

# ATEA College International Student Application and Tuition Agreement 2024

Please complete the following in English and in clear handwriting or typed

## STUDENT DETAILS

Application Date: \_\_\_\_\_  
Name: \_\_\_\_\_ Preferred Name: \_\_\_\_\_  
Last Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_  
Gender: \_\_\_\_\_ Religion: \_\_\_\_\_  
Nationality: \_\_\_\_\_ First Language: \_\_\_\_\_  
**Address (Home Country)**  
Building/Flat: \_\_\_\_\_ Street: \_\_\_\_\_  
Suburb: \_\_\_\_\_ Town: \_\_\_\_\_  
State: \_\_\_\_\_ Post Code: \_\_\_\_\_  
Country: \_\_\_\_\_  
Home Phone: (+\_\_\_\_) \_\_\_\_\_ Student Mobile: (+\_\_\_\_) \_\_\_\_\_  
Student's Email: \_\_\_\_\_

## COURSE INFORMATION

Year Level: \_\_\_\_\_  
Grades 12 and 13 academic places are only considered if the student is currently studying Cambridge.  
Term:  Term 1  Term 2  Term 3  Term 4  
Year:  2024  2025  
Intended length of study at ATEA College: \_\_\_\_\_  
Current school: \_\_\_\_\_  
Current subjects: Subjects you want to study: \_\_\_\_\_  
Years studying English: \_\_\_\_\_ Career goal: \_\_\_\_\_

### MOTHER'S DETAILS

### FATHER'S DETAILS

Please include at least one email address and select one parent, or legal guardian, to be the main contact

|  |  |   |  |
|--|--|---|--|
| Mrs <input type="checkbox"/> Ms <input type="checkbox"/> Dr <input type="checkbox"/> | Main Contact? <input type="checkbox"/> | Mr <input type="checkbox"/> Dr <input type="checkbox"/> | Main Contact? <input type="checkbox"/> |
| First Name: _____  |  | First Name: _____                                       |  |
| Last Name: _____   |  | Last Name: _____  |  |
| Date of Birth: _____   |  | Date of Birth: _____                                    |  |
| Address: (If different to student ) _____  |  | Address: (If different to student ) _____               |  |
| Home Phone: (+____) _____  |  | Home Phone: (+____) _____                               |  |
| Mobile Phone: (+____) _____  |  | Mobile Phone: (+____) _____                             |  |
| Work Phone: (+____) _____  |  | Work Phone: (+____) _____                               |  |
| Occupation: _____  |  | Occupation: _____                                       |  |
| Email: _____   |  | Email: _____  |  |

### AGENT

I nominate the following agency to represent me:

Company Name: \_\_\_\_\_  
Agent Name: \_\_\_\_\_ Agent Email: \_\_\_\_\_

Parent or Legal Guardian Name: \_\_\_\_\_ Date: \_\_\_\_\_

## INSURANCE

The Code of Practice and New Zealand Immigration Service require all International Students studying in New Zealand to have Full Travel and Medical Insurance while in New Zealand. The insurance policy must be compliant with the New Zealand Qualification Authority and the Code of Practice requirements.

For more information on the Education (Pastoral Care of International Students) Code of Practice 2016 please see: <https://www.nzqa.govt.nz/providers-partners/education-code-of-practice>.

A TEA College is able to purchase on the Student's behalf insurance through Unicare <https://www.unicare.org/Policy/NzStudentPlan>

I would like ATEA College to purchase my insurance: Yes  No

## ACCOMMODATION ARRANGEMENTS

**Please choose from one of the following options and complete the relevant contract**

**RESIDENTIAL CAREGIVER (Homestay)**

I would like to apply for a place with a Residential Caregiver organised by the College's homestay agency.

Please complete:

- INTERNATIONAL STUDENT ACCOMMODATION AGREEMENT LIVING WITH A RESIDENTIAL CAREGIVER OR DESIGNATED CAREGIVER 2024/2025
- INTERNATIONAL STUDENT LIVING WITH A RESIDENTIAL CAREGIVER APPLICATION

**DESIGNATED CAREGIVER**

I will be living with my:

Close Relative (aunt/uncle/grandparent)                      **or**                       Close Family Friend

Please note a Designated Caregiver must be over 24 years of age, in marriage/partnership or family setting.

