WAIHI EAST SCHOOL
TE KURA RAWHITI O WAIHI

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# ENROLMENT SCHEME STUDENT APPLICATION
# 2027 SCHOOL YEAR

Students Name: _____ Male/Female (circle)

Date of Birth: _____ Age: _____

Parent/Caregiver Name: _____

Address: _____

School currently attending (if any) _____

I am applying for my child to be enrolled as a year _____ student at Waihi East School starting school in 2027.

Priorities for Enrolment

Enrolments will be accepted in the following order of priority:

(Because we have no special programmes, they are …)

1st siblings of a current student at Waihi East School
2nd siblings of a former student at Waihi East School or former student at Waihi East School
3rd child of a former student at Waihi East School
4th child of an employee or a board member at Waihi East School
5th all other applicants

My child fits into priority_____.

Email address: _____ Phone No: _____

Signed: _____

Date: _____

**For future planning, are there other younger siblings who might want to attend Waihi East School?**

1. Name: _____ Date of Birth: ____/____/_____
2. Name: _____ Date of Birth: ____/____/_____
3. Name: _____ Date of Birth: ____/____/_____