

Student Name: _____



Palmerston North Boys' High School

Established 1902

Year 9

Enrolment Forms

ENROLMENT CHECKLIST

Please make sure you have completed/included the following with your application for enrolment:

-
-
-
-
-
-
-
-
-
-

- (1) Enrolment Form (two sides)
- (2) Health Form (two sides)
- (3) Subject Choices Form
- (4) Network / Internet Acceptable Use Form
- (5) Authenticity Acknowledgement Form
- (6) Education Outside the Classroom Form
- Birth Certificate (if born in NZ)
- Proof of In-Zone Residence (i.e. power/phone account)
- Passport and Visa/Residency documents (if not a New Zealander)
- Sports Development Programme Form (if applicable)



Palmerston North Boys' High School Year 9 Student Enrolment Form

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(A) STUDENT'S DETAILS

Legal Surname:	Legal First Name(s):
Preferred Surname:	Preferred Name:
DOB: <i>(Please provide copy of birth certificate)</i>	Country of Birth:
Mail to whom: Mr/Miss/Ms/Mrs/Dr	
Address: <i>(physical)</i>	Postcode:
Address: <i>(postal if different to above)</i>	Postcode:
Home Phone:	Bus Route:
Current School:	Citizenship:
Eligibility: <i>(eg NZ Citizen, NZ Resident, Student Visa, Refugee, etc)</i>	
Club of previous sibling/father:	Name of sibling at PNBHS:

(B) PARENT / CAREGIVER DETAILS

	Parent/Caregiver (Female)	Parent/Caregiver (Male)	Other Custodial Parent/Caregiver
Full Name: Mr / Miss / Mrs / Ms / Dr			
Address: <i>(If different from above)</i>			
Home Phone:			
Work Phone:			
Mobile Phone:			
Occupation:			
Relationship to student:			
Preferred Email: <i>(For all school correspondence)</i>			
Emergency Contact: <i>(other than parent)</i>			
Relationship to Student:	Phone:	Mobile:	
Are there any custodial issues relating to your son that the school should be aware of ? If yes, please provide information in the space below.			Yes / No
Please note: any restrictions on access or communication with, or by a parent, MUST be supported by a court order.			

Student Enrolment Form

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(C) ETHNICITY

It is important that this section is completed

Country of Birth	Date of Entry into NZ (If Applicable)	Language/s Spoken at Home (If Applicable)	
<i>(you can choose up to three, please write 1,2,3 in order of preference below)</i>			
<i>If student was not born in NZ, please provide a copy of passport or other documentation verifying residency status.</i>			
<input type="checkbox"/> NZ European	<input type="checkbox"/> Tokelauan	<input type="checkbox"/> Other Pacific Peoples	<input type="checkbox"/> Chinese
<input type="checkbox"/> Māori*	<input type="checkbox"/> Tongan	<input type="checkbox"/> British / Irish	<input type="checkbox"/> Other European
<input type="checkbox"/> Australian	<input type="checkbox"/> Samoan	<input type="checkbox"/> Indian	<input type="checkbox"/> Middle Eastern
<input type="checkbox"/> Cook Island Māori	<input type="checkbox"/> Fijian	<input type="checkbox"/> Korean	<input type="checkbox"/> Other Asian
Other Ethnicity: <i>(please specify)</i>			
<i>*If the student is of NZ Māori descent, please enter the name(s) of his Iwi, you may enter up to three.</i>			
Iwi: 1.	2.	3.	

Please tick the relevant boxes below.

- Living in Zone
(Proof of residence attached)
- Living out of Zone
- College House

In the event a ballot is required, please tick one of the boxes below.

- Sibling of a student at the school
- Sibling of a former student of the school
- Child of a former student of the school
- Son of BOT employee or a child of a member of the Board of the school
- Other

I declare that the information provided is true and correct in every respect.

Name of Parent/Guardian _____

I also confirm that my son and I have read and we understand the Fundamental School Rules and the Basic School Rules and I accept that he will be expected to comply with these regulations.

_____ Dated this _____ day of _____ 20____

Signature of Parent/Guardian

THE PRIVACY ACT

Information on this enrolment form will be used by teaching and office staff within the school while the student is at this school.

