# Gisborne Girls' High School

## ENROLMENT PACK

- **ENROLMENT FORM PLEASE ATTACH BIRTH**CERTIFICATE OR PASSPORT
- \* DIGITAL CITIZENSHIP AGREEMENT
- \*BLANKET CONSENT
- SCHOOL-SUPPLIED DEVICE REQUEST FORM
- \*ALLERGENS/DIETARY REQUIREMENTS FORM





## **Te Kura Tuarua o Tūranga Wāhine** Gisborne Girls' High School

email info@gghs.school.nz web www.gghs.school.nz post P O Box 249 Gisborne 4040 phone (06)8686092

### **ENROLMENT APPLICATION 2022**

For office use only: FDA	Student #		NSN	Interview
Student's legal family name:				
Student's legal first name(s):				
Preferred name:		Previous/ othe	er names used:	
Date of Birth:		Student's cell		
Ethnicity (1):		Student's e-m		
Ethnicity (2):			ending GGHS:	
Iwi Affiliation: (if applicable pleas	se <i>circle)</i> Ngai Tār	manuhiri / Ngā	<u>iti Porou / Rongov</u>	vhakaata / Te Aitanga-ā-Māhaki
Other iwi: (please specify)				
Year level applying for: 9 / 1	0 / 11 / 12 /	13 / 14		
Current school:		Current Year	Level:	
Country of Birth:		(copy of Birth	n Certificate or Pa	ssport is required)
Other citizenship(s):				
(please specify; copy of Permanent R	esidence/ Passport/ 3	Student Visa/ Pa	arent Work Permit <mark>rec</mark>	quired)
First Language: (please circle)				·
Residence A: (this is the student's	nrimary residence w	hile attending G	CHS)	
Name of caregiver 1:	primary residence wi	=	ship to student:	
Physical Address:		rtolatione	nip to otagont.	
Postal Address:		Occupati	on/Workplace:	
Home phone:		Work pho	•	
Mobile phone:		Email:		
Name of caregiver 2:		Relations	ship to student:	
Mobile phone:			on/Workplace:	
Email:		Work pho	•	
<b>-</b>				
Residence B: (if applicable; share)	d living/custody arran		-l-: 4444-	
Name of caregiver 1:		Relations	ship to student:	
Physical Address: Postal Address:		Occupati	on/Workplace:	
Home phone:		Work pho	•	
Mobile phone:		Email:	<u> Эпо.</u>	
·				
Name of caregiver 2:			ship to student:	
Mobile phone:			on/Workplace:	
Email:		Work pho		
Do you want Residence B to rec	eive corresponder	nce? Yes /	No	
Emergency Contact: (if we are u	nable to get hold of R	Res A or Res B)		
Name(s):	is got note of the		ship to student:	
Home phone:		Mobile pl	•	
				·

<b>Boarding Residence</b> : (if applicable)	
Name of caregiver(s):	
Address:	
Home phone:	Mobile phone(s):
Do you need assistance finding board?	Yes / No
Medical Information: Please advise any medical conditions the gies: (attach any documentation if necessary)	nat may require emergency healthcare response, including serious aller-
Doctor/ Medical Centre:	Dentist/ Dental Centre:
Do we have permission to give paraceta	amol (tablets) if required? Yes / No
Special Learning Needs: (if applicable	e please give details)
Bus Route: (if applicable)	
Declarations:	
We agree to accept and uphold the school	l values for Gisborne Girls' High School.
We agree to promptly notify the school of	any changes in address and contact details.
We authorise the transfer of information at future transfer of information to subsequen	nd data to Gisborne Girls' High School from the last school attended and any nt learning organisations.
	elevant health and wellbeing information to ensure appropriate levels of care rstanding this information will remain confidential.
We authorise the school to make legitimat video footage or student work collected by	te use of information collected. This includes the use of any photographs, school personnel.
	o responsibility or liability for the loss or damage of personal communication ems that the student chooses to bring to school.
Parent/ Caregiver signature:	Date:
Student signature:	Date:



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#### GISBORNE GIRLS' HIGH SCHOOL DIGITAL CITIZENSHIP AGREEMENT

Digital technology continues to create opportunities to learn and connect our school community. Gisborne Girls' High believes in using a digital citizenship model to support safe, responsible and ethical use of digital technology and online spaces as it helps our online environment to be a positive place for everyone.

