

Stella Maris Catholic Primary School



Enrolment Pack



Dear Parents and Caregivers

Thank you for your interest in Stella Maris Catholic Primary School. I welcome your enquiry and consideration of our school community as a place for your child's education.

At Stella Maris our teaching and learning programmes engage students in learning and ensure high levels of achievement in a safe and secure environment. We have a dedicated staff who ensure the individual learning needs, interests, strengths and aspirations of the students and their wh nau are met.

As a Catholic school our Catholic Special Character underpins all that we do and who we are as a school community. We follow the example of Mary, Star of the Sea who is our navigator on our shared faith journey with Jesus and there is an expectation that all actions and behaviours will be guided by the Marian Values.

The Stella Maris community is based on family, wh nau. The family consists of students, staff, wh nau, and the Hibiscus Coast Parish who join together to form a community that is wholeheartedly committed to the education of our young people.

We encourage, and indeed expect, that our students will become life long learners, each developing the Spirit of Stella Maris to take them on to further education, into the workplace and adult life. The Key Competencies in the New Zealand Curriculum are at the base of all learning and ensure our students are self managing, relate well to others, and participate and contribute actively in their learning journey.

Central to the mission of Stella Maris is the promotion of excellence. Our commitment to our wh nau is to provide an inclusive and safe environment that challenges, supports and empowers each individual to be the best they can, thereby preparing them for the next steps on their learning journey.

I look forward to receiving your application and welcoming your family into the Stella Maris Community.

Ma te Atua koe e manaaki
May God Bless you

Catherine Cyprian
Principal

"Tiaho mo te Atua - Shine for God"

Enrolment Application

Stella Maris Catholic Primary School

STUDENT INFORMATION – Please complete the following where applicable. Please note a separate enrolment application is required for each individual child in your family.

Child Information Sheet

Family Name			
Christian / Given Names			
Preferred Name			
Address <i>(Fuller details over page)</i>	Postcode:		
Home Phone No.			
Mobile Phone No.			
Emergency Phone No.			
Sex	Male	–	Female
Place and Date of Birth	Date of Birth / / Place of Birth <i>A copy of your child's Birth Certificate and Immunisation Certificate must accompany this application</i>		
Birth Certificate sighted <i>(Office Use)</i>	Yes	–	No <i>(Or enclose copy)</i>
Immunisation Certificate sighted <i>(Office Use)</i>	Yes	–	No <i>(Or enclose copy)</i>
Position in Family i.e. 1st child, 2nd child etc.			
Religion	<i>Catholic Enrolments require a completed preference form</i>		
Living with both Parents	Yes	–	No
Does the child identify as Maori state iwi	Yes	–	No
Ethnicity of the child	1st	2nd	
State any other siblings to attend this school	Child 2: Name: DoB:	Child 3: Name: DoB:	Child 4: Name: DoB:
Language/s spoken at Home			
Other Languages spoken			
School or Preschool attended <i>(state public or private)</i>	<i>Please complete pre-school form included with this enrolment application</i>		

ENROLMENT

Family Information

Please complete the following where applicable. Use arrows across columns if information is repeated.

	PARENT/FEMALE CARE GIVER <i>Residing with Child</i>	PARENT / MALE CARE GIVER <i>Residing with Child</i>	PARENT <i>*Not Residing with Child</i>
Title <i>(e.g. Mr/Mrs/Ms)</i>			
Surname			
Christian Name			
Preferred Name			
Relationship to Child			
Home Address			
Billing Address			
Mailing Address			
Home Phone Number			
Mobile Phone			
Email Address			
Religion			
Parish			
Work Place / Employer			
Work Phone No			
Occupation			
Birth Country			
Country of Citizenship Nationality			
Identify as Maori State Iwi	Yes – No	Yes – No	Yes – No
Identify as Other <i>(Please state)</i>			
Main Language Spoken at home			
Other Languages Spoken at home.			

