



John Paul II High School

Greymouth, New Zealand

APPLICATION TO ENROL AS AN INTERNATIONAL STUDENT

Verification
(Office use only)

Name of Student: _____ Date of Birth: _____
(Family Name) (First Name)

Preferred Name: _____ Ethnicity _____

Length of time International Student wishes to enrol for:

from ____/____/____ to ____/____/____

Year Level student wishes to enrol for: _____

Passport, student
visa and student
permit
photocopied

Will the student (named above) be living with a **parent** or **designated caregiver** or **homestay**?
(Please circle)

Details: i.e.
Passport verified
and photocopied

Details of the **Parent**: the International Student (named above) will reside with while attending **John Paul II High School**.

Name of Parent: _____ (Please Print Full Name)

New Zealand Address: _____

Phone: (03) _____ Mobile Phone: _____

Passport
Copied

Proof of
Residential Details

Name(s) and Contact details of **Parent(s) in home country** :

Name/s: _____

Address: _____

Phone: _____ Mobile Phone: _____

Details of the **Designated Caregiver** family (*if applicable*) the International Student (named above) will reside with while attending John Paul II High School

Name of Caregiver/s: _____

Address: _____

Phone: (0) _____ Mobile Phone: _____

<p>All International Students enrolled at John Paul II High School must be in good health and have Medical and Travel Insurance.</p> <p>Does the International Student (named above) have good health? <input type="checkbox"/> Yes <input type="checkbox"/> No Details if applicable : _____</p> <p>_____</p> <ul style="list-style-type: none"> • What type of Medical and Travel insurance does the student have for the duration of his/her time of study in New Zealand? <p>Type _____ Policy No: _____</p>	<p>Medical Insurance Details Checked and Photocopied. If purchased overseas, an English translation will be required.</p>
<p>John Paul II High School expects to be able to meet the learning needs of children enrolled at the school.</p> <ul style="list-style-type: none"> • What would the International Student want to achieve while attending John Paul II High School? <p>_____</p> <p>_____</p> <ul style="list-style-type: none"> • Does the International Student (named above) have any special learning or behavioural needs? <p style="text-align: center;"><input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Details if applicable: _____</p>	
<p>I have been informed about and received a summary of the Code of Practice for International Students:</p> <p style="text-align: center;"><input type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p>Copy of Summary Code</p>
<p>I have been informed of all costs involved with enrolment, the school's policies regarding fee protection and refunds, and the grievance procedures:</p> <p style="text-align: center;"><input type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p>Refund & Fees Protection Policies</p>
<p>I have received a copy of the school Prospectus and Policies relevant to International Students and have read and understood them:</p> <p style="text-align: center;"><input type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p>Prospectus Insert International Student Policy Complaints Policy</p>
<ul style="list-style-type: none"> • I have read, understood and accept the policies, rules and procedures regarding International Students at John Paul II High School and agree to abide by them. • I agree that all disputes will be dealt with in accordance with New Zealand law. • I confirm all the information contained in this application is true and correct to the best of my knowledge and belief. • I will inform the school if there are any changes to the details of this application. • I understand that the withholding of relevant information or the giving of false information may result in termination of enrolment. <p>Parent's Signature: _____ Date: _____</p>	

Homestay Accommodation: This involves living with a New Zealand family while you are attending school in New Zealand. You will have your own room and all your meals provided for you.

Do you require Homestay Accommodation? Yes No

If 'Yes', please complete the attached Homestay Application Form

Emergency Contact Details:

Name: _____

Address: _____

Phones: _____(work) _____ (home)

E-mail: _____ Mobile: _____

John Paul II High School agrees to provide tuition and pastoral care support (in accordance with the **Code of Practice for the Pastoral Care of International students**) for:

Name of International Student

For the period of: _____ commencing ____/____/____

Principal's Signature: _____ Date ____/____/____

on behalf of the Board of Trustees of John Paul II High School.

Seal:

Application approved

Copy of Signed Contract to Applicant



JOHN PAUL II HIGH SCHOOL - GREYMOUTH
Homestay Application/Placement Information

A. Student's Name:

Family Name: _____

Given Names: _____

Nationality: _____

Date of Birth: _____ Email: _____

Telephone: Day: _____ Night: _____

Fax: _____ Cell Phone: _____

B. Personal Details:

(Please tick) **YES** **NO**

Do you object to cats/dogs in your home?

Are you a vegetarian?

List any food you cannot eat?

Do you require any special foods?

(If 'yes', please write down what **special foods** you need)

Do you require any religious observances?

Do you object to small children in the house?

Do you have any allergies?

Do you prefer a smoke-free house?

DECLARATION:

I understand that I will be cared for in a New Zealand home and I agree to try to become a member of that home. I will let my host parents know where I am at all times, and will accept their advice and direction about study and travel around the town. I have read the conditions of homestay at John Paul II High School and I agree to act according to these guidelines.

Signed (Student): _____ Date: _____

Sighted (Home Stay Coordinator): _____ Date: _____