

Attach current passport-style photo here

International Student Application Form and Enrolment Agreement

| General Information | | | |
|---------------------------------------|---|------------------------------------|------|
| Year of proposed entry into Sacr | ed Heart College: 20 | Term: 1 / 2 / 3 / 4 (please circle | one) |
| Year 7 (Age 11-12) | Year 8 (Age 12-13) | | |
| Year 9 (Age 13-14) | Year 10 (Age 14-15) | _ | |
| Year 11 (Age 15-16) | Year 12 (Age 16-17) | Year 13 (Age 17-18) | |
| Student Information | | | |
| Family (Surname) Name: | | | |
| Christian (First) Name: | | | |
| Preferred Name: | | | |
| Nationality: | | | |
| Date of Birth: | Passport No: . | | |
| First Language: | | | |
| Student Email: | | | |
| Family Information | | | |
| | | | |
| | | | |
| | | | |
| Work Phone No: | Mobile Phone | No: | |
| Email: | | | |
| Occupation: | | | |
| Father's Full Name: | | | |
| Home Address: | | | |
| | | | |
| Work Phone No: | Mobile Phone | No: | |
| Email: | | | |
| Occupation: | | | |
| Do the student's parents speak or rea | d English? Yes | No | |
| Religion | | | |
| | d welcomes International Students of all er. | | |
| Your religion: | | | |
| If Catholic, your Parish: | | | |
| Date of First Communion: | Data of Confirm | mation: | |



| Stı | udent Educational Information | | | | |
|------|---|--|--|--|--|
| Nan | ne of last school attended: | | | | |
| Cou | untry: | | | | |
| Year | r level: Length of time at last school: | | | | |
| Subj | ects studied in final year at last school: | | | | |
| Favo | purite subjects: | | | | |
| Engl | ish-speaking ability (please tick one): | | | | |
| Spo | rts interests: | | | | |
| Mus | sic interests: | | | | |
| Plan | ned future course of study at tertiary level: | | | | |
| Plan | ned future career: | | | | |
| Any | ecial Learning Requirements learning or behavioural difficulties which enable us to better meet the needs of individual students must be losed with this application: | | | | |
| | | | | | |
| Doe | s your son currently receive any special learning assistance? Yes No s, please indicate and supply current reports that relate to learning and behavioural difficulties: | | | | |
| Inc | surance | | | | |
| Trav | rel insurance is compulsory for International Students in New Zealand. se tick one of the following options only: | | | | |
| | I would like the College to arrange travel insurance on my behalf and bill me for this together with school fees. | | | | |
| _ | If you have selected this option, please provide the following information to assist us in issuing a policy: | | | | |
| | 1. Do you have a pre-existing condition? | | | | |
| | 2. If yes, do you wish to apply for assessment for cover for the pre-existing condition? | | | | |
| | 3. Do you wish to specify individual high value items (more than \$2500 for electronics or \$2000 for other items) for cover at a higher premium rate? Yes No | | | | |
| | I have not yet taken out travel insurance, but agree to do so and will provide proof of this to the school prior to first attendance. I understand my policy must be comprehensive and meet the standard of cover set by the College. | | | | |
| | I already have travel insurance and have included a copy of the policy certificate with this application. I confirm my policy is comprehensive and meets the standard of cover set by the College. | | | | |

| 8 | Accommodation in New Zealand Please tick one of the following options only: | | | | |
|----|--|--|--|--|--|
| | | | | | |
| | Hostel I wish to apply for the Sacred Heart College Hostel. | | | | |
| | Please complete 9A and Contract Form for Admission to Boarding . | | | | |
| | Homestay I require Sacred Heart College to help arrange a homestay. *Please complete the Homestay Application and Contract Form.* | | | | |
| | OR: Homestay will be arranged by my agent/guardian. | | | | |
| | Relatives \[\] I will be staying with relatives/family friends. Please complete 9B . | | | | |
| | Parent I will be staying with one or both of my parents at the following New Zealand address: | | | | |
| | | | | | |
| 9 | New Zealand Contact Person (Guardian) Details | | | | |
| 9A | If you are applying for a place in the Hostel, please complete this section. | | | | |
| | International Students who are accepted into the Sacred Heart College Hostel, regardless of their age at the time of enrolment, MUST have a New Zealand contact person acting as a guardian (not legal guardian). This is the person who is resident in New Zealand and provides support for the student while here. For International Students who live with homestay families, this is optional, but the College strongly suggests that you have a guardian in New Zealand to support you. | | | | |
| | Please tick one of the following options only: | | | | |
| | I would like Sacred Heart College to help arrange a New Zealand Contact Person acting as my son's guardian. I understand that I will be charged a guardianship fee. | | | | |
| | ☐ I have already arranged for a New Zealand Contact Person acting as my son's guardian, their details are recorded below: | | | | |
| | Full Name: | | | | |
| | Relationship to Student: | | | | |
| | Home Address: | | | | |
| | | | | | |
| | Postal Address (if different from above): | | | | |
| | | | | | |
| | Home Phone No: Business Phone No: | | | | |
| | Mobile Phone No: | | | | |
| | Email: | | | | |
| 98 | Designated Caregiver Information | | | | |
| | If you are intending to stay with relatives/friends, please complete this section. A Designated Caregiver must be a close family friend or relative. The accommodation must be approved by Sacred Heart College and a copy of the Designated Caregiver's visa and passport is required. A Police check will be carried out on all persons 18 years of age and over living in the Designated Caregiver's accommodation. | | | | |
| | Full Name: | | | | |
| | Relationship to Student: | | | | |
| | Address: | | | | |
| | | | | | |
| | Home Phone No: Business Phone No: | | | | |
| | Mobile Phone No: | | | | |