Please complete:

- INTERNATIONAL STUDENT ACCOMMODATION AGREEMENT LIVING WITH A RESIDENTIAL CAREGIVER OR DESIGNATED CAREGIVER 2024/2025
- and
- DESIGNATED CAREGIVER AGREEMENT – 2024/2025

**PARENTS OR LEGAL GUARDIANS**

I will be living with my:  Mother **or**  Father **or**  Both Parents/Legal Guardians

Street: ----- Home Phone: -----

Suburb: ----- Mobile Phone: -----

Post Code: ----- Email: -----

Please complete

- INTERNATIONAL STUDENT ACCOMMODATION AGREEMENT LIVING WITH A PARENT – 2023/24

## STUDENT HEALTH RECORD 2024 /2025

The information collected on this form is to assist in the case of accident or emergency, or to assess any special needs the student may have. Please complete it in full. The information will be stored securely and access is limited to the International Director, or on request, to the student his/herself.

If considered necessary, for safety reasons, a limited version may be distributed to staff members immediately responsible for Physical education or Food Technology staff.

If you consider any of the information to be confidential please enclose this form in an envelope marked “Confidential Medical Information” or you can provide additional information by emailing or you can phone the International Director and talk to them.

### STUDENT DETAILS:

Family Name: \_\_\_\_\_

First Name(s): \_\_\_\_\_

Preferred Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Country of Origin: \_\_\_\_\_

#### OFFICE USE ONLY

Address in NZ :

PARENT/CAREGIVER DETAILS NZ:

Mother’s Name: \_\_\_\_\_ Mobile: \_\_\_\_\_

Father’s Name: \_\_\_\_\_ Mobile: \_\_\_\_\_

EMERGENCY CONTACT: International Department Mobile: 027 4143221 (emergency)

#### HAS THE STUDENT EVER SUFFERED FROM: (Please complete all fields)

| Condition  | Yes | No | When | Details, Treatment, & Medications |
|--|-----|----|------|-----------------------------------|
| Allergy  |     |    |      |                                   |
| Anxiety/Depression   |     |    |      |                                   |
| Asthma   |     |    |      |                                   |
| Diabetes   |     |    |      |                                   |
| Epilepsy   |     |    |      |                                   |
| Glandular Fever  |     |    |      |                                   |
| Head Injury  |     |    |      |                                   |
| Heart Condition  |     |    |      |                                   |
| Migraines  |     |    |      |                                   |
| Rheumatic Fever  |     |    |      |                                   |
| Are there any other medical issues that could have an impact while in New Zealand? |     |    |      |                                   |

Has your child taken or does he/she currently take medication that is not listed above. Please explain.

|  |
|--|
|  |
|  |
|  |

| Does He/she Have Any Difficulty With His/Her: |     |    |  |                            |     |    |  |        |    |
|---|-----|----|--|----------------------------|-----|----|--|--------|----|
|   | Yes | No |  |                            | Yes | No |  | Yes    | No |
| Sight   |     |    |  | Hearing                    |     |    |  | Speech |    |
| Does he/she wear glasses?                     |     |    |  | Are hearing aids required? |     |    |  |        |    |
| Does he/she wear contacts?                    |     |    |  |                            |     |    |  |        |    |
| Details:                                      |     |    |  |                            |     |    |  |        |    |

**Prescription Medication:**

Bringing prescription medicine to school is discouraged. If your child needs to take medication for a chronic condition during school hours please request our **MEDICATIONS ADVICE FORM**, request your doctor complete the form. You may then send the completed form to the College, and we will make arrangements for the approved medication(s) to be kept in a classroom Personal Medications Box.

