### In Christ, we educate, encourage and empower



### **Enrolment Application Form**

#### **Domestic Student Enrolment Procedure**

Domestic Students are NZ Citizens or Students from the Cook Islands, Niue or Tokelau.

- 1. Complete and return this Enrolment Form. \*
- 2. School completes Preference Enrolment process and notifies families of decisions made.
- 3. Once accepted, you will receive an 'acceptance letter' and a 'commitment to pay attendance dues' form.
- \* Include documentation (if applicable) for Legal Guardianship Order/Authorised Primary Duty of Care (see section D). Legal Guardianship Order/Authorised Primary Duty of Care must be a long-standing arrangement and not created solely for the purpose of gaining entry to the school. If Authorised Primary Duty of Care, written evidence from a NZ Lawyer must be provided and attached, substantiating the legality and existing long-term nature of this relationship.
- \* For New Zealand Citizens Birth Certificate or Passport or New Zealand Citizenship Certificate. Please make colour copies of these and hand them in with your Enrolment Form.
- \* For Non-New Zealand Citizens Copies of Student's Passport with Residence Permit or Student Passport with Student Visa and Parent Passport with Work Permit.
- \* A copy of your son/daughter's latest school report
- \* A copy of your son/daughter's immunisation record (available from your GP).

\*PLEASE NOTE: Only completed applications with the enclosed documents will be processed.

How did you hear about LAC?	
•	

**Note:** Students from a non-English speaking background who have lived in New Zealand for less than four years may be required to take an ESOL (English for Speakers of Other Languages) test.

All documentation is to be returned to: Longburn Adventist College,

PO Box 14001, Longburn, 4866, NZ

Or email: pa@lac.school.nz

### What is Preferenced Enrolment?

As a state-integrated school, Longburn Adventist College has a 'Preference of Enrolment'. The College, in its Integration Agreement with the Government, has two categories of enrolment: Preferenced and Non-Preferenced.

Preferential status is assessed by the school chaplain using the proprietor's preference determination process.

Preferenced enrolment is given to those students whose parents have established a particular or general connection with the Special Character of the school.

LAC has a limited number of places for non-preferenced students. Non-preferenced places are allocated in line with the school's enrolment policy.

**Day Student** 

**Year Level and Enrolment type (circle)** 

5 Day Boarder

10 11 12 13

7 Day Boarder

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in Term \_\_\_\_\_, year 20\_\_\_\_

This enrolment application is for the student to commence at LAC



### **Domestic Enrolment Application Form**

		If con	nmencement is not to be at the	e beginning of th	e school year, state
		altera	tive date:		
A: Particulars of St	udent				
Gender	Male	Female			
Legal Surname:					
Legal First Name:					
Middle Name(s):			Preferred First Name:		
Address:					
				P O S 1	CODE
Student Email Address:					
Student Mobile Phone:			Date of Birth:		
Country of Birth:			Current School:		
Previous Schools Attended in NZ					
New Zealand Citizen (Col	umn 1)		Non-New Zealand Citiz	en (Column 2	)
NZ Birth Certificate Number			Date of Entry into NZ:		
<b>OR</b> NZ Passport Number:			Student Passport Number:		
If not New Zealand Born:			Residence Permit Number:		
Date of Entry into NZ:			<b>OR</b> Student Visa Number:		
<b>OR</b> NZ Citizenship Number:			Parent Passport Number:		
<b>OR</b> Passport Number:			Parent Visa Number:		
			<b>OR</b> Refugee Status:	Yes	No



