



International Student Application Form

Please attach a recent passport size photograph here

PLEASE WRITE CLEARLY AND IN BLOCK CAPITALS

Programme Information				
Year:	<input type="text"/>			
Start Date:	<input type="checkbox"/> Term 1 (Jan)	<input type="checkbox"/> Term 2 (April)	<input type="checkbox"/> Term 3 (July)	<input type="checkbox"/> Term 4 (Oct)
Duration:	<input type="checkbox"/> 1 Term	<input type="checkbox"/> 2 Terms	<input type="checkbox"/> 3 Terms	<input type="checkbox"/> 4 Terms
	<input type="checkbox"/> Other - please specify dates: _____			
Year Level:	<input type="checkbox"/> Year 10	<input type="checkbox"/> Year 11	<input type="checkbox"/> Year 12	<input type="checkbox"/> Year 13
Are you sitting NCEA (National Qualification)?			<input type="checkbox"/> Yes	<input type="checkbox"/> No
Is a Shuttle Pickup required from Auckland Airport to homestay family?			<input type="checkbox"/> Yes	<input type="checkbox"/> No

Agency Information (If applicable if you are using an Agent)	
Name of Agency:	Contact Person:
Agent's Address:	
	Postcode:
Agent's Phone Number:	Agent's Emergency No.:
Agent's Email Address:	

Applicant	
Student's Last Name (as on passport):	
Student's First Name/s (as on passport):	
Preferred to be known as:	
Date of Birth:	Gender: <input type="checkbox"/> Female <input type="checkbox"/> Male
Country of Birth:	Nationality:
Student's Email:	
Please provide us with a copy of your passport (personal details page)	
Passport Number:	
Passport Expiry Date:	Country of Issue:

Details of Parents

MOTHERS DETAILS	FATHERS DETAILS
Last Name:	Last Name:
First Name:	First Name:
Address:	Address:
Occupation:	Occupation:
Home Phone Number:	Home Phone Number:
Mobile Number:	Mobile Number:
Work Phone Number:	Work Phone Number:
Mother's Email Address:	
Father's Email Address:	
Are you living with:	<input type="checkbox"/> Both parents <input type="checkbox"/> Mother only <input type="checkbox"/> Father only: <input type="checkbox"/> Other:
If you are NOT living with both parents, who is your legal guardian?	<input type="checkbox"/> Father only <input type="checkbox"/> Mother only <input type="checkbox"/> Other
What is your first language?	
Other languages spoken by you:	
Number of Years of studying English:	
Have you studied in a NZ before? If so, Where:	
Do your parents speak English?	<input type="checkbox"/> Both speak English <input type="checkbox"/> Neither speaks English
	<input type="checkbox"/> Only mother speaks English <input type="checkbox"/> Only father speaks English

Emergency Contact

Please name a relative or friend of your family whom we can contact should we fail to contact your own family in emergency situations.
Emergency Contact's Name:
Emergency Contact's Mobile Number:
Emergency Contact's Email Address:

Insurance Details

Insurance is compulsory for International Students. If you wish to purchase insurance through Te Puke High School we highly recommend Southern Cross (www.southerncross.co.nz) or Unicare (www.uni-care.org). If you purchase your own insurance in your home country we must have a copy of the policy in English.
Do you wish to purchase insurance from Southern Cross through TPHS? <input type="checkbox"/> Yes <input type="checkbox"/> No
If you are purchasing your own Insurance, please provide the following information:
Name of Insurance Provider:
Insurance Policy Number: Insurance Expiry Date:

New Zealand Contact (if applicable)	
Name of Contact Person:	
Address (in New Zealand):	
Telephone Number:	Fax Number:
Email Address:	Mobile Number:
Relationship to the student: <input type="checkbox"/> Parent <input type="checkbox"/> Family Friend <input type="checkbox"/> Relative (please state):	

Medical Details	
Please answer the following questions so that we have a record of any health concerns. If you suffer from a medical condition, it is advisable to bring your own medication to New Zealand. As part of signing this application I give permission for Te Puke High School to contact my doctor if further information is required, or in the case of an emergency. Please note this includes calling an ambulance in an emergency situation and being prescribed over the counter medications (which are suitable) by the certified school nurses when needed ie paracetamol, etc. Moreover, if you have a medical condition we will supply this information to local doctors. Relevant health information is given to the homestay parents. Omitting medical information is a breach of the Contract and can result in your programme participation being jeopardised. Please attach any relevant medical notes.	
Immunisation : Please provide a copy of your WHO immunization record. <input type="checkbox"/> Attached to application	
Immunisations / Vaccinations (tick immunisations received):	
<input type="checkbox"/> Diptheria <input type="checkbox"/> Measles <input type="checkbox"/> Pertusis <input type="checkbox"/> Tuberculosis <input type="checkbox"/> HIB <input type="checkbox"/> Hepatitis <input type="checkbox"/> Mumps <input type="checkbox"/> Polio <input type="checkbox"/> Rubella <input type="checkbox"/> Tetanus <input type="checkbox"/> Other:	
Do you smoke? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Detail any medical problems, allergies, conditions or medication being taken:	
Detail any special medical or learning needs:	
Name of Family Doctor:	
Telephone Number:	Fax Number:
Email Address:	