Status

Married / Separated / Divorced / Single / De-facto / Widowed

Is there a Family Court Order? Yes - No

If Yes, please state if there are special conditions *(Please attach relevant documents)*.

If No, are there special arrangements, which the school needs to be aware?

Emergency Contacts

In case of accident or emergency, if the school is unable to contact either parent, who would you like the school to contact?

First Preference	Second Preference
NAME:	NAME:
RELATIONSHIP:	RELATIONSHIP:
PHONE:	PHONE:
COMMENTS:	COMMENTS:

Preference Doctor	Preference dentist
NAME:	NAME:
PHONE:	PHONE:

Previous School

NAME: _____

ADDRESS: _____

TRANSPORT – How will your child get to school at Stella Maris?

Please specify mode of transport _____

SACRAMENTS – Have the following Sacraments been received?

If **Yes**, Please circle and complete details

Baptism Date:_____ Name of Church_____ Town_____

Reconciliation Date:_____ Name of Church_____ Town_____

Eucharist Date:_____ Name of Church_____ Town_____

Confirmation Date:_____ Name of Church_____ Town_____

INTERESTS AND ABILITIES

Does your child show extra potential, abilities or strengths in any specific areas?

Sport	Vocal	Speech and Drama
Art	Instrumental	Languages
Other		

IMMUNISATION

Has your child been immunised fully for his / her age?

Immunisation Certificate sighted (*office use*) Yes – No

Medical History

Please advise any health issues the school needs to know about your child so that we can always be attentive to your child's needs.

LEARNING SUPPORT INFORMATION

	Please Tick	Details
Does your child experience any difficulties that you are aware of? Eg: learning behaviour, emotional, psychological, other	Yes – No	
Has your child received Learning Support at his / her previous school?	Yes – No	
Does your child have any chronic illness or specific condition that may affect his / her learning?	Yes – No	
Has your child experienced any emotional difficulties or had any traumatic difficulties that may have affected his / her learning? (Eg: death in family, parental separation).	Yes – No	

DOES YOUR CHILD HAVE IMPAIRMENT IN ANY OF THE FOLLOWING AREAS	Please Tick
Autistic Spectrum Disorder (Aspergers Syndrome)	Yes – No
Hearing Impairment	Yes – No
Intellectual Impairment	Yes – No
Speech / Language Impairment	Yes – No
Vision Impairment	Yes – No
Mobility Impairment	Yes – No

If Yes to any of the above, please provide further details: attach if necessary.

Has your child been assessed by any of the following Special Services.

Name of Child	Yes / No	Name of Centre/ Practitioner	Date of 1st Visit	Is your child attending now?
GSE				
RTLB				
Speech Pathology				
Occup. Therapist				
Physiotherapist				
Psychiatrist				
Special Clinic (Hospital Private)				
Audiology Clinic				
Other				

List any medication which your child takes regularly and the dosage:

Please list any diseases, surgery or disorders or recurring illness. Please add any other information which may be helpful:

Any comments:

Information Collection Notice

INFORMATION WE COLLECT – Our school collects and records personal, sensitive and health information from students and parents/guardians before and during the course of a student's enrolment at our school.

DISCLOSURE OF INFORMATION – This information may be disclosed by us for administrative and educational purposes to others including, but not limited to, personnel within the Diocese of Auckland, medical practitioners, and people providing services to schools, such as specialists visiting teachers and consultants.

PRIVACY ACT 2020

Our school undertakes to collect, use and store information you provide on this form according to the principles of the Privacy Act 2020. The information may be provided to the Proprietor or Proprietor's agent, the Minister of Education and the Education Review Office, and for administration purposes within the school
I/We agree that this information can be used for the above purpose.

PARTICIPATION IN SCHOOL PROGRAMME

I/We the undersigned, undertake as a condition of enrolment that the above named student will participate in the general School programme that gives your school its Catholic Special Character.

ATTENDANCE DUES

I/We the undersigned, undertake as a condition of enrolment and attendance to pay Attendance dues at a rate determined by the Proprietor and approved by the Minister of Education. Furthermore, I/we accept that the school can discontinue attendance of the abovenamed student in default of this undertaking.

