

Brooklyn School Est. 1883

Take up the challenge - Mauria te taki

Date of Application:

OUT OF ZONE – APPLICATION FORM PLEASE COMPLETE THIS FORM WHERE APPLICABLE

EXPLANATION OF PRIORITY'S FOR OUT OF ZONE

- Priority 1** Students accepted for enrolment in a special programme run by the school; and approved by the Secretary for Education. **Please note Brooklyn School does not have Priority 1 students.**
- Priority 2** Siblings of current students;
- Priority 3** Siblings of former students;
- Priority 4** Child of former students;
- Priority 5** Child of board employees or board member;
- Priority 6** All other students

Please Priority 2: 3: 4: 5: 6:

Year this Out of Zone enrolment is for:

Student's Surname:

Student's First Names:

Boy / Girl

Date of Birth (Please provide birth certificate or passport)

Place in Family:

(e.g 1 of 3)

Permanent Residential Address: (Please provide proof of address)

NZ Resident: YES NO

If NO – a copy of child's Student Visa must accompany this form

Current (NZ) School

School Year:

or: New Entrant

Names of (NZ) school/s previously attended:

For Priority 2: Name of sibling/s who currently attend Brooklyn School:

For Priority 3: Name of former siblings/parent who attended Brooklyn School:

Years Attended:

Parent / Guardian Details (Please provide ID)

Surname:

First Name:

Home Phone:

Cell Phone:

Email:

Parent / Guardian Details (Please provide ID)

Surname:

First Name:

Home Phone:

Cell Phone:

Email:

Statutory Declaration:

The information I/ we have provided in this application is true and correct, by Virtue of the Oath and Declarations Act 1957.

Signature of Parent / Guardian

Signature of Parent / Guardian