

PONSONBY INTERMEDIATE SCHOOL

Enrolment Form For International Students

Student Information:

Last Name:	First Names:	Preferred Name:	Gender:
Address:	Suburb:	City:	
Telephone No:	Fax No:	Email Address:	Date of Birth:

Designated Caregiver/Home-Stay Details:

Name:	Address:	Suburb:	City:
Telephone No:	Cell No:	Email No:	

Enrolment Information:

Passport No:	Date Student Permit Sighted/Applied:
Expiry Date Visa:	

Fees:

Amount Paid:
Please circle: Cash: Cheque: Eftpos: Other:

Agent Details:

Name of Agency:		
Last name:	First Name:	Preferred name:
Contact Details:	Telephone/Cell No:	Email No:

Medical Notes/Medication/Disability Information:

Permission for Panadol (Please circle):	No:	Yes:
Medication/Disabilities:		

Fee Requests and all correspondence to:

Name:	Address:	Suburb:	City:

Parents Address (in home country):

Name:	Address:	Suburb:	City:
Telephone/Cellphone No:		Email:	

Special Requirements:

Level of English:
ESOL Required:

<p>In terms of the Privacy Act, I understand that the information on this form is collected to form part of the essential information the school holds on my child. The records made from this information may be viewed on request at the school. I approve the forwarding of information when my child transfers to another school. I further approve the forwarding of my child's name and address on request to a potential intermediate or secondary school.</p>	<p>I understand that the school will take action on my behalf in case of sudden illness or injury, and I agree to abide by school policies.</p>
	<p>.....</p> <p>(Parents/Caregivers Signature)</p>