Information will be passed on to the New Zealand Qualifications Authority and is required by law to be forwarded to the Ministry of Social Development.

This form will be retained by the school once the student has left the school.



Palmerston North Boys' High School Confidential Health Profile

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Please note that this information is also used for any Education Outside The Classroom activities and so some questions relate specifically to the activities.

Student's Name: _____ **Date of Birth:** _____

Parent's / Guardian Name: _____ (Please Print)

Relationship to Student: _____

Parent's / Guardian Address: _____

Phone: **Day:** _____ **Night:** _____ **Mobile:** _____

If we are unable to reach you could you please supply us with a name and phone number of an alternative contact person.

Name: _____ **Relationship to Son:** _____

Phone: **Day:** _____ **Night:** _____ **Mobile:** _____

Doctor: _____ **Phone:** _____

Do any of the following apply to your son? (Please tick appropriate)	Suffers From	Yes No		Has Allergies to	Yes No	
		Yes	No		Yes	No
	Dizzy Spells	<input type="checkbox"/>	<input type="checkbox"/>	Penicillin	<input type="checkbox"/>	<input type="checkbox"/>
	Blackouts	<input type="checkbox"/>	<input type="checkbox"/>	Drugs	<input type="checkbox"/>	<input type="checkbox"/>
	Fits of any type	<input type="checkbox"/>	<input type="checkbox"/>	Any foods	<input type="checkbox"/>	<input type="checkbox"/>
	Travel Sickness	<input type="checkbox"/>	<input type="checkbox"/>	Wasp/Bee stings	<input type="checkbox"/>	<input type="checkbox"/>
	Migraine	<input type="checkbox"/>	<input type="checkbox"/>	Other (specify)	<input type="checkbox"/>	<input type="checkbox"/>
	Asthma	<input type="checkbox"/>	<input type="checkbox"/>			
	Heart Condition	<input type="checkbox"/>	<input type="checkbox"/>			
	Diabetes	<input type="checkbox"/>	<input type="checkbox"/>			

Other Conditions: _____

Previous Injury of Severe Nature: _____

Year 7 Immunisations: Yes No

Current Tetanus Injection: Yes No

If you have ticked any of the boxes "Yes" please give relevant details of the condition.

Name of Condition: _____

Symptoms: _____

Medication Carried: _____

Treatment/Care Required: _____

Name of Condition: _____

Symptoms: _____

Medication Carried: _____

Treatment/Care Required: _____

Are there common medications such as Paracetamol, Panadol, Ibuprofen or Antihistamine that your son CANNOT be given? **Yes** **No**

If Yes, please list: _____

Is there any information the school should know to ensure the physical and emotional safety of your son? (For example, cultural practices, disability, anxiety about heights/darkness/small spaces, behaviour or emotional problems) **Yes** **No**

If Yes, please state or attach the information: _____

Parent's Agreement: In relation to EOTC activities, specifically camps, trips:

- I will ensure that prescribed medication is clearly labelled with instructions on its administration.
- I will inform the school as soon as possible of any changes in the medical or other circumstances between now and the commencement of the event.
- I agree to my son receiving any emergency medical, dentist, or surgical treatment, including anaesthetic or blood transfusion, as considered necessary by the medical authorities present.
- Any medical costs not covered by ACC or a community service card will be paid by me.

I authorise the obtaining of medical assistance if, in the opinion of the staff, such action is necessary.

Signature of Parent/Guardian: _____ Date: _____



Palmerston North Boys' High School Year 9 Subject Choices

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Name: _____

PLEASE NOTE THE FOLLOWING:

Category A: COMPULSORY SUBJECTS

English, Mathematics, Science, Social Studies, Physical Education, Drama and Information Communication Technology are compulsory subjects at Year 9.

Category B: OPTION SUBJECTS (listed below)

Students in the first six streamed classes are required to do a language or music for a full year. They will do two half-year options in addition to this.

Students in the remaining streamed classes will do three half-year option subjects.

Please refer to Chapter 2 (Year 9 Course Outline) to help you make your selections.