Both parents sign for above

Signed:

(Mother/Guardian)

(Father /Guardian)

Preference of Enrolment

I have sighted evidence that the Proprietor has stated that the above named student should be given preference of enrolment.

Signed

(Principal)

Date

This is a Non-Preference Enrolment

Signed

(Principal)

Date

INFORMATION REQUIRED – If we do not obtain the personal, sensitive and health Information referred to above, this school may not be able to enrol or continue to enrol your son/daughter.

ENROLMENT

Parents Declaration

I/We agree that my/our child/children will:

- Wear the regulation uniform.
- Will observe the school rules.
- Will participate in the school programme that gives Stella Maris its Special Character.
- In terms of the Privacy Act I understand that the information on this form is collected to form part of the essential information the school holds on my child/children.
- I/We agree that my/our child/children's anonymous data can be entered into educational websites.
- I/We understand that the school will take action on my/our behalf in case of sudden illness or injury to my/our child/children.
- I/We are happy for our contact details to be given to the P.T.F.A and a Class Parent Rep.
- I/We understand and agree to pay Attendance Dues as determined by the Proprietor.
- I/We agree to pay the school accounts as set by the BOT and determined by the Proprietor.
- I/We have read, understood and accept the Mission Statement of Stella Maris Catholic School.
- I/We understand and agree to uphold the Values of Stella Maris Catholic School.
- I/We agree to meet these commitments. In the event that we are unable to do so, we will meet the Principal to discuss alternative arrangements.
- I/We give permission for my/our child to participate in excursions outside of school. I understand I will be notified as to when and what excursions are on and that I need to notify the school if I do not want my child to attend.

SIGNED:

Parent/Caregiver _____

Parent/ Caregiver _____

Date: _____

Date: _____

CATHOLIC DIOCESE OF AUCKLAND

Compulsory Attendance Dues Charges Parent and Caregiver Responsibilities

Attendance Dues are a compulsory payment under the terms of the Education and Training Act 2020 and a condition of enrolment at Stella Maris Catholic School. Attendance Dues are charged for all students who attend Catholic Schools in New Zealand. Attendance Dues are collected on behalf of the school's Proprietor, the Roman Catholic Bishop of Auckland. The Attendance Dues are forwarded to Auckland Common Fund Limited, a company established by the proprietors of Catholic Integrated Schools in the Diocese of Auckland responsible for the collection of Attendance Dues.

- At the time you enrol your child at a Catholic School, you are required to sign an agreement which states you accept that you will pay the Attendance Dues and that you understand that payment is a condition of enrolment.
- Payments can be made, in full at the beginning of the year or by instalment (weekly, fortnightly, monthly or per term)
- They can not be paid in full at the end of each year.
- Financial Assistance with Attendance Dues is available to families of Preference Students in cases of genuine financial difficulties. Part of the criteria for receiving this assistance is that regular payments have been made at an affordable level.
- Overdue accounts may be referred to a Debt Collection Agency by the Proprietor.
- Failure to pay the Attendance Dues may put your child's place at the school at risk.
- The agreement is legally enforceable and the person who signs the agreement remains legally liable for payment.
- Responsibility for payment cannot be transferred to another person, unless they sign a new agreement accepting responsibility for payment.
- Any civil agreements between parents do not take precedence over the legal agreement signed at the time of enrolment.

I / We the undersigned, have read the requirements above and understand the obligation to pay the

Attendance Dues for _____ at Stella Maris School.

Signed: _____ *(Mother/Guardian)* **Full Name** _____ **Date:** _____

Signed: _____ *(Father/Guardian)* **Full Name** _____ **Date:** _____

School Attendance Dues

Attendance Dues For 2022 are Primary: Year 0 – 6 \$117.00 (\$468.00 per year) Including GST

Special Character

The Catholic Special contribution is a voluntary donation of \$12.50 per term (\$50 per annum) per student.

