



VICTORIA AVENUE SCHOOL

INTERNATIONAL STUDENT ENROLMENT CONTRACT

The following documents are required before a student's application can be processed and must accompany this application: 以下文件学校要求学生录取之前必须具备:

- Passport 护照,
- Student Visa/Permit 学生签证及许可证
- Copies of recent school reports, with verified English (translation if required) 近期成绩单复印(英文翻)
- Health insurance documentation (including dental cover) for the family 家庭健康保险(包括牙齿)
- Health/Immunisation checklist 健康及免疫清单
- Medical information 医疗的资料
- Additional information offered by parents 家长提供的附加信息和资料
- Administration fee: NZ\$~~9~~00 (non-refundable) 申请管理费: 新币\$~~9~~00元(不退)

Office use only - Fees paid

Amount received: _____

Being tuition for term dates as follows: _____

Date: _____

Receipt No: _____



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PUPIL INFORMATION 学生资料

Family Name 姓

First Names 名

Also Known As 曾用名

Date of Birth: 出生日期
Gender: 性别
Male/Female 男/女

Address 地址

MEDICAL INFORMATION 医疗健康资料

My Child has had the following immunisations: 我孩子已经打过下列免疫针:

Hepatitis B 肝炎B

Polio 小儿麻痹症

Tetanus 破伤风

Pertussis 百日咳

HIB 乙型肝炎

Mumps 腮腺炎

Rubella 风疹

Other 其它 _____

Phone 电话 _____

Nationality 国籍 _____

My child has/had not been to hospital. If yes, please give details: _____
我孩子有/没有接受过住院治疗, 如有, 请提供详细内容: _____

Date of Entry to New Zealand 入境新西兰日期

Student Permit Details 学生许可证内容

My child has/does not have any infectious diseases. If Yes please give details: _____
我孩子有/没有受过任何病毒感染, 如有, 请提供详细内容: _____

Level of English (Circle) 英语水平 (圈)

Beginner 初级
Intermediate 中级
Advanced 高级

Family Doctor 家庭医生
Phone 电话 _____

Address 地址 _____

Any Other information that may assist Victoria Avenue School to ensure a safe school environment for your child.
任何有助于维多利亚街小学协助和提供学生安全和健康的信息。



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PARENT INFORMATION 家长资料

FATHER 父亲

Family Name 姓

First Name 名

Occupation 职业

Email 电邮

Address 地址

Home Phone 家里电话

Work Phone 工作电话

Mobile 手提电话

Fax 传真

MOTHER 母亲

Family Name 姓

First Name 名

Occupation 职业

Email 电邮

Address 地址

Home Phone 家里电话

Work Phone 工作电话

Mobile 手提电话

Fax 传真



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EMERGENCY CONTACT

紧急联络人

Family Name 姓氏

First Name 名

Occupation 职业

Email 电邮

Address 地址

Home Phone 家里电话

Work Phone 工作电话

Mobile 手提电话

Relationship to Student 与学生的关系



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STATUTORY DECLARATION

I..... (name) 我(们)名字及地址

Of.....
..... (address)

- give authority to the Principal to act of my behalf in any medical emergency.
受权给校长当学生有紧急医疗健康问题时。
- give permission for my child to attend all approved educational visits and trips
受权给校方让孩子参加学校的活动。
- agree to abide by all Board of Trustee policies
同意遵守校方委员会的有关规章制度。
- have read, understood and agree to all conditions of enrolment as stated in the prospectus, and acknowledge that I have received a copy of the conditions of enrolment .
已阅读、理解并同意学校内容及注册登记的所有条件,并已收到一份相同的复印件。
- acknowledge and authorise Victoria Avenue School to collect, store, use and disclose the information provided on this form, for the purpose of enrolment, general administration of the school and general welfare of my child during the term of enrolment with Victoria Avenue School, and agree to update the information as necessary.
理解并受权给学校在学生在校期间使用表格上提供的资料并及时更改所需有改动的资料、信息。
- certify that all information provided in the application is correct and complete. including medical information.
证明所有提供的资料属实包括医疗健康资料。
- agree to pay all tuition fees, in advance, as stated in the prospectus, and understand and accept the refund policy of Victoria Avenue School.
同意提前支付所有的学费并且理解接受维多利亚街小学退款的有关条例。
- understand that the completion of this application form does not guarantee a place for my child.
理解填满这份表并不意味着学校已经录取孩子。
- understand that Victoria Avenue School is a signatory of the Code, have read, understood and accept it. 理解并同意接受维多利亚街小学的规章制度。

I have read and understood this document: 我理解并同意这份文件。

Signed: 签名: _____ Witness: 证人: _____
Date: 日期: _____ Date: 日期: _____

(A witness is any office authorized to take a statutory declaration - Justice of the Peace, Solicitor of the High Court of New Zealand, Court Registrar) 证人必须是有受权资格的人士例如一太平绅士,可出庭新西兰最高法院的律师,法庭注册人员。