This agreement outlines Gisborne Girls' High School role in promoting the use of digital technology and online spaces for learning, and supporting online safety approaches. It also outlines expectations and responsibilities of students as a member of our online community. It will also be used to support restorative processes when necessary.

Gisborne Girls' High School recognises a student's right to receive a high-quality education in a safe online and offline environment.

#### We will do this by:

- providing information and support to ensure you are aware of, and able to meet, your responsibilities
- teaching a curriculum that promotes positive online safety behaviours
- overseeing students' use of the school's digital devices and platforms
- offering access to the internet and online services that is not unreasonably restricted
- using filtering software to minimise access to inappropriate online content
- allowing the use of technology for personal reasons during break times as long as it does not negatively impact on self and others
- supporting students who need help dealing with online incidents
- taking action when a negative online experience occurs between students even if it takes place outside of school hours
- securing the personal information, the school collects about you
- protecting your freedom of expression under New Zealand's Bill of Rights
- having a plan in place to support students when something serious or illegal happens. This
  might include getting in touch with the Police or Netsafe.

#### YOUR RESPONSIBILITIES:

As a student of Gisborne Girls' High school and a member of our community, it is expected that you will positively contribute towards making our school a place that is safe, respectful, and fair online and offline. This means enacting our school values in online spaces, and helping to shape a positive online culture. This is being a 'digital citizen'.

#### As a digital citizen, you will:

- **Keep it positive.** Always respect others online and communicate in a constructive way. Do not create or publish content that is indecent, threatening or offensive.
- Protect privacy. Do not disclose sensitive personal information about yourself or another
  person in any digital communication. This includes sharing passwords, accessing devices or
  online sites belonging to others without consent and taking screenshots and sharing this
  content without consent.
- Act cautiously. Anything you post or do online can influence what people think of you. Likewise, always think carefully about whether the information you see online is true. If you are unsure of something talk to a teacher.

- Avoid online bullying. Creating or forwarding content that is harmful, inappropriate or hurtful is never okay at any time, and may breach legislation (The Harmful Digital Communications Act). If you are harassing people by sending multiple messages this is also considered online bullying and is unacceptable.
- **Be security smart.** Keep personal information safe and secure by using strong passwords and not sharing them with others. This includes not accessing devices or online sites belonging to others without consent, nor taking screenshots and on-sharing their personal content without their knowledge and permission.
- **Check consent.** Before downloading software to the school network or onto devices, seek permission. Interfering with the school systems, digital technologies, equipment/network or the online security of another person is never okay at any time.
- **Recognise others work.** Follow copyright and intellectual property requirements by attributing references, images, text, audio and video appropriately.
- **Respect the rights of others.** Only record and share video, photo or audio content if the people in it know it has been taken and have provided their consent.
- Use personal devices sensibly. Keep your device(s) on silent during school hours and only use it outside of class time unless you have been given permission to use it during lessons.
- Seek help. Sometimes you or someone you know will feel unsafe or come across inappropriate or hurtful online content and behaviours. If this happens talk to a trusted adult about what can be done, or contact Netsafe directly. Please see the student and/or parent handbook for processes dealing with online incidents.

#### **STUDENT DECLARATION:**

I am aware of the expectations, behaviours and values required of me when I use digital technologies at school, any online tools and platforms, and the school's systems and network. I understand these apply to all devices used at school whether they are owned by school or if it is my personal device.

I understand I have the right to use and experience online environments and digital technologies in positive ways and that others do also. With these rights, come responsibilities.

I understand and agree to support and uphold these expectations and responsibilities outlined in this agreement.

I know that if my actions or behaviours do not align with the Digital Citizenship Agreement there may be consequences. This may include the loss of access to the internet on school owned devices or personally owned device used at school.

