Please attach passport photo here



**Cullinane College**

**International Student Enrolment**

**Form 2019**

**15 Peat Street**

**Whanganui 4500**

**New Zealand Email:** [**office@cullinane.school.nz**](file:///\\DC1\Teachers\LPenn\International%20Students\2016\office@cullinane.school.nz)

**Mailing Address: PO Box 5017 Website:** [**www.cullinanecollege.school.nz**](http://www.cullinanecollege.school.nz/)

**Phone: 06 3490105**

***Please ensure that all the information is complete and correct. Failure to properly complete the form may result in a delay in processing.***

**Part One:** **PERSONAL INFORMATION**

Student Full Name: ……………………………………………………………………………………...

Birth Date: …………………………………….. Gender (*Please circle*): Male / Female

Home Country: ……………………………………… Home City: …………………………………

First Language: ………………………………… Address: …………………………………………..

**Passport/Visa Details:**

Passport Number: ……………………………….. Passport Expiry Date: ……………………………

Date of Entry into NZ: ………………………………..

Student Visa issue Date: ……………………… Student visa Expiry Date: …………………………

**Parent’s Names:**

Mother: ……………………………………….. Father: ……………………………………………

Address: ……………………………………….. Address: ………………………………………....

Home & work Phone: ………………………… Home & work Phone: ……………………………

Occupation: ………….……………………… Occupation: ……………………….……………

Mobile: ………………………………………… Mobile: …………………………………………

Email: ………………………………………… Email: …………………………………………

**Overseas Emergency Contact (Not in New Zealand):**

Name: ………………………………………………Relationship to student: …………………………

Phone number: ……………………………………. Mobile: …………………………………………...

Email: …………………………………………………………….

**Part Two:** **LIVING SITUATION IN YOUR HOME COUNTRY**

What type of home do you live in? (Apartment, House etc)…………………………………………….

Where is your home located? (City, Town, Countryside, etc) …………………………………………..

How do you get to school? (Walk Bus, Train, etc) ……………………………………………………..

Do you have any brothers or sisters? Yes / No (please circle)

If Yes please list their names and ages and indicate whether they live at home:

|  |  |  |  |
| --- | --- | --- | --- |
| **Name:** | **Age:** | **Male/Female:** | **Living at Home (Y/N)** |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

Who else lives in your home? (Mother, Father, Uncles, Aunts, Grandparents, etc)

|  |  |
| --- | --- |
| **Relationship to student** | **Name** |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |

Who usually looks after you? ……………………………………………………………………………

What work do your parents do? Mother …………………………………………………………

Father…………………………………………………………..

**Part Three:** **HOBBIES, INTERESTS, SPORTS**

What sports do you play? ((Please list your level of experience next to each sport – e.g. social player, school team, regional representative etc)

Sport: ………………………………….. Level of Experience: …………………………………

Sport: …………………………………. Level of Experience: …………………………………

Do you sing or play any musical instruments? (Please state how long you have been playing for next to each instrument)

Sing: Yes / No If Yes, how long for? ……………………………………………………

Instrument played: ……………………………….. How long for? ……………………………………..

Instrument played: ……………………………….. How long for? ……………………………………..

Instrument played: ……………………………….. How long for? ……………………………………..

Are you in a band or a choir? (If yes please state) ……………………………………………………....

What are your hobbies or Interests? (e.g. model trains, collecting stamps etc)

Are there any other sports or hobbies that you would like to be involved in while you are in New Zealand? (Please state):

……………………………………………………………………………………………………………

Do you have any other particular talents, dislikes or problems? ………………………………………..

……………………………………………………………………………………………………………

**Part Four: HEALTH INFORMATION (PARENTS TO COMPLETE)**

Does your child have any pre-existing medical conditions or concerns? **YES** **NO**

If Yes please state: ……………………………………………………………………………………….

Permission to administer pain killers: **YES** **NO**

New Zealand children are vaccinated against the following diseases. Please circle the ones your child has been vaccinated against:

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Whooping Cough** | **Diphtheria** | **Tuberculosis** | **Tetanus** | **Measles** |
| **Mumps** | **Rubella (German Measles)** | | **Polio** | **Hepatitis B** |

Does your child have any allergies/ (e.g. food allergies like peanuts or wheat, or medical allergies like

penicillin or bee stings): …………………………………………………………………………………

Does your child carry any medication for this allergy? …………………………………………………

Name any other medication your child requires: ……………………………………………………….