Accommodation Requirements		
I will be living with my parents:	<input type="checkbox"/> Yes	<input type="checkbox"/> No
I wish to organise my own accommodation, If YES, Please complete the “ DESIGNATED CARE GIVER ” Section below.	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Do you require Te Puke High School to arrange your homestay family? If YES, Please complete the “ HOMESTAY FAMILY PLACEMENT PROFILE ” Section below	<input type="checkbox"/> Yes	<input type="checkbox"/> No

Designated Care Giver (if applicable)	
Name of Contact Person:	
Address (in New Zealand):	
Telephone Number:	Fax Number:
Email Address:	Mobile Number:
Relationship to the student: <input type="checkbox"/> Family Friend <input type="checkbox"/> Relative (please state):	

HOMESTAY FAMILY PLACEMENT PROFILE : TE PUKE HIGH SCHOOL

Homestay Information and Student Information

Each of our students is placed with a local family and becomes a family member for the duration of their stay. This gives the security of a family for support, and greater exposure to cultures and customs in New Zealand. We visit and assess homestays as being suitable for students. To help us select a suitable homestay for you, please supply us with the following details. Please note that we cannot guarantee to meet all your requirements.

This information will be passed on to your homestay family.

Last Name:	
First Name/s:	
Preferred to be known as:	
Home Address:	
Date of Birth:	Gender: <input type="checkbox"/> Female <input type="checkbox"/> Male
Country of Birth:	Nationality:
Religion:	Height: <input type="text"/> Weight: <input type="text"/>
Home Phone Number:	1st Language: <input type="text"/>
Email:	2nd Language: <input type="text"/>
Are you living with: <input type="checkbox"/> Both parents <input type="checkbox"/> Mother only <input type="checkbox"/> Father only <input type="checkbox"/> Other:	
Do you have siblings? <input type="checkbox"/> No <input type="checkbox"/> Yes - please list them	
Name: <input type="text"/>	Age: <input type="checkbox"/> Brother <input type="checkbox"/> Sister
Name: <input type="text"/>	Age: <input type="checkbox"/> Brother <input type="checkbox"/> Sister
Name: <input type="text"/>	Age: <input type="checkbox"/> Brother <input type="checkbox"/> Sister
Name: <input type="text"/>	Age: <input type="checkbox"/> Brother <input type="checkbox"/> Sister
Which other family members live with you in the same home? <input type="checkbox"/> Grandparents <input type="checkbox"/> Other:	
Are there any requirements of your religion that we should be made aware of?	
<input type="text"/>	
Do you have any medical problems/allergies that we should be made aware of?	
<input type="text"/>	
Are you a vegetarian? <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> Other:	
Are there any foods you cannot eat? <input type="checkbox"/> No <input type="checkbox"/> Yes, please specify	
Is there anything else we should know about your eating habits – please state if any:	
<input type="text"/>	
Do you like pets? <input type="checkbox"/> No <input type="checkbox"/> Yes, please specify	
Do you have any homestay preferences? (you may tick more than one box)	
<input type="checkbox"/> No, I have no preferences and do not mind where I am placed <input type="checkbox"/> live on a farm / orchard / lifestyle block	
<input type="checkbox"/> sporty family <input type="checkbox"/> live in town <input type="checkbox"/> live by the beach <input type="checkbox"/> prefer <u>no</u> siblings <input type="checkbox"/> prefer siblings	
<input type="checkbox"/> prefer a family <input type="checkbox"/> Close to Shops <input type="checkbox"/> busy/active family <input type="checkbox"/> Other:	
What are your preferences for a homestay family? Please describe your ideal homestay family and what are some of the qualities that you value most in family life?	
<input type="text"/>	
<input type="text"/>	
<input type="text"/>	

List your Interests / Hobbies:

List your Sports:

PLEASE WRITE A LETTER TO YOUR HOMESTAY FAMILY – we pass this on to your homestay family and it is a way of introduction, so anything you can write about yourself is very helpful
(continue on separate sheet, or attach a separate letter if you prefer)

INTERNATIONAL STUDENT TPHS ENROLMENT PROFILE

This questionnaire must be completed by the student enrolling at Te Puke High School. Write as much as you can in the spaces below.