CULTURAL IDENTITY (plea	se tick	your cultural identit	y. If yo	ou have t	two, please place 1	and 2 by	each)
NZ European		Korean			Fijian		Indian
NZ Māori*		Other Asian			Samoan		Middle Eastern
Australian		British/Irish			Tongan		Sri Lankan
Chinese		Other European			Niuean		South African
Japanese		Fijian Indian			Other Pacific Peopl	es	Latin American
Other:							
If you selected NZ Māori, please	tate you	r lwi:					
B: Caregivers – Resi	denc	e A					
This is the person legally respons			ie same	address	as the student.		
Contact with parents and recor	ding of s	tudent progress is co	onduct	ed by en	nail. Please complet	te the email	section clearly.
CAREGIVER 1 – RESIDENCE	E A						
Mr/Mrs/Miss/Ms				Married Separat	/Single/Divorced/ ed		
Surname:				First Na	me:		
Relationship to Student:				Home N	lumber:		
Mobile Number:				Busines	s Number:		
Address:							
						F	OSTCODE
Email Address:							
Occupation:							
Employer/Workplace:							
CAREGIVER 2 – RESIDENC	E A						
Mr/Mrs/Miss/Ms				Married/ Separate	Single/Divorced/ ed		
Surname:				First Na	me:		
Relationship to Student:				Home N	lumber:		
Mobile Number:				Busines	s Number:		
Address:							
						Р	OSTCODE
Email Address:							
Occupation:							
Employer/Workplace:							



C: Caregivers – Resid		La contra de la constanta de la contra del contra de la contra del la cont			
Parents or other adults that have re CAREGIVER 1 – RESIDENCE		do not live at the same addres	S.		
Mr/Mrs/Miss/Ms	. 0	Married/Single/Divorced/ Separated			
Surname:		First Name:			
Relationship to Student:		Occupation:			
Home Number:		Mobile Number:			
Email Address:					
Home Address:					
			P	OSTC	ODE
CAREGIVER 2 – RESIDENCI	В				
Mr/Mrs/Miss/Ms		Married/Single/Divorced/ Separated			
Surname:		First Name:			
Relationship to Student:		Occupation:			
Home Number:		Mobile Number:			
Email Address:					
Are there any specific custody orde	ers that the College should be m	ade aware of?		YES	NO
D: Legal Guardian/*/	Authorised Primary	y Duty of Care			
Legal Guardian	Authorised Primary	Duty of Care			
Surname:		First Name:			
Relationship to Student:		Occupation:			
Home Number:		Mobile Number:			
Email Address:					
Home Address:					
Home Address:					



If your son/daughter is in a share	d custody situation, the secondar	y address is a	as follows	:			
Address:							
						ΡO	STCODI
						. 0	
E: Emergency Cont		***		16			. 5
Care are not available.	<mark>r caregiver</mark> ) in event of an emer	rgency it Pai	rent/Lega	ii Guardian/Au	itnorise	a Prima	ry Duty of
	of an emergency should be a relat other unforeseen emergency arise ity of Care can be contacted.						
Surname:		First Name	):				
Home Number:		Mobile Nu	mber:				
Relationship to student							
F: Sibling Informat	ion						
Please complete if applicable							
Brother(s)/ sister(s) CURRENTLY a	attending Longburn Adventist Col	lege:					
Name:		Year:		Whanau:			
Name:		Year:		Whanau:			
Brother(s) / sister(s) who were FC	DRMER students attending Longbo	urn Adventis	t College				
Name:		Year:		House:			
Do you wish your son/daughter to (Once the House has been allocate	to be in the same House as the sileted, it cannot be changed.)	oling?			Υ	ES	NO
G: Background Info	ormation / Interests						
Hobbies and leisure activities:							
Community involvement:							
		, i					
iviusic, Drama, Dance (please ind	icate any performing arts that you	ır son/daugh	iter partic	ipates in):			
Sports – what does your son/dau	ighter play?						



