



BARADENE COLLEGE

of the Sacred Heart



International Student Enrolment Application Form

Please Attach a recent
passport sized
photograph here

PERSONAL DETAILS

Family Name: First Names:

English Name (if any) Date of Birth:

Nationality: First Language:

Home Country Address:

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Email Telephone:

NZ Address (if known):

..... Telephone:

E-Mail: Religion:

Date of Catholic Baptism: Place:

Date of First Catholic Communion / Confirmation Language/s you speak

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Place in family:

Cultural Interests, Sports, Hobbies:

Religion of Parents (Mother) (Father)

How did you find out about Baradene College?

NZ Embassy Friend

Agent name Other

PASSPORT DETAILS

Passport No: Country

Passport Issued On: Expires on:

Student Yes / No Expires on:

LANGUAGES

The language you speak at home? Other languages spoken?

How many years have you studied English?

Where did you study?

Language level: Beginner / Elementary / Intermediate /High Intermediate / Advanced

Do you wish to enter English school before high school? Yes / No. If yes, for weeks

Start Date: Finish Date:

Have you arranged a designated caregiver permanently resident in New Zealand? Yes/No

Please attach the Designated Caregiver Indemnity document giving responsibility for your daughter while she is in NZ to the designated caregiver

Do you carry full medical insurance that meets the Foreign Student requirements of the Ministry of Education of New Zealand? Yes / No

I / We, the undersigned, accept as conditions of enrolment that

1. The herein named student will participate in the general school programme that gives Baradene College its Special Character.
2. I understand that students baptised in the Catholic faith, have preference of enrolment.
3. We will promptly pay fees as set out in our account applicable to a full fee-paying student.
4. I have read and understood BARADENE COLLEGE Refund policy.
5. I agree to follow the school requirements about living arrangements for Baradene students:
NO flatting or hostel living; only approved homestays or other living arrangements agreed in writing by the Principal.
6. I agree to abide by New Zealand law and all school rules.

Signed by student: Date:

Signed by parent: Date:

INFORMATION PRIVACY

I agree to Baradene College of the Sacred Heart collecting personal information on

.....
(full name of student)

I have been advised by Baradene College of the Sacred Heart that the information I provide will be used for:

- o Student Records
- o Accounting purposes of the Baradene College Board of Trustees and the Baradene College Trust Board (Proprietors)
- o The Baradene College PTA Association
- o The Alumnae Association

I accept the fact that this information may later be used for statistical and/or research purposes and agree to its use for that purpose, provided that if the information is published in any way it will not identify me or the student concerned.

I understand that the information that I provide will be held at the offices of Baradene College whose address is 237 Victoria Ave, Remuera.

I am aware of the rights of access to, and correction of this information.

Signed _____ Date: _____
Individual/Parent/Designated Caregiver/Agent. Please delete those not applicable.

Post application to: Baradene College of the Sacred Heart, Private Bag 28906, Remuera, Auckland 1541 NEW ZEALAND	E-Mail: flister@baradene.school.nz
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