Has your child had or suffer of any of the following illnesses? (Please circle)

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Measles** | **Rubella** | **Chickenpox** | **Mumps** | **Polio** | **Malaria** |
| **Tuberculosis** | **Rheumatic fever** | **Meningitis** | **Hepatitis A or B** | **Heart conditions** | **Epilepsy** |
| **Asthma** | **Back/neck problems** | **Glandular Fever** | **Allergy to Bee/Wasp** | **Migraines** | **Diabetes** |

Are there any family medical conditions that we should know about to ensure the safety of your child?

(e.g. food allergies, bee sting allergies) ………………………………………………………………….

Does your child have any other special health or medical needs? ………………………………………

……………………………………………………………………………………………………………

Does your child have any psychological needs? (Circle) **YES NO**

If so please state: …………………………………………………………………………………………

……………………………………………………………………………………………………………

**Part Five: STUDY INFORMATION (PARENTS TO COMPLETE)**

Please attach your child’s most recent school reports. Reports attached – please tick

Does your child have any specific learning needs or difficulties that could affect their

progress? Yes / No

If yes please list: …………………………………………………………………………………………

Does your child have any behaviour issues? Yes / No

If yes please list: …………………………………………………………………………………………

………………………………………………………………………………………………………….

What is your estimate of your child’s level of English? (Please circle)

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Beginner** | **Elementary** | **Pre-Intermediate** | **Intermediate** | **Upper Intermediate** |

**Student to complete**

What are your favourite subjects at school? ……………………………………………………………..

What do you find the most challenging about school? …………………………………………………

What do you enjoy most about school? …………………………………………………………………

What are your dreams and ambitions? …………………………………………………………………..

What are you hoping for or looking forward to in your New Zealand School?

……………………………………………………………………………………………………………

What worries you about living and studying in New Zealand?

……………………………………………………………………………………………………………

………………………………………………………………………………………………………

**Part Six: OTHER INFORMATION**

Have you travelled to other countries before? (Please state which ones)

……………………………………………………………………………………………………………

Have you lived away from your family before? …………………………………………………………

What is your religion? …………………………………………………………………………………...

Do you need to attend church or another place of worship on a regular basis? (please circle) Yes / No

If yes please state which church …………………………………………………………………………

Do you plan to return home in the term holidays? (Please circle) Yes / No

Is there a particular part of your culture that is very important to you that we should know about?

……………………………………………………………………………………………………………

……………………………………………………………………………………………………………

……………………………………………………………………………………………………………

Are there are special items you plan to bring with you? ……………………………………………….

What is your favourite food? …………………………………………………………………………….

Is there any particular food that you cannot eat? ………………………………………………………...

Do you have any special dietary requirements (e.g. vegetarian, don’t eat chicken or pork etc)

……………………………………………………………………………………………………………

Is there any particular New Zealand food that you are looking forward to eating?

……………………………………………………………………………………………………………

**Medical and Travel Insurance are compulsory for all International Students while in New Zealand. I have attached the insurance policy**

**Yes No**

**If “No” please indicate and we will arrange medical insurance and invoice you**

**Parent/** **Legal Guardian: ……………………………………… Date: ……………………………**

**DECLARATION**

I ……………………………………………………… (student) have read and understood the conditions of being an international student at Cullinane College and agree to abide by the rules of the school:

1. The student’s parent guarantees the good behaviour of the student in New Zealand. He/she understands that behaviour which is unacceptable to the school (as outlined in the CODE OF CONDUCT or to homestay parents may lead to termination of the student’s enrolment at Cullinane College.

“Unacceptable behaviour” includes the abuse of alcohol and drugs, theft, physical violence, or any action that contravenes New Zealand law. In the event of such misbehaviour, any decision made by the Principal and / or Board of Trustees will be regarded as final.

2. The student’s parent accepts the right of the school to effect a change of course if this is seen to be in the best interests of the student.

3. The student’s parent has read and understood the Cullinane College Refunds Policy for International Students.

4. The student’s parent understands the student may not own or drive a vehicle whilst a student at Cullinane College.

5. The student’s parent agrees that the student should attempt to speak English at all times on campus and at his/her homestay.