Cultural – what is your son/daughter	involved	in?			
Other personal interests and aspirati	ons:				
Any awards? (Please list awards or ce	ertificates	and other	achievements that your son or dau	ighter has received):	
H: Language Ability					
Only complete this section if Engli	sh is NOT	your first	t language.		
Is English your second language?	YES	NO	What is your first language?		
How long have you lived in New Zea	land?				
Has your child participated in an Eng	ılish as a S	econd Lan	guage (ESOL) programme in	YES	NO
their current school?					
I: Special Circumstand	ces				
*Please be assured that any informat	ion you p	rovide is tr	reated as strictly private and confid	lential.	
Does the student have a medical or Examples would be but are not limited	-	_			_
My son/daughter has a physical disa	bility:			YES	NO
My son/daughter has a learning diffi	culty:			YES	NO
Has your son/daughter been involve had Teacher Aide support at previous	-		ed learning programmes or	YES	NO
My son/daughter has currently or pr behaviour e.g. ORS, HHN, ICS (in-cla	•		2	YES	NO
If yes, please provide a brief descript	ion of any	of the abo	ove:		
Do you have something you would li of enrolment, with our SENCO (Spec				YES	NO
If yes, please provide an Educational a brief description of any of the above	Psycholog			ment Report(s) with thi	s application and give



*J. Church Informa	ation					
Denomination (Religion):						
(Circle one)	Dedicated	Baptised	Christened			Confirmed
Church of membership:						
Pastor/minister			Phone:			
K: Counselling						
Please be assured that any int	formation you provide is	s treated as strictly priva	ate and confidential.			
Has your child received support	t from Counsellors at his/h	ner previous school?		YES		NO
Please indicate if any of the bel	ow agencies or services ha	ave been involved:				
Child Youth and Family/Oranga	Tamariki?			YES		NO
Whirinaki (or other child adoles	cents mental health servic	re)?		YES		NO
Private Practitioner/Psychologis	t/Psychiatrist/Private Cou	nsellor?		YES		NO
Other?				YES		NO
Or, would you prefer a confider	ntial discussion with our Co	ounsellor?		YES		NO
L: Medical Details						
To assist us in providing the k questionnaire with as much d		ur child in any illness or	emergency, please co	mplete the	e follo	wing
While this information is strictly conditions. This medical form we change during their schooling.	confidential, it may be ne vill be filed in the School o	ffice. The School realises	that family circumstanc	es and a st	udent'	s health may
06 354 1059. PLEASE NOTE IF YOU HAVE N	OT ADVISED LONGBUR	N ADVENTIST COLLEGE	OF A CONDITION OR	ILLNESS FO	OR WI	HICH YOUR
SON/DAUGHTER MAY REQUI OR ASSISTANCE.	RE MEDICAL TREATMEN	IT, WE MAY NOT BE AB	LE TO PROVIDE APPRO	OPRIATE N	1EDIC	AL SUPPORT
FOR ASTHMA SUFFEREI	RS ONLY					
Does your child have an ASTHN	MA ACTION PLAN?			YES		NO
If YES, please hand a copy to th updating 6 to 12 months. See y	<del>-</del> -		ciety recommends havii	ng an Actio	n Plan	which requires
MEDICATIONS						
For those students who have a medication with the School Nur asthma etc. Furthermore, please Form which will allow the School	rse e.g. Epi-Pen, antihistan e contact the School Nurse	nines for allergies, medica e to discuss these require	ation for migraines, insu	lin for diab	etes o	r an inhaler for
Regular medication(s):						



