
Apply to the Golden Grove School

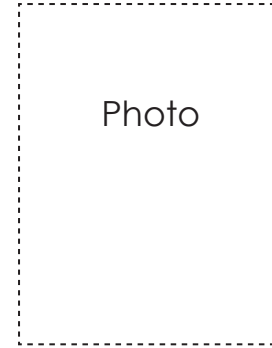
1. All prospective students and parents meet with the Head of School.
2. Classroom visit for 1 hour, at 4.5 years old or older. Please bring your child's school records and examples of your child's work.
3. Second classroom visit, also 1 hour.
4. If a space is available a child will be offered a place.
5. When the offer of place is accepted by a family, their place is confirmed by paying their child's fees for one term. This amount is non-refundable and will be credited towards your child's fees at Golden Grove.

Signatures of Parents or Guardians making application

Name _____ Signature _____

Name _____ Signature _____

Date _____



GOLDEN
GROVE
SCHOOL



Application for Admission

Student Details

Surname _____

Given Names _____

Birthdate _____ Gender _____

Place of Birth _____ Nationality _____

Ethnic Origin _____ New Zealand Residency _____

Believe/Faith _____

Present or Most Recent Schooling (Please include how many months)

Family Details

Title _____ Title _____

Surname _____ Surname _____

Given Names _____ Given Names _____

Relationship to Child _____ Relationship to Child _____

Home Address _____

Home Phone _____ Home Phone _____

Mobile _____ Mobile _____

Email _____

Occupation _____ Occupation _____

Business Name _____

Business Phone _____ Business Phone _____

Siblings _____

Birthdates _____



Other Details

Emergency Contacts:

Name _____ Phone _____

Name _____ Phone _____

Name _____ Phone _____

Immunisation Certificate Completed Yes No

Allergies _____

Medication _____

Other Health Issues _____

Special Needs _____

Kindly tell us about your child.

Please include their interests, attributes, temperament and any concerns you may have.

