

WEST SPREYDON SCHOOL

The journey starts here...

ATTITUDE ADVENTURE ACHIEVEMENT



147 Lyttelton Street, Spreydon, Christchurch 8024, New Zealand. Phone (03) 338 8184 Fax: (03) 338 8348
Email: admin@westspreydon.school.nz www.westspreydon.school.nz

Pre-enrolment form for a place at West Spreydon School for all families who live OUTSIDE the West Spreydon School enrolment zone.

Note to parent/caregiver: if you are living outside of the school's zone, it is only possible to secure a place at the school if there is a vacancy. The reason for setting up the enrolment zone is to ensure that our class sizes do not become too large and overcrowded, and that priority is always given to in zone enrolments.

Children living outside the zone may obtain a place through a ballot system. You must fill out the form below and return to the school as soon as possible. We will write to you within three days after the ballot date to let you know whether we can offer a position at the school or not.

1. My son's / daughter's full name is: _____

2. Gender: BOY / GIRL

3. Date of Birth: _____

4. Ethnicity: _____ Iwi / Village: _____

5. I would like to start my child on the following date: _____

6. Is your child a New Entrant? YES / NO

If not, please state the class level that your child wishes to enter: _____

7. Mother's name: _____

Address: _____

Father's name: _____

Address: _____

Caregiver's name: _____

Address: _____

8. Phone number – Home: _____

Cell phone: _____

9. Your email address: _____

When a ballot is held and we decide whether we can accept your child or not, we have to advise you in writing. Please tell us your preference for receiving this information by ticking the appropriate box:

LETTER

EMAIL

10. Please tick the appropriate box below that indicates your child's priority status:

Priority Number	Criteria	Indicate with a tick the priority your child is able to have
Priority Number 1	Only applies if we have an approved "special programme" at our school. This does not apply to West Spreydon School.	
Priority Number 2	Your child has a brother/sister currently attending West Spreydon School.	
Priority Number 3	Your child has a brother/sister who has attended West Spreydon School in the past.	
Priority Number 4	Your child has had a parent attend this school in the past.	
Priority Number 5	You are an employee of the Board (or a member of the BoT) and you have a child who wants to attend West Spreydon School.	
Priority Number 6	All other children who live outside the zone.	

Proof of sibling relationship e.g. birth certificate

If there are more applicants in the second, third, fourth, or fifth priority groups than there are places available, selection with the priority group will be by a ballot conducted in accordance with instructions issued by the Secretary under Section 11G(1) of the Education Act 1989.

I declare that all of the information provided on this form is accurate and can be verified if requested.

Signed: _____

Date : _____

Marriene Langton
Principal