



**LEVIN INTERMEDIATE SCHOOL**  
**NEW ENROLMENT INFORMATION**

**STUDENT DETAILS**

Use full legal names, and then preferred names (but only if different):

Surname: \_\_\_\_\_

First Name: \_\_\_\_\_

Middle Name: \_\_\_\_\_

Preferred First Name: \_\_\_\_\_

Preferred Surname: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Male/Female

Ethnicity: \_\_\_\_\_

Iwi: \_\_\_\_\_

**Eligibility Document**

Please provide a copy of one of the following:

N.Z. Birth Certificate

Passport

NZ Citizenship Certificate

Previous School: \_\_\_\_\_

Current Doctor: \_\_\_\_\_

Medical Information: \_\_\_\_\_

Special Family Circumstances: *eg shared custody or custody/access issues; recent bereavements etc*

**CONTACT details of the adults the STUDENT LIVES WITH:**

Surname:

Surname:

First Name:

First Name:

Salutation: Mr / Mrs / Miss / Ms

Salutation: Mr / Mrs / Miss / Ms

Relationship to Student:

Relationship to Student:

Home Phone:

Home Phone:

Work Phone:

Work Phone:

Mobile Phone:

Mobile Phone:

Email Address:

(if you wish to receive school newsletters via email)

Email Address:

(if you wish to receive school newsletters via email)

Address:

Address:

Postcode:

Postcode:

**EMERGENCY CONTACT** (other than parents/caregivers named above and authorized to collect this student from school in the event of illness or an emergency)

Name: \_\_\_\_\_

Relationship to Student: \_\_\_\_\_

Phone No.: \_\_\_\_\_

Mobile Phone: \_\_\_\_\_

**School Use Only**

Start Date: \_\_\_ / \_\_\_ / \_\_\_

Year: 7 / 8

Room: \_\_\_\_\_

Enrolment No.: \_\_\_\_\_

Entered in Admin Reg

Entered in Assembly

Entered on ENROL

Card completed

Info requested:

\_\_\_ / \_\_\_ / \_\_\_

Info received:

\_\_\_ / \_\_\_ / \_\_\_

**P.T.O.**



**MODERN LEARNING ENVIRONMENT (MLE) CLASSROOM**

- I **would** like my child considered for a place in an MLE classroom in 2012
- I **would not** like my child considered for a place in an MLE classroom in 2012
- I **have no preference** whether my child is in an MLE classroom in 2012

**PARENT / CAREGIVER AUTHORISATION**  
**(Please tick the boxes to give your permission)**

- I give permission for my child to go on teacher supervised school activities outside the school boundaries, but within the Levin Town precinct, during school time. Any such activity will have been authorised by the school management. Any activities outside Levin will require specific parental consent on each occasion.
- I give permission for information relating to my child's education to be forwarded on request to the appropriate College.
- I give permission for photographs of my child to be used on our website and in school publications.

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

Principal's Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
(required to complete enrolment)

Welcome to Levin Intermediate

*TU TANGATA - STAND TALL*

Please post or deliver the Student Enrolment form to:

Levin Intermediate School  
Collingwood Street  
LEVIN 5510

Students currently attending **Levin North, Levin East and Levin Schools** may return their enrolment forms to their school office by **FRIDAY 4TH NOVEMBER 2011** for collection.