect their enrolment? (Please circle)      Yes      No
If 'Yes', please provide details including doctor or hospital reports (attach more pages if required).
Has the student been fully vaccinated for Covid-19? (Please circle)      Yes      No
If 'Yes', please provide:
Name of the vaccine:      Number of doses:
Please attach evidence of vaccination to this application.
Has the student been vaccinated for diseases other than Covid-19?      Yes      No
If 'Yes', please provide a copy of the vaccination certificate/s and list below:

Please circle if your child has suffers from or has suffered from any of the following medical conditions:			
Asthma	Back/Neck problems	Glandular Fever	Allergy to bee stings
Migraines	HIV or Aids	Diabetes	Hepatitis A, B or C
Epilepsy	Heart Condition	Tuberculosis	ADD or ADHD
Allergies	Food Allergies	Eating Disorder	Depression/Anxiety
Covid-19	Asperger's Syndrome	Autism Spectrum Disorder	
Other: (Please describe):			
Does the student have any medical implants (such as metal implants) that may affect receiving medical treatment while in New Zealand?      Yes      No			
If 'Yes' please provide details (attach additional pages if required).			
Is the student currently on any medication?      Yes      No			
If 'Yes' please provide details (attach additional pages if required).			
<i>Please note: If you suffer from conditions requiring medication, it is advisable to bring your own medication to New Zealand. You will be required to notify the school regarding any medications that you bring with you.</i>			
Is there anything further regarding the health of the student that the school needs to be aware of in enrolling and supporting the student as an international student?      Yes      No			
If 'Yes' please provide details (attach additional pages if required).			
Do you consent to the school providing over-the-counter medication *such as acetaminophen, paracetamol or ibuprofen?      Yes      No			
If 'No' please specify what medications you do not want the Student to receive:			

Learning Information	
How many years of schooling not including pre-school education has the student had?	
Does the student have any learning difficulties which may require extra school support or services? Yes          No	
If 'Yes' please provide details (attach additional pages if required).	
Does the student have behavioural difficulties which may require extra school support or services? Yes          No	
If 'Yes' please provide details (attach additional pages if required).	

General Details	
Has the student previously applied for entry to the school?	Yes          No
If yes, when?	
How many years has the student studied English?	_____ Months      _____ Years
Please indicate the students' level of English:	<div>Beginner          Able to hold simple conversations</div> <div>Able to understand enough to know what is going on in the classroom</div>
Do the student's parents speak or read English?	
Read	Yes          No
Speak	Yes          No

Subject Choices:		
<i>The school reserves the right to change the course of study of any student if it is deemed to be in the best interest of the student to do so or if students do not meet the prerequisite for the requested course. If the course of study does not commence at the start of the school year, some subjects may be full and unavailable to new students.</i>		
1.	2.	3.
4.	5.	6.

How many years has the student studied English?	_____ Months _____ Years	
Please indicate the students' level of English:	Beginner Able to hold simple conversations Able to understand enough to know what is going on in the classroom	
Do the student's parents speak or read English?		
Read	Yes	No
Speak	Yes	No

### Accommodation Requirements:

**NOTE: The Education (Pastoral Care of Tertiary and International Learners) Code of Practice 2021 requires that all students under 10 years of age must live with a parent or legal guardian in New Zealand while enrolled at a school unless they are accommodated in a school hostel.**

Does the student have any food allergies or special dietary requirements?	Yes	No
If 'Yes' please provide details (attach additional pages if required).		
Does the student have any other special requirements for accommodation? (Pets, cultural or religious requirements, phobias)		
Yes	No	
If 'Yes' please provide details (attach additional pages if required).		
If living with a host family, please provide a brief letter introducing the student to the host family and attach the letter to this application.		

### Insurance Details

Does the student have insurance?	Yes	No	Intending to purchase
Insurer:			
Insurance Policy Number:			
If you are purchasing your insurance for the student, you must provide an English copy of the policy and certificate to the school on or before the student's first day of school.			

### Background Information/Interests:

*List Hobbies and interests, including sports you participate in, in order of importance*


## Uniform

All students are expected to wear Japanese school uniform while attending The Catlins Area School. Some planned activities may require no uniform to be worn.

## 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 motor cars 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 go 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. 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.
4. You are expected to help with any household chores, as New Zealand children do.
5. At no time are you permitted to purchase or drive a car or motorbike on a public road in New Zealand
6. 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.

By signing below, the Parents confirm that they have read the Agreement and agree to be bound by it in all respects:

**SIGNATURE OF APPLICANT:**

\_\_\_\_\_  
(Student)

\_\_\_\_\_  
(Date)

**SIGNATURE OF PARENT/CAREGIVER:**

\_\_\_\_\_  
(Parent/Guardian of student)

\_\_\_\_\_  
(Date)

**SIGNATURE OF PARENT/CAREGIVER:**

\_\_\_\_\_  
(Parent/Guardian of student)

\_\_\_\_\_  
(Date)