OPTION CHOICES

Category A:

Select ONE subject from this category. (Please tick box)

- | | | | |
|--------------------------------------|-----------------------------------|---------------------------------------|---|
| <input type="checkbox"/> French | <input type="checkbox"/> German | <input type="checkbox"/> Te Reo Māori | <input type="checkbox"/> English Language Tuition |
| <input type="checkbox"/> Visual Arts | <input type="checkbox"/> Japanese | <input type="checkbox"/> Music | <input type="checkbox"/> English Enrichment |

Category B:

Select ONE subject from this category. (Please tick box)

- | | | |
|---|--|--|
| <input type="checkbox"/> Business Studies | <input type="checkbox"/> Horticulture | <input type="checkbox"/> Design & Visual Communication |
| <input type="checkbox"/> Workshop Metal | <input type="checkbox"/> Workshop Wood | |

Category C:

Select THREE **other** subjects in order of preference, by placing the numbers 1, 2 and 3, in the respective boxes. Note: 1 = first preference. (If an option has already been selected in Category A or B do not select it again in Category C).

- | | | | |
|--|--------------------------------------|---|---|
| <input type="checkbox"/> French | <input type="checkbox"/> German | <input type="checkbox"/> Te Reo Māori | <input type="checkbox"/> English Language Tuition |
| <input type="checkbox"/> Japanese | <input type="checkbox"/> Visual Arts | <input type="checkbox"/> Business Studies | <input type="checkbox"/> English Enrichment |
| <input type="checkbox"/> Horticulture | <input type="checkbox"/> Music | <input type="checkbox"/> Workshop Metal | <input type="checkbox"/> Workshop Wood |
| <input type="checkbox"/> Design & Visual Communication | | | |

(Where possible the 1st preference will be allocated but this is limited to maximum class sizes).

If you have not selected a language or music, please select one in the event you are placed in one of the first six streamed classes. (Please tick box).

- | | | |
|-----------------------------------|---------------------------------|---------------------------------------|
| <input type="checkbox"/> French | <input type="checkbox"/> German | <input type="checkbox"/> Te Reo Māori |
| <input type="checkbox"/> Japanese | <input type="checkbox"/> Music | |



Palmerston North Boys' High School

Acceptable Use Policy

The following are guidelines provided to establish the responsibilities of anyone using the school's computers, media, computer network and/or Internet access.

Terms and Conditions

I. ACCEPTABLE USE:

The purpose of the School's network connections are to support research and instruction, or the business of conducting education, by providing access to unique resources and opportunities for collaborative work. The use of a computer account must be in support of education and research, or the business of conducting education, consistent with the educational objectives of the School. Personal use of School assets and/or network is authorised, but must not interfere with regular business and must be in accordance with the rules included in this policy. Additionally, use of other organisations' networks or computing resources must comply with rules appropriate for that network. Transmission of any material in violation of any New Zealand law is prohibited. This includes, but is not limited to: copyrighted material, threatening or obscene material or material protected by trade secret. Use for any non-educational purpose or commercial activity by any individual or organisation, regardless of for-profit or not-for-profit status without the approval of the School is not acceptable.

II. PRIVILEGES:

The use of network accounts is a privilege, not a right; therefore, inappropriate use may result in a cancellation of those privileges. The Rector will deem what is inappropriate use. The decision of the Rector is final. The system administrator may however, close an account at any time.

III. NETWORK ETIQUETTE and PROTOCOLS:

The use of an account on the School network requires that you abide by accepted rules of network etiquette, which include, but are not limited to, the following:

1. **BE POLITE:** Do not send abusive messages to ANYONE.
2. **APPROPRIATE LANGUAGE:** In all messages, do not swear, use vulgarities or any other inappropriate language.
3. **APPROPRIATE ACTIVITIES:** Anything pertaining to illegal activities is strictly forbidden. Any activity not directly related to the educational mission of the School is strictly forbidden. Activities relating to, or in support of, illegal activities will be reported to appropriate authorities.
4. **PRIVACY:** Do not reveal the personal address or phone numbers of yourself or any persons. When sending electronic communications, do not reveal any unnecessary details or the names or details of other users. Passwords must be protected at all times. If you feel that your password has been compromised, notify the System Administrator immediately. All communications and information accessible via the network should be assumed public property. Although personal use of electronic mail is approved, it is not guaranteed to be private. Systems Administrators have access to and may, at any time, review the subject and content of electronic communications. Messages relating to, or in support of, unauthorised or illegal activities will be reported to appropriate authorities.
5. **CONNECTIVITY:** Do not use the network in such a way that would limit or disrupt the use of the network by others.
6. **SERVICES:** The School will not be responsible for any damages suffered including loss of data resulting from delays, non-deliveries, or service interruptions caused by negligence, errors or omissions. Use of information obtained via the network is at the user's risk. The School specifically denies any responsibility for the accuracy or quality of information obtained through its network services.
7. **SECURITY:** Security on any computer system is a high priority. If users can identify a security problem on any of the networks, they must notify a System Administrator either in person or via the network as soon as possible. Users must not demonstrate the problem to other users. Use of network accounts provided by