This contribution provides the main source of funding for all services provided to Stella Maris School by the Catholic Education Services Board. No contributions are made by the Government for these services. The Catholic Education Services Board assists schools to provide a Catholic education for your child through the preservation and enhancement of the Catholic Special Character in our schools.

Board of Trustees Teaching and Learning Contribution

This is required by the Board of Trustees to help pay for the shortfall in operating grant received by the Ministry of Education and is used for the extra resources

Family Size	Attendance Dues	Special Character	Teaching and Learning Donation	Total per term	Total per year
1 child	\$117.00	\$12.50	\$170.00	\$299.50	\$1198.00
2 children	\$234.00	\$25.00	\$170.00	\$599.00	\$2396.00
3 children *	\$351.00	\$37.50	-	\$728.50	\$2914.00

*For the third or more children there is no charge for the Teaching and Learning Donation.

1. No Student is denied Catholic Education because of a genuine inability of parents to pay school attendance dues.
2. School Accounts are issued on a term basis. Payment of attendance dues is requested at the beginning of each term. Should payment of attendance dues become a problem, please do not hesitate to make an appointment to meet with the School Administrator or the Principal.
3. Payments can be made at the office or electronically by Automatic Payment to:

ASB OREWA 12 3046 0362238 01 Include your 4 digit account number and your child's name in the reference. Thank you

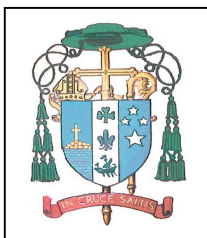


CATHOLIC DIOCESE OF AUCKLAND

INFORMATION FOR PARENTS / CAREGIVERS SEEKING PREFERENCE of ENROLMENT at CATHOLIC SCHOOLS

The following information is given to assist parents/caregivers seeking to gain preference of enrolment at a Catholic school

- In seeking preference of enrolment at a Catholic School you need to make a commitment to actively supporting your child in his/her faith formation and the practices of the Catholic Church.
- The Diocesan Preference Certificate needs to be signed by a Parish Priest or other authorized agent of the Bishop. It is normal practice to make an appointment with the Priest.
- A new Preference Certificate is required for each child in the family.
- Preference Certificates are school specific, in that the name of the school, the family intends to make an application for enrolment, must be specified on the Certificate. If you intend to apply for enrolment at a number of different Catholic schools you should have the required number of Preference Certificates and ask the Priest to sign these during the one interview.
- A new Preference Certificate is required for transfer to another school e.g. primary to secondary school. In some exceptional circumstances the preference status of your children could change.
- The school keeps the Preference Certificate – not the family.
- If you are applying for preference of enrolment under criteria 5.2 which reads *At least one parent/guardian is a Catholic, and although their child has not yet been baptised, the child's participation in the life of the school could lead to the parents having the child baptised*, it is important to recognize that one parent/guardian being Catholic is not sufficient in itself to guarantee that preference will be granted. The second part of the sentence has equal weight with the first.
- If you are applying for preference of enrolment under criteria 5.4:
 - ❖ The significant adult in the child's life, who is undertaking to support your child's formation in the faith and practices of the Catholic Church, needs to accompany you to the meeting with the Priest when seeking preference of enrolment.
 - ❖ It is responsibility of the significant adult to provide some evidence to show they are an active member of the Catholic Church, if not personally known to the person granting preference of enrolment.
- Priests/ Bishop's Agents grant preference and they are the only person who may do so. Schools then decide which students they will accept for enrolment.
- Attendance at a Catholic school by non-preference students are not grounds for seeking preference of enrolment at another Catholic school.



**New Zealand Catholic Bishops Conference
Preference of Enrolment Certificate
for the Diocese of Auckland**

This is to certify that

In accordance with Private Schools' Conditional Integration Act, Section 29 (1), and Catholic School Integration Agreements, through a general or particular religious connection as stated in the Preference Criteria Numbers: 5.1, 5.2, 5.3, 5.4, 5.5.