Signed	Name	Date
·	haves or acts in ways that does	not align with those detailed in the Digital the school will talk to me about.
Signed	Name	Date



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#### **BLANKET CONSENT FORM**

Dear Parents/Caregivers,

Attached is a consent form that will enable your student to attend events deemed as low risk EOTC (Education Outside The Classroom) activities. Could you please fill this out and return with the other forms in this pack.

The Ministry of Education's EOTC guidelines identify four EOTC activity types, each with recommended types of parental/caregiver consent. In brief they are:

	On site – in the school grounds		
Α	(i) Lower risk environments	(i)	No consent needed
	(ii) Higher risk environments *	(ii)	Separate consent for each event or programme
	Off-site events in the local community		
В	occurring in school time.		
	(i) Lower risk environments	(i)	Blanket consent at enrolment
	(ii) Higher risk environments *	(ii)	Separate consent for each event or programme
	Off-site events – finishing after school		
С	finishes.		
	(i) Lower risk environments	(i)	Blanket consent at enrolment
	(ii) Higher risk environments *	(ii)	Separate consent for each event or programme
	Off-site residential / overnight events.		
D	(i) Lower risk environments	(i)	Separate consent
	(ii) Higher risk environments *	(ii)	Separate consent for each event or programme

In all cases parents will be notified of their student's involvement in an event.

**All EOTC activity categories** require staff to undertake an analysis of the risks, and identify the management strategies required to eliminate, isolate and minimise the risks. Emergency procedures are also in place.

BLANKET CONSENT				
I/we agree to the participat and B and C EOTC events w	in <i>lower risk</i> category A l.			
•	ool with up-to-date medical, supervision an ake every endeavour to keep this informati	_		
 Name	Signature	Date		
 Name	Signature	 Date		

<sup>\*</sup>Higher Risk involves risk assessed to be greater than that associated with the average family activity.



## School-Supplied Device Request Form and Use Agreement

I am requesting to loan a school-supplied digital device for this school year to support my learning.
My Name: My form class:
I understand:
1. It will be my responsibility to keep my loaned school device safe both at school and at home.
2. If my device is not working correctly, is damaged or lost I will report this to the school as soon as possible. I will email <a href="mailto:faults@gghs.school.nz">faults@gghs.school.nz</a> with the details of my problem or report this to the office.
3. If I am careless with my school device and that leads to it being lost or damaged beyond repair my family may be responsible for the excess of the insurance claim (\$100).
4. My device is for my use only and I will not lend it to any other student.
5.I will bring my device to school each day fully charged ready for learning.
6. The rules governing the use of any school-owned digital device will apply including adherences to the Copyright Act and the Digital Responsible Citizenship Agreement that I have signed.
Student Name:Signature:
Parent/ Guardian Name:Signature:
Date:



## FREE SCHOOL LUNCHES ALLERGENS/DIETARY REQUIREMENTS FORM

Please fill in this form if you have a student with an allergy or special dietary requirement.

**Please note:** Your student needs to have a genuine allergy or special requirement due to medical or religious reasons as we are unable to cater for food preferences except for vegetarian/vegan options.

<u> </u>			
Student's		Parent/Guardian's Name:	
Name:			
		Ph:	
Age:			
Form Class:		School: GGHS	
	rudents with documented me medical professional.	edical need - This needs to be filled in	
1. Please sp	1. Please specify the medical/dietary needs and how it restricts their diet:		
2. Please c	ircle the one(s) that apply to	your student:	
Allergy	/ intolerance / religious	reasons / cultural reasons / other	
3. Please c	ircle the severity of their aller	rgy:	
Mild /	Moderate / Severe / Life 1	Threatening	
•	Decify how they are affected Allergy to peanuts affects ability to	•	
5. Please se	elect which type of special d	liet your student will require:	
□ Dairy F □ Not ap □ Other:	_	etic 🗆 Vegetarian 🗆 Vegan	
6. Do they	need their meals in a modific	ed texture? (Please select)	
□ Not apı	olicable 🗆 Chopped 🗆 Gro	ound 🗆 Pureed	
7. Please lis at home	-	neals that your student is used to eating	