



APPLICATION FOR ADMISSION FOR AN OVERSEAS STUDENT

Family Name of Applicant:

First Names:
(Please underline name used)

Gender: (M / F)

Date of Birth:

Country of Birth:

Ethnic Group:

Passport Country of Issue:

Passport number:

Period of Intended Study (eg. 1 term, 2 terms, full year):

Full Name of Father/Guardian:

His Address:

Phone: _____
Fax: _____
Email: _____

His Occupation:

Full Name of Mother/Guardian: _____

Her Address: _____

Phone: _____
Fax: _____
Email: _____

Her Occupation:

Emergency Contact if different from above:

Present School of Applicant:

Year Level or Class:

Address of School:

Phone Number:

Email:

Students are required to notify Gisborne Intermediate immediately if there are any changes in their contact details and residential address (home country).

What is the applicant's first language? _____

What is the applicant's current English language ability? ((Please TICK appropriate box)

Beginner Intermediate Advanced

For home stay accommodation, please complete enclosed form.

All overseas students must take out a comprehensive travel and health insurance before coming to New Zealand. Does the applicant require the school to arrange medical and travel insurance?

Yes No

Please state any particular health concerns:

ATTACH A CURRENT MEDICAL CERTIFICATE TO THIS APPLICATION

Please state briefly any recreational interests the applicant has and why they would like to attend Gisborne Intermediate School:

I REQUEST THAT:

be admitted to Gisborne Intermediate School. I have read and understand the conditions defined in International student enrolment folder and I acknowledge that if he/she is admitted, he/she, as a student, and I as a parent, are bound by these requirements. I agree to the school acting on my behalf in an emergency medical situation where authorization consent documents may need to be signed.

Signature of Father or Guardian: _____

Signature of Mother or Guardian: _____

Date: _____

PLEASE FORWARD THIS APPLICATION FORM WITH SUPPORTING INFORMATION AND THE APPLICATION FOR ACCOMMODATION TO:

Email: gudall@gisint.co.nz cc: donniven@gisint.co.nz