Email:

International Application for Admission

| | (Name of Designated Caregiver) |
|--|--|
| to provide accommodation for my/our son to | o attend Sacred Heart College as an International Student from |
| or on the student's arrival at the College. I/V ensure the safety and welfare of my/our son regarding the welfare of the student, they ma | We understand that Sacred Heart College will make every endeavour to while studying at the College. Should the College have any concerns ay refer the matter to me for further action or refer the matter to the aland. Should this arrangement change, I/we undertake to inform |
| Print Name: Mr/Mrs | |
| Signed: | Date: |
| (Must be signed by the student's Father, M | |
| Where did you hear about S | acred Heart College? |
| Recommendation from an agent | Website |
| Recommendation from a student | An advertisement in a magazine or newspaper |
| An education fair | Other (please specify) |
| | |
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| | rrespondence and Reports |
| Directions for Accounts, Col Accounts, Correspondence and Reports sho | rrespondence and Reports |
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| Directions for Accounts, Con Accounts, Correspondence and Reports show Full Name: Email Address: Postal Address: Send copies to: Name: Email Address: Any special instructions: Airport Pick-up and Transfer Do you need Sacred Heart College to arrang | respondence and Reports uld be sent to: |
| Directions for Accounts, Con Accounts, Correspondence and Reports show Full Name: Email Address: Postal Address: Send copies to: Name: Email Address: Any special instructions: Airport Pick-up and Transfer Do you need Sacred Heart College to arrang Yes \(\square \) No | respondence and Reports uld be sent to: e airport greeting and transfer to your New Zealand accommodation? |
| Directions for Accounts, Con Accounts, Correspondence and Reports should be a substitute of the counts of the counts, Correspondence and Reports should be a substitute of the counts of | respondence and Reports uld be sent to: |



| Agent Details | |
|--|---|
| Agent Name: Phone No: | |
| Mobile Phone No: | |
| Email: | |
| Postal Address: | |
| T Ostal Address. | |
| Parents and Student's Declaration and A | Authorication |
| We declare that the information provided in this application or incomplete information submitted in support of this appli in the withdrawal or termination of an offer of enrolment. W undisclosed health/behavioural issues. | is true and complete. We understand that any false ication may invalidate this application and may resul |
| I/We have read, understood and agree to the terms and cor International Student Handbook for Enrolment, Policies, Gui the current International Student Fees and Refund Policy, an respects. We agree that we have received sufficient informa at the College. | idelines and Tuition Contractual Agreement; and and by signing below we agree to be bound by it in all |
| I/We confirm that we have been provided clear information enrolment, which are published on the school website and in | |
| I/We fully understand the conditions for terminating the En the International Student Handbook; | rolment Agreement outlined in Point 3 of Part Two i |
| I/We are fully aware of and understand the circumstances of of the Enrolment Agreement (including conduct that occurs supervision or control of the College, e.g. in SHC Hostel or a International Student Handbook; | s while the student is not under the immediate |
| 5. I/We are fully informed of and understand the type of disciplinary action that may be taken by the College against the student such as suspension, exclusion, or the termination of enrolment, which is outlined in Part Three in the International Student Handbook; | |
| I/We fully understand the procedure that the College must follow when undertaking disciplinary action ag the student, which is outlined in Part Three in the International Student Handbook. | |
| 8. I/we understand that in applying for enrolment to the Colleg any changes to immigration status will not confer entitleme the application of the College's Enrolment Scheme and Prefe Handbook and on the College Website. | nt to enrolment as a domestic student, due to |
| Note: The International Student Handbook forms part of this Agree | ement. |
| Student's Signature: | Date: |
| Father's Signature (Not agent or guardian): | Date: |

Mother's Signature (Not agent or guardian):



| Checklist | | | | |
|--|--|--|--|--|
| Your application will not be processed unless all information required is supplied. Please ensure you have: | | | | |
| Enclosed a copy of the student's Passport | | | | |
| Enclosed a copy of the most recent full school report, translated into English | | | | |
| Fully completed all sections of the Application Form | | | | |
| Fully completed and attached the Student's Health Record including vaccination history | | | | |
| Fully completed and attached the Digital Citizenship Contract | | | | |
| Included a self introduction from the student and a reference, in English | | | | |
| Included COPIES only - please do NOT send originals | | | | |
| Please send application to: | | | | |
| Director of International Students Sacred Heart College 250 West Tamaki Road, Glendowie Auckland 1071, New Zealand | | | | |
| Phone No: +64 9 529 3660, ext. 882 Fax No: +64 9 529 3661 Email: international@sacredheart.school.nz | | | | |
| www.sacredheart.school.nz | | | | |

Sacred Heart College

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