STUDENT NAME:

Why do you think Te Puke High School will be a good place for you to study?

What special skills and strengths could you contribute to our High School?

How do you think school life in New Zealand will compare with your home country?

What are your favourite subjects at school and why do you enjoy them?

What subjects do you need to take while at Te Puke High School?

What subjects would you like to take while at Te Puke High School?

What are some of the things you like to do when you are not studying?

Tell me something that you think you do really well.

Tell me which clubs or community groups you are currently involved in? eg: karate, band, scouts?

What kind of job would you like to have when you leave school in the future?

What places would you like to visit whilst you are studying in New Zealand?

Extreme Activity Declaration

Permission is given for the following Extreme Activities to be undertaken while your son/daughter is in New Zealand. Tick only the activities you give permission for your child to participate in:

<input type="checkbox"/> Black Water Rafting	<input type="checkbox"/> Kayaking
<input type="checkbox"/> Blokarting	<input type="checkbox"/> Lugging
<input type="checkbox"/> Bungy Jumping	<input type="checkbox"/> Mountain Biking
<input type="checkbox"/> Clay Bird Shooting	<input type="checkbox"/> Hunting
<input type="checkbox"/> Bungy Jumping	<input type="checkbox"/> Possum Hunting
<input type="checkbox"/> Laser Tag & Paintball	<input type="checkbox"/> Scooter
<input type="checkbox"/> Horse Riding & Trekking	<input type="checkbox"/> Sailing
<input type="checkbox"/> Surfing	<input type="checkbox"/> Speed Boat
<input type="checkbox"/> Tandem Skydiving	<input type="checkbox"/> Water-skiing
<input type="checkbox"/> Wind and/or Kite Surfing	<input type="checkbox"/> White Water Rafting
<input type="checkbox"/> Low/High Ropes Course	<input type="checkbox"/> Zip Lining

Te Puke High School Outdoor Education Activities (OED) – chosen as a school subject

Any other extreme activities: _____

How Did you Hear About Te Puke High School (TPHS)?

How did you first hear about Te Puke High School (please tick)

<input type="checkbox"/> School Visit	<input type="checkbox"/> TPHS website	<input type="checkbox"/> Education Agency	<input type="checkbox"/> NZ Embassy	<input type="checkbox"/> Friend/Relative
<input type="checkbox"/> Internet	<input type="checkbox"/> Promotion in home country	<input type="checkbox"/> Other:		

Application Checklist

It is very important your Application is completed fully and signatures from the correct people are included. Failure to disclose relevant information or the provision of false information may result in termination of enrolment.

Please use the checklist below to ensure you have included everything.

CHECK LIST:

- Read** and fully understand the “**Te Puke High School International Information and Contracts**” Document
- Fully Completed & Fully Signed “**International Student Application Form**”
- Copy of Applicants Passport
- A Letter from the Parents/Legal Guardian supporting the Application
- Copy of Applicants Latest School Report for all subjects in the original language with a certified English translation
- Two character references:
 - one from your school Principal and/or class teacher, and
 - one from a family friend and/or relative.These should be in the original language together with a certified English translation.
- One recent passport-sized photograph
- A selection of other photographs from your everyday life with your family, friends, sports, hobbies, etc
- Post or Email to:
 - Caroline Stevenson
 - Director of International Students
 - Te Puke High School
 - PO Box 344
 - Te Puke 3153
 - New Zealand
 - Email: international.students@tepuke.school.nz

Privacy Act

The information contained in this application is being collected for the purpose of assessing this application for admission to Te Puke High School. If the application is successful, the administration of the Te Puke High School will retain this information as part of the student's personal file during his time of education at the Te Puke High School. If the application is not successful the information will not be retained.

The Te Puke High School may be required from time to time to provide information to Education Authorities under the Education Act 1989. This is in accordance with Section 7 (4) of the Privacy Act 1993. The information may be given to another Education Institution if transferring to that school.

DECLARATION & SIGNATURES

Student Declaration

I have read and fully understood the “**Te Puke High School International Information and Contracts**” Document and I understand the conditions of being an International Student at Te Puke High School and agree to abide by the conditions set out in this Document.

If I am living in a homestay organised by Te Puke High School, 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:

Parent/Guardian Declaration

I/We accept authority of Te Puke High School and have read and fully understood all the provisions as set out in the “**Te Puke High School International Information and Contracts**” Document and are aware that Te Puke High School will act according to the Code of Practice (www.minedu.govt.nz/goto/international). We also give permission for our child to participate in the “**Extreme Activities**” as noted in this Application.

Father’s Name:

Signed:

Date:

Mother’s Name:

Signed:

Date:

Final Approval by the Director of International Students, Te Puke High School

Name:

Signed:

Date: