

Initialed by: _____(parent) _____(student)

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

NOTE: It 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:	Mrs	Miss	Ms	Mr	Dr	Occupation:
Family name:						Date of birth:
First name:				Relationship to student:		
Street address:						
Postal address:						
Home phone:						

Initialed by: _____(parent) _____(student)

Is the student currently on any medication? Yes No

If 'Yes', please provide details (attach more pages if required).

Please note: If you suffer from conditions

Has the student been convicted or been the subject of any matter before any Court?'

Yes No

If 'Yes', please provide details (attach more pages if required).

Does the student intend to apply, or has the student applied for a visa that would make them eligible for enrolment as a domestic student at a school in New Zealand?

Subject Preferences

We will create a provisional timetable for you based on your preferences below. There will be time to make changes to your timetable during your Orientation week at Nayland College. For further information on subjects available at Nayland College, please refer to our curriculum at https://nayland.schoolpoint.co.nz/courses/learning_areas

Please list your subject choices below. Nayland College will work hard to provide you with the subjects that you request. But please be aware you might not get your preferred options as some classes may be full. Entry to some courses is subject to availability and your English level. Students starting in terms 2, 3 and 4 may have limited choices due to classes being full or not running.

Year 9

All Year 9 students study the

Caregiver who is a supervisor for the Student while the Student



- (d) Any act by the Student during the Period of E

PARENTS' AND STUDENTS' DECLARATION AND AUTHORISATION

We declare that the information contained in this application is true and complete. We understand that any false or incomplete information submitted in support of this application may invalidate this application and may result in the withdrawal of an Offer of Place. We agree that we have received sufficient information to make an informed decision about enrolment at the School.

Key Terms: This Agreement includes provisions:

- (i) that allow the School to discipline the Student, including by termination of this contract and their enrolment, or to remove them from the School on health and welfare grounds;
- (ii) that control and limit the Student's rights of refund when Enrolment ends early;
- (iii) that require the Parents to make full disclosure of all relevant information including if they intend to change their enrolment status from international student to domestic student;
- (iv) that continue to apply to the Student after they turn 18; and
- (v) that provide consent for the School to permit certain activities without further agreement from the Parents;

This is an important legal document, please read all clauses carefully.

By signing this Agreement, you confirm that all of the information in the Application Form is true and complete.

SIGNING

Parents

By signing below, the Parents (as applicable) confirm that they have read the Agreement and agree to be bound by it in all respects: (please also initial each page of the Agreement, including the schedules)

Name: _____ Signature: _____

Name _____ Signature: _____

Date: _____

School

By signing below, the authorised signatory of the School confirms that they are authorised to sign on behalf of the School, and confirms that the School will be bound by the Agreement in all respects:

Name: _____ Signature: _____

Date: _____

Student

By signing below, the Student confirms they have read and understood the Agreement and agrees to abide by the Code, School Policies and (to the extent applicable) the Agreement: (please also initial each page of the Agreement, including the schedules)

Name: _____ Signature: _____

Date: _____

Initialed by: _____ (parent) _____ (student)



Refund Policy (Schedule Three)

Requests for a refund of international student fees

1. The School will consider all requests for a refund of international student fees. Requests should be made in writing to the School as soon as possible after the circumstances leading to a request. All refunds will be settled under the terms of this policy unless otherwise agreed by the School.

2. A request for a refund should provide the following information to the School:
 - a. The name of the Student;
 - b. The circumstances of the request;
 - c. The amount of refund requested;
 - d. The name of the person requesting the refund;
 - e. The name of the person who paid the fees;
 - f. The bank account details to receive any eligible refund

Initialed by: _____ (parent) _____ (student)



Outstanding activity fees or other fees

18. Any activity or other fees incurred by the Student during enrolment and owed to the School at the time of withdrawal, will be deducted from any eligible refund.

Refunds to be made to the country of receipt

19. Unless otherwise agreed in writing, all eligible refunds of fees of NZD\$1,000 or more received from outside of New Zealand will be refunded to a nominated bank account in the source country.

Rights of families after a decision regarding a refund has been made

20. A decision by the School relating to a request for a refund of fees will be provided to the student or Parent in writing and will set out the following information:
 - a. Factors considered when making the refund decision;
 - b. The total amount to be refunded; and
 - c. Details of non-refundable fees.
21. In the event the Student or the Parent is dissatisfied with a refund decision made by the School or is dissatisfied with the process the School followed when making the refund decision, they have the right to have the refund decision reviewed by the Study Complaints, Disputes Resolution Scheme.

Initialled by: _____ (parent) _____ (student)

PART THREE:

PLEASE COMPLETE THE INTERNATIONAL STUDENT ACCOMMODATION AGREEMENT ONLY IF THE STUDENT WILL BE LIVING IN A HOMESTAY WHILE ENROLLED AT THE SCHOOL.

INTERNATIONAL STUDENT ACCOMMODATION AGREEMENT

(When placing a student in a School Approved Homestay)

Terms and Conditions:

1. For the purpoTf1

Accommodation Requirements

(Schedule Four)

While living in a School approved Homestay, the Student agrees:

1. To comply with all laws of New Zealand.
2. Not to engage in any social or leisure activities that may place them or other persons, in undue danger or risk of harm. This includes the Student putting himself / herself in a position which may give rise to suspicions or allegations of such activities.
3. To obtain written permission from Parents and the School prior to obtaining any tattoo, piercing or other bodily embellishments.
4. To comply with all Homestay rules, expectations and curfews set by the School and Homestay parents, including any policies of the School which apply.
5. To not use or not do anything which may cause damage to the Accommodation, including applying hair dyes, or smoking cigarettes or engaging in any other activity that may cause damage to the Accommodation.
6. To keep the Homestay parents informed of their whereabouts at all times.
7. To stay at the Homestay residence daily and not to stay overnight at any other residence or location or travel overnight outside of the town or city (as defined by the School) where the student is living without prior written consent of the School. This clause shall not prevent the Student travelling between the Homestay and the School.
8. To respect the privacy, values and property of the Homestay.

SIGNING

Parents

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

Name: _____ Signature: _____

Name _____ Signature: _____

Date: _____

School

By signing below, the authorised signatory of the School confirms that they are authorised to sign on behalf of the School, and confirms that the School will be bound by the Agreement in all respects:

Name: _____ Signature: _____

Date: _____

Student

By signing below, the Student confirms they have read and understood the Agreement and agrees to abide by the Code, the School Policies and (to the extent applicable) the Agreement:

Name: _____ Signature: _____

Date: _____

Initialed by: _____ (parent) _____ (student)

