



Burnside High School

Christchurch
New Zealand

International Student Application Form

Student's Details

Family Name (as on passport):

First Names (as on passport):

Preferred Name:

Gender: ☐ Male ☐ Female

Birth Date: / / (day, month, year)

Student's Email:

Passport Details

Nationality:

Passport Number:

Expiry Date:

Country of Birth:

Father's Details

Last Name:

First Name:

Address:

Mother's Details

Last Name:

First Name:

Address (if different from father's):

Occupation:

Occupation:

Home Number:

Home Number:

Work Number:

Work Number:

Email address:

Email address:

Fax Number:

Fax Number:

Speaks English: ☐ Yes ☐ No

Speaks English: ☐ Yes ☐ No

Agent Details (fill in only if you are using an agent)

Agency Name:

Contact Person:

Address:

Phone Number:

Email Address:

NZ Contact (if you have one)

Name:

Relationship to student:

Home Number:

Work Number:

Email Address:

Physical Address:

Course and School Details

I am applying for the following Burnside High School course:

- ☐ Academic School Programme
☐ International Music Programme
☐ Sports Leadership Rugby Programme

Level of study requested:
☐ Year 9 ☐ Year 10 ☐ Year 11 ☐ Year 12 ☐ Year 13
Start Date:
☐ Term 1 ☐ Term 2 ☐ Term 3 ☐ Term 4 Year:
Length of course:
☐ Academic Year ☐ Two Terms ☐ Other (please state):

Name of current School:

Have you studied at a NZ school before: ☐ Yes ☐ No

If yes, please state name of the school:

Favourite Subjects at school:

Future job or career goals:

Languages you have studied:

Language:	Number of years studied:	Level (eg: beginner, elementary, intermediate)

Musical instruments you play:

Instrument:	Number of years played:	Level (if any)

Sports you play or have played:

Sport:	Number of years played and Position you play	Level (social, school, representative):

Medical Details *(to be filled in by a parent):*

Please tick the box of any medical conditions your child suffers from.

Asthma	<input type="checkbox"/>	Food Allergies	<input type="checkbox"/>	Epilepsy	<input type="checkbox"/>	Heart Conditions	<input type="checkbox"/>
Allergies	<input type="checkbox"/>	Diabetes	<input type="checkbox"/>	Migraines	<input type="checkbox"/>	Back/Neck Problems	<input type="checkbox"/>
Bee Stings	<input type="checkbox"/>	Glandular Fever	<input type="checkbox"/>	Hepatitis A or B	<input type="checkbox"/>	Other	<input type="checkbox"/>

Please write details of any condition you have:

Is your child taking any medication? ☐ Yes ☐ No

If yes, please list and explain:

Are there any other physical or mental health conditions or concerns that would place your child at risk?
(eg: depression) ☐ Yes ☐ No

If yes, please explain:

Does your child have any learning or behavioural needs?
(eg: dyslexia). ☐ Yes ☐ No

If yes, please explain:

Parent's Name _____ Parent's Signature: _____

Please note: If your child is on any medication, it is advisable for them to take it to NZ.

Insurance Details

Burnside High School is able to purchase either Southern Cross or Unicare insurance. Both these policies are compliant with the NZ Code of Practice for International Students. Their brochures are on our webpage and in the application pack.

I will take out medical and travel insurance and will send Burnside High School a copy of the policy in English before I leave my home Country: ☐ Yes

I would like Burnside High School to arrange insurance and add it to my invoice: ☐ Yes ☐ Unicare **or** ☐ Southern Cross

Accommodation Details**Designated Caregiver:**

If you do not wish Burnside High School to arrange accommodation with a homestay please fill in this section.

Please Note: A designated caregiver must be either a close friend of your parents, or a family member. This accommodation must be approved by the school before you arrive and adults over the age of 18 living in the house will be police checked (the school arranges this when they visit).

Name of Caregiver: _____

Relationship to you _____

☐ Parent

☐ Relative (please state) _____

☐ Family Friend

Address: _____

Phone number (work): _____

Phone number (home): _____

Email address: _____

Homestay Application

Please fill this section in if you would like Burnside High School to find you a homestay

Sports

Please put a tick in the boxes of the activities you enjoy:

Swimming	<input type="checkbox"/>	Snow ski / board	<input type="checkbox"/>	Water Skiing	<input type="checkbox"/>	Fishing	<input type="checkbox"/>
Volleyball	<input type="checkbox"/>	Sailing	<input type="checkbox"/>	Cycling	<input type="checkbox"/>	Horse Riding	<input type="checkbox"/>
Soccer	<input type="checkbox"/>	Surfing	<input type="checkbox"/>	Hiking	<input type="checkbox"/>	Golf	<input type="checkbox"/>
Track and Field	<input type="checkbox"/>	Badminton	<input type="checkbox"/>	Basketball	<input type="checkbox"/>	Martial Arts	<input type="checkbox"/>
Gymnastics	<input type="checkbox"/>	Ice Hockey	<input type="checkbox"/>	Softball	<input type="checkbox"/>	Squash	<input type="checkbox"/>
Rugby	<input type="checkbox"/>	Tennis	<input type="checkbox"/>	Field Hockey	<input type="checkbox"/>	Baseball	<input type="checkbox"/>

Other sports (please list): _____

Arts:

Drama	<input type="checkbox"/>	Painting	<input type="checkbox"/>	Movies / Theatre	<input type="checkbox"/>	Dance	<input type="checkbox"/>
Cooking	<input type="checkbox"/>	Drawing	<input type="checkbox"/>	Going to concerts	<input type="checkbox"/>	Visiting Museums	<input type="checkbox"/>
Listening to Music	<input type="checkbox"/>	Other (please list): _____					

Other Interests:

Cooking	<input type="checkbox"/>	Chess / Go	<input type="checkbox"/>	Playing indoor games	<input type="checkbox"/>	Watching Sports	<input type="checkbox"/>
Gardening	<input type="checkbox"/>	Playing Cards	<input type="checkbox"/>	Travel	<input type="checkbox"/>	Sewing	<input type="checkbox"/>
Reading	<input type="checkbox"/>	Watching TV	<input type="checkbox"/>	Social Dancing	<input type="checkbox"/>	Computer Games	<input type="checkbox"/>

General Information

Please answer the questions below

What time do your parents expect you to be home in the evenings? Weekdays _____ Weekends _____

Do you have a religious affiliation? ☐ Yes ☐ No

If yes, please name: _____

Would you attend church with your host family? _____

Would you feel comfortable in a home with small children? _____

Would you prefer someone close to your own age in the host family? _____

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List the pets (if any) that you have at home:

Many host families have pets and you will have to adjust to living with them. Are there any concerns we should be aware of regarding pets? If yes, please explain:

Would you be able to live with a family where one of the parents smoked? ☐ Yes ☐ No

Food

Do you have any food allergies? ☐ Yes ☐ No

Please explain:

Are you a vegetarian or have diet restrictions due to your religion? ☐ Yes ☐ No

Please explain:

Are there any foods you can't / won't eat?

Letter to Prospective Host Family

(ONLY students who will be staying with a Burnside High School host family should write this).

Please use this page to write a "Dear family" letter. You might like to write about your family, hobbies, friends and home and school life and why you want to come to New Zealand. You can use extra paper if you wish.

Refunds and Cancellation Policy

- If the student withdraws from his/her course of study before the course completion date, he/she will **NOT** receive a refund of Tuition Fees except in exceptional circumstances. In such cases, the parents should write to the Director of International Students explaining what the exceptional circumstances are; however, the School's decision is final.
- If the application for refund is made before the start of the course, fees will be refunded less:
 - a) An administration fee
 - b) Costs to the school already incurred for tuition
 - c) Components of the fee already committed for the duration of the course, including appropriate portions of salaries of teachers and support staff (if applicable)
 - d) Agent commission, Government Levy and any other costs
- No refund will be made to a student who is excluded or withdrawn by the school.
- No refund will be made to an International Student who changes visa status to one which entitles them to regular/domestic status.

Parent Declaration

☐ By ticking the box we give permission for our son/daughter to go on any class/sports/cultural trip which takes place as part of their school timetable and/or co-curricular activities. We also give permission for our son/daughter to travel with school approved homestay parents which may include out of town and overnight trips.

We confirm we have read, understood and will comply with the terms set out in the documents listed below:

Please contact the school if you do not understand or need help with this Declaration

Refunds and Cancellation Policy (see above)

School Rules and Conditions of Enrolment for International Students

I _____ (student) have read and understand the conditions of being an international student at Burnside High School and agree to follow the rules of the school.

Signed: _____ (*Student's signature*) Date: _____

We _____ (parents) agree to the Conditions of Enrolment and understand that our child's failure to comply with the school rules may result in our child's removal from Burnside High School. We have kept a copy of these rules for our own records.

Parent's Name _____ Parent's Signature: _____ Date: _____

Parent's Name _____ Parent's Signature: _____ Date: _____

Burnside High School has agreed to observe and be bound by the Code of Practice for the Pastoral Care of International Students published by the Ministry of Education. Copies of the Code are available on request from this institution or from the New Zealand Qualifications Authority website at www.nzqa.govt.nz
The most recent results of evaluations by quality assurance agencies can be found on our Moodle site <http://learn.burnside.school.nz/course/view.php?id=35>