6. The student’s parent agrees that their son/daughter should take part in at least two out-of-school activities each year, for example, music, speech or sport.

7. The student’s parent understands that the Principal, Director or Homestay Parents have the authority to make decisions regarding medical treatment for their son/daughter. The student’s parent understands that they will be informed immediately in the case of an urgent problem.

CODE:

Cullinane College has agreed to observe and be bound by the Code of Practice for the Pastoral Care of International Students published by the Ministry of Education. Copies of the Code are available on request from this institution or from the New Zealand Ministry of Education website at [www.minedu.govt.nz/goto/international](file:///\\DC1\Teachers\LPenn\International%20Students\2016\www.minedu.govt.nz\goto\international)

As an approved institution of the Code of Practice, Cullinane is also bound by the

Disputes Resolution Scheme (DRS) rules and bound by any decision made by the DRS operator, Fairway Resolution Ltd. Information about Fairway Resolution can be found online at [www.fairwayresolution.com/istudent-complaints](file:///\\DC1\Teachers\LPenn\International%20Students\2016\www.fairwayresolution.com\istudent-complaints)

Father’s Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Mother’s Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

If I am living in a homestay organised by Cullinane College. I agree to abide by the homestay rules and guidelines and to do my best to fit in with the lifestyle of my homestay family.

Student’s Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Note: Failure to disclose relevant information or the provision of false information may result in termination of enrolment.

Make sure all details on these forms are completed and signatures from the correct people are included.

**APPLICATION CHECKLIST**

Use this checklist to ensure all relevant material has been completed and attached to this application.

|  |  |
| --- | --- |
| **Request** | **Information Requested (all the documents below need to be send together)** |
| 1 | * International Student Enrolment Form ***completed*** |
| 2 | * Copy / email of Student Visa ( or email verifying that is in process) ***completed*** |
| 3 | * Passport photo attached to enrolment form ***checked*** |
| 4 | * Medical and travel insurance policy ***attached*** |
| 5 | * Medical certificate signed by a Doctor ***attached*** |
| 6 | * Student and Parent Contract ***Signed*** |
| 7 | * Passport Copy ***attached*** |
| 8 | * Copy of latest School Report ***attached*** |

**Please either post or scan and email your completed application with all documents requested to:**

**Director of International Students**

**Cullinane College**

**PO Box 5017**

**Whanganui**

**New Zealand**

**Or email to**

[office@cullinane.school.nz](file:///C:\Users\lpenn\Desktop\office@cullinane.school.nz)

[lpenn@cullinane.school.nz](mailto:lpenn@cullinane.school.nz)

[cengland@cullinane.school.nz](mailto:cengland@cullinane.school.nz)

**INFORMATION FOR 2019 - FEES AND DATES**

**2019 school terms and holidays**

**Start date**

**Term 1 - 11 weeks Between Monday 28 January (at the earliest); and Thursday 7 February (at the latest)**

**Term 2 - 10 weeks Monday 29 April**

**Term 3 - 10 weeks Monday 22 July**

**Term 4 - up to 10 weeks Monday 14 October**

Senior students usually sit National Examinations beginning to mid-November and are able to leave school after they have completed these.

International student entry to NCEA standards NZ $333.30 per year Incl. GST **NZ $383.30** per year

International student entry to Scholarship subjects NZ $88.87 per subject Incl. GST **NZ $102.20** per subject.

Tuition Fee: **NZ $12,250** per year

(or **NZ $3250** per ten-week term for shorter stay students.)

Includes up English classes and conversation classes.

Homestay: **NZ $240** per week

Calculated the year on 45 weeks **NZ $10,800**

Administration Fee: **NZ $650** per year

* Meet and greet the student at Wanganui airport
* Helping to arrange the homestay and set up bank accounts
* Orientation programme

The homestay fee does not cover the following:

* School uniform (maximum of **NZ** **$600**)
* Holidays away from the homestay, or holidays that involve extra expense for the homestay parents.
* Personal spending (between **NZ $50** and **NZ $70** per week). Parents may pay personal funds to the school and the school will set up a bank account whereby a set amount will be automatically paid into the student's account each week.
* Toll calls and internet charges