(Please refer to Criteria details on back of form)

MR/MRS/MS

Address

Is/are eligible to have preference of enrolment for their child at

.....School/College

inTown/City

Name of child.....

I/We undertake to support our child in the formation of their faith and the practices of the Catholic church. I/we further agree that my/our contact details will be shared with the school and parish for the purpose of faith formation.

Parent(s)/Caregivers Signature Date.....

Under which Criterion (see reverse) is the child eligible for preference?.....

If Criterion 5.1 applies please complete:

Baptised in at on

If Criterion 5.4 applies please complete the section on the back of this form.

Certified by (Name):.....as authorized agent of the

Roman Catholic Bishop of the Diocese of

Position:

(see: Administration of the Criteria, 6.1.1-6.1.6, Agents who may sign, listed over page)

Address:.....

Signature Date.....

This form must be completed by the Parent(s)/Caregiver(s), and the Parish Priest or other designated authorities *prior* to the enrolment of a student in a Catholic Integrated School.

NEW ZEALAND CATHOLIC BISHOPS CONFERENCE

Criteria for Preference of Enrolment in Integrated Catholic Schools

- 5.1 The child has been baptised or is being prepared for baptism in the Catholic Church.
- 5.2 The child's parents/guardians have already allowed one or more of its siblings to be baptised in the Catholic faith.
- 5.3 At least one parent/guardian is a Catholic, and although their child has not yet been baptised, the child's participation in the life of the school could lead to the parents having the child baptised.
- 5.4 With the agreement of the child's parent/guardian, a significant familial adult such as a grandparent, aunt or uncle who is actively involved in the child's upbringing undertakes to support the child's formation in the faith and practices of the Catholic Church
- 5.5 One or both of a child's non-Catholic parents/guardians is preparing to become a Catholic.

Agents of the Bishop, Who May Sign the Certificate on his Behalf

- 6.1.1 Parish Priest of their Parish of Residence
- 6.1.2 Assistant Priest of their Parish of Residence
- 6.1.3 Priests appointed under c. 517/1
- 6.1.4 Deacons and lay persons appointed to pastoral care under c. 517/2
- 6.1.5 Ethnic chaplains who liaise with Parish Priests or their delegate
- 6.1.6 Local committees appointed by the Bishop or by any of the above agents of the Bishop.

Process of Appeal

Handbook for Boards of Trustees of New Zealand Catholic Integrated Schools (section 5.14)

If a preference certificate has been refused and the parents, either directly or through the Principal, wish to appeal the matter, the application can be referred to the Proprietors' Office (Diocesan Education Office). The Director of the Office, or whoever is the appointed appeal authority in the diocese, after making whatever investigation is necessary, including consulting the Parish Priest if appropriate, will make a ruling, or seek a ruling from the Bishop. The Parish Priest or delegated person who refused the certificate in the first instance is normally informed whenever a preference certificate is issued in virtue of this paragraph.

Please note that in the Diocese of Auckland the appointed appeal authority is the Vicar for Education, contact phone: (09) 360 3057. Email: catheriner@cda.org.nz

If Criterion 5.4 (above) applies the parents/caregivers and the familial significant adult completes the following:

Familial Significant adult:

I agree to support (child's name) formation in the faith and practices of the Catholic Church and agree to my contact details being available to the school and parish for this purpose.

Mr/Mrs/Ms:

Address:

Relationship to child:..... Email address:..... Phone No:.....

Parish

Signature

Date:

Parent(s)/Caregiver(s):

I agree that my child will be supported by: in the formation of the faith and practices of the Catholic Church. I/we further agree that my/our contact details will be shared with the school and parish for the purpose of faith formation.

Signature:.....

