



# HOWICK COLLEGE

## APPLICATION FOR TUITION

Please include 2 Photos

Attach Photos Here

### SECTION 1: BASIC INFORMATION

Please print clearly

Family Name ..... First Name(s) .....

Date of Birth ..... (day) ..... (month) ..... (year) Male / Female

#### PASSPORT INFORMATION

Country..... Passport #..... Preferred starting date at Howick College.....

Family Overseas Address.....

Phone No ..... Fax No ..... Parents email .....

#### Accommodation Type (in New Zealand) please tick

Homestay:  Parents:  Designated Caregiver:  Relationship to Student: .....

#### Father

Name:.....

Address (if different from above) .....

Ph: .....

#### Mother

Name:.....

Address (if different from above) .....

Ph: .....

\*Please advise the school of any changes to these contact details.

### SECTION 2: EDUCATION

How many years of schooling have you had? .....

Names of Schools.....

Qualifications .....

INTERESTS.....

\*Please enclose certified copies of your most recent school report and the results of any examinations you have entered.

### SECTION 3: HEALTH (This information is for use within the College)

Are there any health problems that may affect your ability to learn at school? .....

If the answer is yes, please give details .....

It is a condition of enrolment that the student has adequate Travel/Medical Insurance. This should be done before the student arrives in New Zealand and will be arranged through Howick College unless parents provide documentary evidence of other arrangements prior to the student's arrival.

Have you already arranged insurance? Yes  No

### SECTION 4: LEARNING DIFFICULTIES

Does your child have any special learning difficulties that would mean extra individual support is necessary?

Yes  No



**CONTRACT** (to be signed by Parent) **STUDENT'S NAME** .....

- 1) I understand that this contract is made under New Zealand law.
- 2) Any dispute regarding this contract will be dealt with by the International Education Appeal Authority. Contact details are: C/o Ministry of Education, Private Bag 47-911, Ponsonby, Auckland.
- 3) I understand that any inaccurate or misleading information on this application may lead to termination of this contract.
- 4) I understand that if the student has special emotional or learning needs that were not disclosed at application, then the parents will bear the cost of any extra services required.
- 5) I guarantee the good behaviour of the student in New Zealand.
- 6) I accept the right of the school to affect a change of course if this is in the best interests of the student.
- 7) I have read and understood the "Howick College Refunds Policy for Foreign Students".
- 8) I understand that if I receive Permanent Residency or a Work or Long Term Business Visa while my child is at Howick College the enrolment conditions for local students will apply.
- 9) I undertake to ensure that the student follows the rules and procedures for students of Howick College as set out in the official Howick College Homework Diary and in the case of homestay students in the "Rules for Homestay Students".
- 10) Howick College may terminate tuition if:
  - The student breaks the terms of this contract
  - Following suspension the student is excluded or expelled by the Board of Trustees for a serious discipline issue
  - The student is over the age of 16 years and fails to attend school for 20 consecutive days
 New Zealand Immigration will be informed.
- 11) Withdrawal: I understand that if I decide to withdraw my student from Howick College before the end of the contract the following must happen:
  - I must notify Howick College in writing
  - The student must complete all Howick College leaving documentation
  - I must apply in writing for a refund if eligible
 New Zealand Immigration will be informed.
- 12) I undertake to ensure that if the student's visa is granted on the basis of a Howick College guaranteed homestay, the student will remain in a Howick College homestay for the duration of the visa or if the student is with a school approved Designated Caregiver no change in living arrangement will be made without consultation and approval of Howick College.
- 13) I accept that my student may be required, at my expense, to have a blood test to screen for hepatitis on arrival in New Zealand.
- 14) I accept that my student must not own or drive a car while a student at Howick College.
- 15) I undertake to notify Howick College if any of my contact details change.
- 16) I will ensure that my child complies with all term dates and understand that failure to do so will be regarded as inappropriate absence from school.
- 17) I understand that Howick College is responsible for the education and welfare of my child during the published school year. Any extension of this responsibility into the December/January break can only be by prior arrangement with the school.
- 18) I understand that this contract is current until the end of the school year in which my student enrolls, and may be renewed for a further year(s) subject to satisfactory performance of my student.

Parent Signature .....

Date .....

Full Name .....

Address .....

Director of Overseas Students/Principal .....