

Application Procedure

If you have decided to apply for a place at Brookfield School then:

1. Complete the Application form and send it with copies of your child's most recent school reports (translated to English) to Brookfield School.
2. If your application is accepted, you will receive an invoice for the school's administration fee and tuition fees. The administration fee is \$500 and the full annual tuition fee is NZ\$11,000. If you begin late in the year you will be invoiced for the tuition fee on a pro rata basis.
3. When we receive the fees, we will send or fax the official receipt for your fees and the official Offer of Place Form to you.
4. You must take the Offer of Place Form and the receipt for your fees to the nearest New Zealand Embassy or High Commission and you will be advised how to obtain a student visa. If you use an agent they will guide you through this process. If you do not have an agent please contact the school (address below) and we will give you the contact details of the New Zealand agents we work with.
5. Your agent will guide you through the immigration and accommodation processes. They will arrange transfers from the airport to your accommodation.
6. Please let us know as soon as possible when you intend to arrive in New Zealand and details of your travel plans. The School's Agent can arrange airport transfers to Tauranga if required.
7. If you do not arrive in New Zealand we will return the fees and all other payments less the NZ\$500.00 administration fee.

If you need any further information, contact:

Robert Hyndman
Brookfield School
Box 6024
Tauranga
New Zealand 3110
Telephone + 64 7 576 9433 Fax + 64 7 576 9433
Email principal@brookfield.school.nz



INTERNATIONAL STUDENTS APPLICATION FORM

Name of Student: _____
(Family Name) (First Name)

Date of Birth: _____

Preferred Name: _____

Ethnicity: _____

Date of First Entry into New Zealand: ___/___/___

Name(s) of previous school(s) in New Zealand: _____

Dates of Attendance at those schools:

Length of time International Student wishes to enrol for:

from ___/___/___ to ___/___/___

Passport,
student visa
and parent
permit
photocopied

Contact details of **next of kin** in home country:

Address: _____

Phone: _____ Mobile: _____

Fax: _____ Email: _____

Details of the **Parent** the International Student (named above) will reside with while attending Brookfield School.

Name of Parent: _____
(Please Print Full Name)

New Zealand Address: _____

Child – birth
certificate
sighted and
copied. Parent
- passport
verified and
photocopied
Proof of
residence
photocopied.

Phone:(0_) _____	Mobile Phone: _____	
<p><u>Eligibility for Health Services:</u> Most international students are not entitled to publicly funded health services while in New Zealand. If you receive medical treatment during your visit, you may be liable for the full costs of that treatment. Full details on entitlements to publicly-funded health services are available through the Ministry of Health, and can be views on their website at http://www.moh.govt.nz</p> <p>International Students enrolled at Brookfield School must be in good health.</p> <p><input type="radio"/> Does the International Student (named above) have good health?</p> <p>Yes No</p> <p>If No - please provide details of health concerns: _____</p> <p><input type="radio"/> Does the International Student (named above) have any pre-existing conditions (such as diabetes, asthma etc)?</p> <p>Yes No</p> <p>If Yes - please provide details: _____</p> <p>Brookfield School expects to be able to meet the learning needs of children enrolled at the school.</p> <p><input type="radio"/> Does the International Student (named above) have any special learning or behavioural needs (such as aspergers, autism, hearing, vision impairments etc)?</p> <p>Yes No</p> <p>If Yes - please provide details: _____</p>		<p>Medical Insurance details checked and photocopied</p>
<p><u>Medical and Travel Insurance:</u></p> <p>International Students must have appropriate and current medical and travel insurance while studying in New Zealand.</p> <ul style="list-style-type: none"> Does the student have a Medical and Travel insurance policy for the duration of his/her time of study in New Zealand? <p>Yes No</p> <p>If Yes please provide details: _____</p> <p>_____</p> <p>_____</p>		<p>Check period of insurance.</p> <p>Check level of insurance is adequate.</p>

<p>If No please tick:</p> <ul style="list-style-type: none"> I will take out adequate medical and travel insurance, covering the entire duration of my stay, and will send the provider a copy of the policy in English before I leave my home <input type="checkbox"/> <p>Or</p> <ul style="list-style-type: none"> I would like the school to arrange medical and travel insurance on my behalf and include this in my Fees Invoice. <input type="checkbox"/> <p>Company: _____ Policy No: _____</p> <p>Expiry date: _____</p>	
<p>I have been informed about and received the “Important information about the Code” pamphlet:</p> <p>Yes No</p>	
<p>I have been informed about all costs involved with enrolment and the school’s policy regarding fee protection and refunds:</p> <p>Yes No</p>	<p>Refund Policy signed</p>
<p>I have received a copy of the school Prospectus and Policies relevant to International Students and have read and understood them:</p> <p>Yes No</p>	
<ul style="list-style-type: none"> I have read, understood and accepted the policies, rules and procedures regarding International Students at Brookfield School and agree to abide by them. I agree that all disputes will be dealt with in accordance with New Zealand law. I confirm all the information contained in this application is true and correct to the best of my knowledge and belief. I acknowledge that the provision of false information or the withholding of relevant information will result in termination of enrolment. I will inform the school if there are any changes to the details of this application. <p>Parent’s signature: _____</p> <p>Parent’s name: _____</p> <p>Parent’s signature: _____</p> <p>Parent’s name: _____</p> <p>Date: _____</p> <p>NB: Both parents to sign this application form. Agents must not sign on behalf of the parents.</p>	