HEARING							
Does your child have any h	nearing loss?					YES	NO
Is the hearing loss significa	int enough to	affect their learning?				YES	NO
Does your child wear a hea	aring aid?					YES	NO
EYESIGHT							
Does your child have any vi	ision impairme	ent or concern?				YES	NO
Is the vision impairment sig	gnificant enou	gh to affect their lear	ning?			YES	NO
Does your child wear glasse	es?					YES	NO
Does your child wear conta	act lenses?					YES	NO
*M. Medical For	rm						
Student Name:							
Allowed Panadol (Paracetamol)?	YES	NO	Allowe	d Ibuprofen?		YES	NO
Do you consent to your chi	ild seeing the	onsite appointed der	ntal servic	e provider?		YES	NO
Family Doctor Name:				Phone Number:			
Family Dentist Name:				Phone Number:			
the contract of the contract o	mergency and ghter to an Ac ospitalisation ntihistamine, control the Consent ler in an asthm	p). In some circumstanister this treatment in the School cannot concident and Emergen is required.  For any prescription merory. Clinic Epi-Pen, and emergency if own	ontact yo cy Clinic to edication /antihista medicine	ry.  u, or if the accident is ser for treatment.  you have labelled and so mine may be administere is unavailable.	<b>Date:</b> rious, the S upplied as	chool may: the Caregiver/G	uardian for your
I give permission for Longk accident or emergency, for		_	_	<del>_</del>	_	those listed, in t	he case of an
Parent/Guardian/Authori Primary Duty of Care Signature:	ised				Da	te:	



	NOTES							
-	Medication required for sensory made aware of:	loss, fa	ctors that may affect the s	tudent	s's behaviour, or any other	conc	litions	that the School
* MEDIC	CAL CONDITIONS (PLEAS	SE TIC	CK)					
	Allergies. Please clearly specify	y:						
	Asthma		Back/Neck Problems		Coeliac disease			Diabetes
	Epilepsy		Headaches/Migraines		Heart Condition			
Other (spe	ecify):							
REACTI	ONS							
	Bee or wasp stings		Hay fever		Insect bites			Latex/plasters
	Medications		Sulphur Dioxide		Sunlight			
Other (spe	ecify):							
VACCIN	IATIONS							
•	child completed their childhood in please contact your GP or Practic		. 5			YES	5	NO
	oply a copy of your child's vaccin							
	Diphtheria		Hepatitis B		HIB			HPV
					Pertussis			
	Measles		Mumps		(Whooping cough)			Polio
	Rubella		Tetanus		Varicella (Chickenpox)			Rotavirus
	Pneumococcal		Meningococcal B		COVID			
Other (spe	ecify):							
	of a serious accident or eme lways ensure that the school					n wi	II als	o be called so

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N: FINANCIAL ARRANGEMENTS
Person Responsible for School Fees:
Relationship to Student:
Postal Address:
Guarantee: I, the person/organisational officer responsible for payment of school fees and attendance dues, undertake to pay all amounts on or before the due dates.
Signed: Date:
O: The Burness of the Brivesy Act. 102
O: The Purpose of the Privacy Act, 193  I hereby acknowledge:
<ul> <li>The information in this enrolment application has been provided voluntarily.</li> <li>The LAC School Board is collecting the information to provide a database of information relating to the future education, guidance, monitoring and reporting of students' progress and pastoral care. In an emergency, at the discretion of the Principal, information from the file could be given to an agency such as the police or a doctor.</li> <li>The information collected may be used for a variety of statistical and research purposes, while ensuring that no individual can be identified.</li> </ul>
P: College Donation
The College donation helps cover shortfalls in government funding to cover such items as class materials, computer technology, library books, sports, and cultural equipment, or any such purpose as may be approved by the LAC School Board
Donation tax credits can be claimed from the Inland Revenue Department. You can find out more about this, and apply, by visiting the page about donations on the IRD's website.
The School is very appreciative of the support from families who pay the School donation.
Q: Student Undertaking
I request that I be admitted to Longburn Adventist College.
I agree to abide by the Longburn Adventist College's Digital Integrity Agreement, outlining the student's rights and responsibilities regarding the use of IT.
I have read the Digital Integrity Agreement and Behavioural Expectations as set out in the Student Handbook and I will always abide by these.

### R. Parent/Guardian/Authorised Primary Duty of Care Undertaking

**I/We hereby** undertake with the Longburn Adventist College Board of Trustees to observe the conditions and expectations as outlined in the enrolment documentation, so far as they affect me, and the student enrolled.

Date:

I/We agree to uphold and abide by the School standards and behavioural expectations as set out in the Student Handbook.