Acceptable Use Policy (cont)

the School are not transferable or assignable. Any user who knowingly allows another to use the account assigned to them will immediately lose their access privileges. Attempts to fraudulently log in on any network as a system administrator or another user will result in immediate cancellation of user privileges. Any user identified as a security risk, or having a history of problems with other computer systems, may be denied access to the network and other computer services.

8. **VANDALISM AND ELECTRONIC MISCHIEF:** Vandalism will result in cancellation of privileges. This includes, but is not limited to: electronic mischief, the uploading, creation or introduction of computer viruses, attempts to tamper with any programs, applications, files, etc.

IV. PRIVACY:

The System Administrator reserves the right to monitor, inspect, copy, review and store at any time and without prior notice any and all usage of the computer network and Internet access and any and all information transmitted or received in connection with such usage. All such information shall be and remain the property of the School and no user shall have any expectation of privacy regarding such materials. It may become necessary for the System Administrator to examine system accounting logs and other records to determine if privacy violations or other network unfriendly activities have occurred.

V. ADMINISTRATION OF ACCOUNTS:

The System Administrator reserves the right to limit or suspend access to the School network and/or Internet or to supersede portions of this Agreement as may be deemed necessary for the maintenance, safety, or security of the School computer system. The policy on administration of accounts is listed below.

1. The System Administrator reserves the right to suspend network access at any time to maintain the integrity of the network.
2. The System Administrator reserves the right to suspend access temporarily or permanently to any user who does not comply with the conditions set out in this document or for any reason deemed appropriate by the System Administrator to maintain the integrity of the network.
3. The System Administrator reserves the right to log Internet and e-mail use and to monitor system resources utilised by the user while respecting the privacy of user accounts.

VI. EMAIL STORAGE:

Email storage is strictly limited. Storage will be limited by deleting old messages when the size of the users mailbox, determined by the System Administrator, is reached or at any other time as deemed necessary by the System Administrator.

VII. DISCLAIMER:

The School makes no warranties of any kind, expressed or implied, for this service being provided and will not be responsible for any damages suffered, including loss of data resulting from delays, non-deliveries, misdeliveries, or service interruptions caused by negligence, errors or omissions. The School specifically denies any responsibility for the accuracy or quality of information obtained through the network services; use of any such information is at the user's risk.

The School shall not be responsible for any claims, losses, damages or costs of any kind suffered, directly or indirectly, by any user arising out of the user's use of its computer networks or the Internet under this Policy. By knowingly using the network and facilities, users are taking full responsibility for their agreeing to indemnify and hold the School that provides the computer and Internet access opportunity and all of its administrators harmless from any and all loss, costs, claims or damages resulting from the user's access to its computer network and the Internet, including but not limited to any fees or charges incurred through purchases of goods or services by the user. The user agrees to cooperate with the School in the event of the School's initiating an investigation of a user's use of his or her access to its computer network and the Internet, whether that use is on a School computer or on another's outside the School's network.

It is the responsibility of the user that data is regularly backed-up on the user's own media.



Palmerston North Boys' High School Network / Internet Acceptable Use

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Student's Agreement:

(every student, regardless of age, must read and sign below)

I have read, understand and agree to abide by the terms of the aforementioned Acceptable Use Policy and Agreement. Should I commit any violation or in any way misuse my access to the Palmerston North Boys' High School computer network and the Internet, I understand and agree that my access privilege may be revoked and School disciplinary action may be taken against me.

