

# **Outreach Services - Student Registration**

### **Student details**

Legal first name		Gender	
Preferred first name		Female	
Middle name(s)		Male	
Legal surname		Other (please specify)	
Date of birth			
Country of birth		lwi	
Ethnicity	1.	1.	
	2.	2.	
	3.	3.	
Current school / pre-school		Нарū	
		1.	
		2.	
		3.	

### **Student education history**

Early Childhood Education		
Name(s) of ECE attended (if none, write N/A)		
Number of weekly hours attended		Age started
Did your child have extra learning support? (tick one)	Yes No	
If yes, please provide details		

Primary or Secondary School	
Name(s) of other schools attended (if none, write N/A)	
Did your child have extra learning support? (tick one)	Yes No
If yes, please provide details	

## Student and whānau languages

Language(s) used at home	
Student's preferred language(s)	

### Whānau contact details

Parent / Guardian / Legal caregiver 1			
First name		Street address	
Surname		Suburb	
Mobile phone		Town / City	
Alternative phone		Post code	
Email address		Postal address (if different from above)	
Relationship to child			
Does the child live at this address?	Yes No		
Parent / Guardian /	Legal caregiver 2		
Parent / Guardian / First name	Legal caregiver 2	Street address	
	Legal caregiver 2	Street address Suburb	
First name	Legal caregiver 2		
First name Surname	Legal caregiver 2	Suburb	
First name Surname Mobile phone	Legal caregiver 2	Suburb Town / City	erent from above)
First name  Surname  Mobile phone  Alternative phone	Legal caregiver 2	Suburb  Town / City  Post code	rent from above)

#### **Informed Consent**

#### Personal information and privacy

As New Zealand's provider of education services for Deaf and Hard of Hearing children and young people, Ko Taku Reo - Deaf Education New Zealand ("Ko Taku Reo") provides specialist schools, facilities, campuses and related deaf educational services (our Services).

In order to provide your child with our Services, we rely on the collection of personal information submitted by you or with your authority.

This form, together with our Privacy Policy (available online at <a href="https://www.kotakureo.school.nz/about-us/policies/privacy-policy">www.kotakureo.school.nz/about-us/policies/privacy-policy</a>) sets out how we collect, hold, use and disclose personal information.

#### Your rights and our Privacy Officer

Please tick all that apply:

You and your child have certain rights under the Privacy Act to access and request corrections to your personal information. Our Privacy Policy contains further information on your rights.

If you have any questions or would like further information on our privacy practices, we encourage you to write to our Privacy Officer at <a href="mailto:privacy.officer@kotakureo.school.nz">privacy.officer@kotakureo.school.nz</a>.

If you don't agree to providing your or your child's personal information on the basis set out in this Student Registration form, we will still work with you to provide support for your child's needs within our available Services, but we may be unable to provide you some, or all, of our Services.

	I confirm that	at the information provided on this form is a true and accurate record.				
	I agree to the purposes outl	ne collection, storage, and use of personal information provided on this form in accordance with the utlined above.				
	· .	ssion for employees of Ko Taku Reo to receive information about my child from the school my child is for the purposes outlined above.				
	I give permiss injury to my c	mission for employees of Ko Taku Reo to act on my behalf in an emergency such as sudden illness or my child.				
	I give permission for photos and videos of my child, their schoolwork and learning journey to be published on internal and external digital platforms and print publications, including but not limited to: school newsletters, year books, and social media platforms administered by Ko Taku Reo Communications staff. I understand that their name, year level, and school may be included for the purposes of sharing positive news and stories that support the work of Ko Taku Reo.					
Pa	rent / Guardia	an / Legal caregiver				
Ful	ll Name					
Sig	gnature			Date		
Of	Office Use Only					
NS	iN .		Compass – Data e	ntered (p	olease tick)	

**Date Received** 

Compass - Form scanned and entered (please tick)