Signature:

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**I/We agree** to abide by the Longburn Adventist College's responsible use of the Digital Integrity Agreement, outlining the students' rights and responsibilities regarding the use of IT. A copy of this agreement Is included in the Enrolment Information booklet and must be read by students/caregivers.

**I/We agree** to pay contributions towards activities, trips, sports, subject consumables where appropriate, co-curricular activities and other events.

**I/We consent** to my son/daughter's photograph or schoolwork being used for publicity material (e.g., on our prospectus, or website, or in displays).

**I/We agree** to use (including disclosure) of the above information by the staff of the college for any purpose related to the education and well-being of the student concerned.

I/We give permission for you to contact previous school(s) for further information required.

**I/We declare** that the information provided on this enrolment application is true and correct.

Parent/Guardian/Authorised	Data
Primary Duty of Care Signature:	Date:

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### **Digital Integrity Agreement**

Students are encouraged to bring digital device/s for educational and learning purposes. All devices need to remain in silent mode or switched off, if not in use for a specific educational and learning purpose, as instructed by the classroom teacher.

- The recommended primary device is a Chromebook or better. Minimum specifications are not required; however, students will be required to bring a device with a physical keyboard.
- Students must have active antivirus software, if using a Windows computer, with all the latest operating system patches. Devices may be blocked from accessing the LAC network if this is not met (IT Manager is happy to provide some support in regard to this).
- Devices need to come to school each day <u>fully</u> charged.
- Students need to have their own insurance coverage for damages and loss. It is highly recommended that physical protection (bag, impact-resistant casing, etc.) is used by students.
- For support with Digital Technologies, please contact the IT manager: <a href="mailto:itmanager@lac.school.nz">itmanager@lac.school.nz</a>
- If teachers suspect breaches of policy, they may audit student activity by logging on to their accounts.
- Trying to get around the school's security, i.e., hacking, by-passing, using proxies, etc. is forbidden.
- All device internet access must be through the LAC wireless. Creating wireless hotspots using personal cellular data and sharing it is forbidden.
- Students may not use mobile phones during class time without teacher permission or in an inappropriate manner. They are to be used for educational purposes only.

### Part 1: For Students

When I use Information Computer Technology (ICT), both at school and at home, I have responsibilities and rules to follow. I agree to:

- Be a safe user whenever and wherever I use that technology.
- Be responsible whenever and wherever I use technology and support others by being respectful in how I talk to and work with them and never write, or participate in, online bullying. This includes forwarding unhelpful messages or supporting others in harmful, inappropriate, or hurtful online behaviour.
- Respect LAC's cybersecurity system. This means that I will not hack, by-pass or use proxies.
- Use the LAC wireless only. I will not create wireless hotspots using personal cellular data and will not share these.

### When I am online or using any device, for any purpose at school, I agree to:

- Report to an adult if I feel unsafe or uncomfortable online, or see a friend being unsafe or being made to feel uncomfortable by others.
- Behave in the way outlined in this Longburn Adventist College's eLearning and Digital Citizen Agreement.
- Keep my device switched off and in my bag during class, except for specified learning purposes agreed to by the teacher of the lesson.
- Not give out my own or others' personal details including full names, telephone numbers, addresses, images, mobile numbers and email addresses.
- Protect my password.
- Never post or send derogatory comments about someone else using web-based, social-media or messaging. If I see this happening or if I am invited into any discussion like this, I will inform an adult.
- Use ICT technologies at school for learning, treating the equipment properly and not interfering with it or the work/data of another student.
- Not bring or download unauthorised programs or files.
- Not go looking for inappropriate, rude, or offensive sites.
- Get permission if I want to use information or pictures from a website, recognising that the content on the web is someone's property.
- Ensure that contributions are my own work and when copied and pasted from an online or another information source, that source will be acknowledged.
- Talk to my teacher or another adult if:
  - 1. I need help online.
  - I am not sure what I should be doing on the internet.
  - 3. I come across sites that are not suitable.
  - 4. Someone writes something I don't like or makes me, and my friends feel uncomfortable or asks me to provide information that I know is private.
  - 5. I feel that the welfare of other students at the school is being threatened.

