STUDENT	STUDENT PRE-ENROLMENT PROFILE						
Date:							
Student's Name:							
Date of Birth:	Country of Birth/Visa:						
Caregiver Name:				_			
Relationship to student:							
Address:							
Home Phone:	Work Phone:						
Mobile Phone:	Email:						
In Zone: YES / NO	Year Level (circle)	9	10	11	12	13	
Previous School:							
Reasons for changing schools:							
Please supply us with the following	g document;						
☐ Evidence of Date of Birth Eg. NZ E	Birth Certificate / NZ or Australian Passp	ort / NZ	Z Citizer	nship Ce	ertificate		
OR							
■ Evidence of Residency Eg, Studer	nt Passport & Student Visa plus Parents	Passp	ort & W	ork Visa	or Resi	dency	
Proof of Address Property based Eg. and in the caregive	Internet bill, Power bill, Rates bill, Tenar vers name. If you are unable to provide,						
☐ Latest school Report							
☐ If not the parent,- proof of guare	dianship Eg: Court documents, WIN	Z, Worl	king for	families	or OT le	etter	
I agree to the information being re	leased to Waitakere College	<u> </u>					
			Pare	nt Signat	ture		
Email: enro	ol@waitakerecollege.sch	nool.	nz				