Name (Print clearly): _____ Home phone: _____

User signature: _____ Date: _____

Address: _____

User (place a in the correct box): I am 18 or older I am under 18

If I am signing this Policy and Agreement when I am under 18, I understand that when I turn 18, this Policy and Agreement will continue to be in full force and effect and agree to abide by this Policy and Agreement.

Parent or Guardian Network Usage Agreement:

(to be read and signed by parents or guardians of students who are under 18)

Should you wish to have a copy of this agreement please inform the school office.

As the parent or legal guardian of this student, I have read, understand and agree that my child or ward shall comply with the terms of the School's Acceptable Use Policy and Agreement for the student's access to the School's computer network and the Internet. I understand that access is being provided to the students for educational purposes only. However, I also understand that it is impossible for the School to restrict access to all offensive and controversial materials and understand my child's or ward's responsibility for abiding by the Policy and Agreement. I am therefore signing this Policy and Agreement and agree to indemnify and hold harmless the School and its Staff that provides the opportunity for computer network and Internet access against all claims, damages, losses and costs, of whatever kind, that may result from my child's or ward's use of his access to such networks or his violation of the aforementioned Policy and Agreement. Further, I accept full responsibility for supervision of my child's or ward's use of his access account if and when such access is not in the School setting. I hereby give permission for my child or ward to use his provided account to access the School's computer network and the Internet.

Parent/Guardian Name: _____ Phone: _____

(Please print clearly)

Signature: _____ Date: _____

Address: _____



Palmerston North Boys' High School Authenticity Acknowledgement Form

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Dear Parents

An increasing amount of student work is being internally assessed at all levels throughout the school across all subject areas.

Students and parents need to be aware that the work that students produce and submit for NZQA or any assessment must be their own.

Sources of information must also be acknowledged appropriately where necessary. In an age of increasing technological advancement it is particularly essential that we ensure that student work is indeed their own.

We would ask that parents discuss with their sons the importance of producing their own work. The consequences for attempting to plagiarise (pass the work of others off as your own) the work of others are serious. Work found to be the result of cheating would return a zero mark or grade. This can in turn affect a student's overall result in specific assignments, achievement standards and full courses.

Similarly, students who directly assist or provide material for other students to refer to / copy and submit for assessment will have their own work ruled ineligible for credit.

Authenticity Acknowledgement Form

This form is valid for the duration of your time at PNBHS

Name: _____

I acknowledge that all work that I produce and submit for assessment purposes must be my own work and that I will indicate and acknowledge other sources when and where necessary.

Furthermore, I will not provide information in any form which will directly benefit another student.

Student Signature: _____

Parent Signature: _____

Date: _____



Palmerston North Boys' High School Education Outside the Classroom Form

6

Palmerston North Boys' High School has a strong commitment to providing students with a range of educational, sporting and cultural experiences and opportunities. In some subjects short field trips away from the school site take place to enhance the overall learning experience. This Education Outside the Classroom includes those occasions when as part of their school-wide programme, students visit places in the local Palmerston North area.

On these occasions students are exposed to risks that do not exist in the controlled environment of the school. It is the teacher's responsibility to manage these risks and take whatever steps are necessary to minimise exposure to them. It is not possible to reduce any risk to zero.

It is essential that all students on field trips/sports trips/Shand Shield activities/sports practices and all sporting/cultural trips that occur at anytime while under the authority of the school play their part in risk management. Their personal safety is also their responsibility and they must act always in a manner that does not endanger either themselves or others. It is important that they follow their teacher's instructions at all times.

When school trips extend beyond the normal school day, are overnight or involve risks that are greater than those encountered in everyday life, you will be informed of this and asked to complete a specific permission slip.

Where school activities incur significant cost you will be informed of the details and all costs need to be paid in full by the due date.

EOTC Permission Form

This form is valid for the duration of your time at PNBHS

Name: _____

I give permission for my son to participate in field trips and all sporting/cultural trips that occur during normal school hours and understand that there are risks associated with such activities. My son understands that the fundamental school rules apply on these occasions, that he must take reasonable caution for his own safety, follow the instructions of staff, and at all times act in a way that ensures the safety of others. **I will inform the school of any changes to my son's health circumstances so that the school's records are up to date. I agree to make all necessary payments to the finance office by the due date.**

Parent or Legal Guardian Signature: _____

Date: _____