### When taking video/images/sound recording using a camera, computer, or device I will:

- Only take photos and record sound or video during class when it is part of the learning in that lesson.
- Seek permission from individuals involved BEFORE taking photos, recording sound or videoing them (including teachers).
- Seek permission from individuals involved BEFORE publishing or sending photos, recorded sound or video to anyone else or to any online space.
- Let my teacher/s or parent/caregiver know before uploading or sending any content.

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### Part 2: The school's support for the responsible and ethical use of technology

Longburn Adventist College uses ICT as a tool to support and enhance learning and teaching. We see the internet and other digital technologies as valuable resources but acknowledge they must be used responsibly.

Your son/daughter has been asked to agree to use ICT responsibly at school. Parents/Caregivers should be aware that the nature of the internet means that full protection from inappropriate content cannot be guaranteed.

#### At Longburn Adventist College we:

- Have a cyber safe and responsible use programme across the school. We reinforce school values and behaviours when using technology and the internet.
- Encourage communication, collaboration and presentation using established technologies such as Google mail and Google Docs. All students at Longburn Adventist College have access to these tools.
- Provide a filtered/monitored internet service.
- Provide supervision and direction during internet activities and when using digital technologies for learning.
- Develop students' Information Literacy and Digital Literacy through in-class learning activities.
- Utilise mobile technologies for educational purpose, e.g., podcasts, photos from excursions and events.
- Work towards setting tasks that ask your son/daughter open questions to which they need to develop their own answer, i.e., not simply copying and pasting.
- Provide support to parents/caregivers to understand this agreement (e.g., language support)
- Provide support to parents/caregivers through information evenings.
- Appreciate input from home. You can make an appointment to discuss eLearning and your child.
   Please contact Reception to be directed to the appropriate person.

#### Part 3: Advice for parents /caregivers:

At school, digital technology is used to support learning and teaching. At home, however, they are often used differently. Not only are they resources for learning, but they are also increasingly used as a social tool to meet, play, and chat.

#### At home we recommend you:

- Make some time to sit with your son/daughter to find out how they are using the internet and who else is involved in any online activities.
- Ask your son/daughter to give you a tour of their work and online spaces. If they are using a site that allows them to chat, publish photos, play games etc. ask to have a look. Their lac.school.nz Google account allows images to be uploaded and chat to take place.
- Always get your son/daughter to set online spaces to 'Private' if they use a social networking site like
  Facebook, etc. They are then in control of who contacts
  them and who can access their information. They can
  block anyone from seeing their information at any
  time
- Have the computer with internet access in a shared place in the house – we would recommend this not be your son/daughter's bedroom.
- Negotiate appropriate times for online activities and use of mobile phones.
  - 1. Ask questions when your son/daughter shows you what she/he is doing, e.g.: How does it work and how do you set it up?
  - 2. Can you block out people?
  - 3. Who else is sharing this space or game?
  - 4. Did you know them before, or did you 'meet' them online?
  - 5. What do you know about them?
  - 6. Why is this so enjoyable? What makes it fun? What are you learning? Can you show me how to do that?
  - 7. Can you see any risks or dangers in the activity?
  - 8. What would you say to warn/inform a younger person who was going to start to use the space?
  - 9. What are you doing to protect yourself or your friends from potential dangers?
  - 10. When and why would you inform an adult about an incident that has happened online that concerns you?

The Longburn Adventist College Digital Integrity Agreement applies to all students while on campus and also during all excursions, camps and co-curricular activities.

Terms and Conditions of this agreement may change with the latest copy accessible on the school website: https://www.lac.school.nz/digital\_integrity\_agreement