Date:

February 2017

Parent Involvement Sheet

Child's Name _____

I am willing to help this School in the following ways:

☐ Library

☐ Gardening

☐ PTFA

☐ Reading

☐ Gardening

☐ BOT Interest

☐ Working Bee

☐ Technology

☐ Classroom Aid

☐ Art

☐ Cooking Food

☐ Sport Coaching

Parents Signature _____

Early Childhood Education

Has your child regularly attended Early Childhood Education?

YES / NO

If yes please indicate the type below:

Kohanga Reo

Hours _____

Playcentre

Hours _____

Kindergarten or Education Care Centre

Hours _____

Home Based Service

Hours _____

Playgroup

Hours _____

Attended, but only outside New Zealand

Hours _____

Number of years attended:

___ Six months

___ One year

___ Last two years

___ Last three years

___ Last four years

___ Last five years

Please Note: This information is a requirement of the Ministry of Education

Stella Maris Catholic School Mission Statement

Stella Maris is a Christ centred school. As a learning community we strive to challenge, support and empower individuals to become confident learners within the context of our Catholic Faith and Traditions.

At Stella Maris We Seek To Demonstrate The Marion Values of

**Compassion ~ Service ~ Wisdom ~ Obedience ~ Loyalty
Strength ~ Trust ~ Faith ~ Empathy ~ Courage**

Stella Maris Primary School Expectations

Parents are expected to:

- Uphold the Catholic Special Character and Core Values of the school
- Support and be involved in the children's faith development and education
- To working partnership with teachers
- Ensure children wear the correct uniform
- Ensure the children are punctual and attend regularly
- Support fundraising events
- Adhere to their enrolment obligations
- Attend school events
- Support fundraising and social occasions
- Pay all related to attending Stella Maris Primary School ie Attendance Dues, Catholic Special Character Contribution, Diocesan Levy, Teaching and Learning Donation.

Students are expected to:

- Reflect Gospel Values in their words and actions
- Show courtney and respect
- Take pride in their appearance
- Show self-discipline
- Take responsibility for their action
- Be caring, co-operative and considerate
- Be happy and secure.

Staff are expected to:

- Uphold the Catholic Special Character and Core Values of the school
- Work in partnership with parents
- Provide learning programmes, which are child centred, interactive and reflect the Gospel Values
- Make learning enjoyable and challenging
- Meet individual children's needs
- Keep up-to-date professionally
- Ensure the children are safe and secure.



Waitemata
District Health Board
Best Care for Everyone

Parent/guardian: Please return this completed form to the school office

SCHOOL VISION AND HEARING TESTING

Waitemata District Health Board provides free vision and hearing screening for children. This screening is carried out by Vision and Hearing Technicians who visit schools and provide Vision and Hearing clinics in various community locations.

VISION TEST:

Distance vision. A letter matching (or letter identifying) test determines whether the child can see what is expected at 4 meters distance.

HEARING TEST:

Audiometry. An audiometer is used to measure hearing. The child wears headphones, and drops a peg/bead into a basket every time a sound is heard.

Tympanometry. If the child does not seem to hear all the sounds with the audiometer test, tympanometry is used to show whether there may be 'glue ear' or some other blockage in the hearing system. A soft rubber cap seals the opening of the ear and a measurement is made of how well the ear drum reacts to sound and changes of air pressure.

Parents/caregivers will be informed of all results (including any problems identified).

If your child does not pass a vision or hearing screening test, you will receive a letter suggesting what to do, including recommended follow up.

Name of child.....NHI number.....

Date of Birth...../...../..... Ethnicity.....

School Room.....

Child's address.....

.....Phone number..... Mobile

Family doctor (GP).....

I consent to vision and hearing testing for my child at school:

VISION TEST Yes.....No.....Comment.....

HEARING TEST Yes.....No.....Comment.....

Name of parent/ guardian.....

Signature of parent/guardian..... Date...../...../.....

The results of the screening will be stored in the Ministry of Education ENROL data base. Any information stored on this data base can only be accessed by properly authorised school personnel or Vision Hearing Technicians. If your child passed the vision and hearing test at age 4 (part of the B4 School Check), no further routine testing is needed at school.