**Immunisation Details:**

**Has your child had the following immunisations?:**

|                                 | Yes | No |                                    | Yes | No |
|---------------------------------|-----|----|------------------------------------|-----|----|
| M.M.R (Measles, Mumps, Rubella) |     |    | HPV                                |     |    |
| Hepatitis B                     |     |    | Diphtheria                         |     |    |
| Meningococcal B                 |     |    | Tetanus                            |     |    |
| Pertussis (Whooping Cough)      |     |    | Tuberculosis                       |     |    |
| Polio                           |     |    | HIB (Haemophilus influenza type B) |     |    |

**In Case Of Accident or Emergency:**

Whether an accident or emergency occurs at school or out of school, and we are unable to contact you, International Director, accommodation co-ordinator to phone for an ambulance. We will endeavour to contact you immediately or as soon as possible.

I/We give permission for my/our child to be treated and agree to meet any costs incurred.

Parent or Legal Guardian Signature: \_\_\_\_\_

Date:

## **ATEA COLLEGE CODE OF CONDUCT 2024/2025**

At ATEA College it is important that all members of the College community are engaged in respectful learning relationships that support differing points of view or perspectives. Students, staff, parents and volunteers are integral parts of the College community. It is important to demonstrate respectful behaviour towards each other at all times, so that the individual and collective mana of all members of the College community is upheld in all circumstances.

Respectful behaviour can include the following:

- Adhering to the standards and protocols the College has established to ensure individual and collective mana is maintained.
- Listening attentively and carefully to others with an open mind.
- Asking questions in order to clarify and better understand other perspectives.
- Suspending judgement and providing the other party the chance to explain.
- Working towards resolution in a mutually co-operative manner.
- Using a neutral tone of voice when communicating with the other party.
- Demonstrating respectful and appropriate body language and being aware of the impact of your own and the other party's body language.
- Maintaining personal space.
- Being aware of how we talk about and with others within the College community.
- Acknowledging the cultural perspective of all involved.
- Being open and honest about any concerns or issues.
- Respecting and following the protocols of the College and shared facilities.
- Respecting diversity within the College community.

## **PRIVACY OF INFORMATION**

1. The College follows the Information Privacy Principles in the Privacy Act 2020 relating to the collection, storage, use and disclosure of personal information.
2. Information held at the offices at 21 Domain Road and will be used for the following purposes:
  - To facilitate the operation and administration of the College.
  - To maintain contact with parents.
  - To provide information to the College development office, alumni association, Ministry of Education (including the ENROL national database), NZ Qualifications Authority, Special Education Services and to other agencies pursuant to any statutory requirements (e.g. Children and Young Persons and their Families Act, contact details of school leavers to the Ministry of Social Development).
  - In an emergency, information from the file may be given to an agency such as the Police or Doctor.
3. Access to this information will be granted in accordance with the Privacy Act and Official information Act provided reasonable notice is given and that you may request the correction of any inaccurate information.

## INTERNATIONAL STUDENT CONTRACT 2024/2025

1. I agree to uphold the values of the College and abide by all College rules.
2. I agree to attend all classes, including tutor time. I agree to be punctual to all classes.
3. I agree to stay within the school grounds unless I have a leave pass and have signed out (Years 9-13 privilege). I understand I need to follow College procedures in order to obtain a leave pass.
4. I agree to participate in class, including class discussions. I agree to complete all class work and homework on time and to attend any extra tuition lessons when required.
5. I agree to wear correct uniform at all times. If there is an unavoidable problem, I agree to follow the correct uniform procedures.
6. I agree to follow all instructions from staff.
7. I agree to follow the College cyber safety and internet requirements.
8. I agree to respect other people and their property and that stealing is not allowed.
9. I agree to speak politely to staff, to other students and visitors to the College. I agree to be polite and use manners, including holding doors open for staff members and leaving room in passage ways or corridors for others to walk down.
10. I agree to follow instructions about the use of cell phones and smartwatches.
11. I understand that bullying, including physical, mental, online and emotional, is not allowed.
12. I understand that the possession and consumption of drugs, alcohol, cigarettes e-cigarettes, vaping or any legal intoxicant before, during or after school time and while attending school events or trips is not allowed.
13. I understand that continual misbehaviour, including in my accommodation, can lead to termination of my enrolment.
14. I understand I am not to travel outside the local area of ATEA College (Auckland) without prior written permission of my Parents or Legal Guardian and approval by the College.
15. I agree not to drive nor own a motor vehicle while I am a student at ATEA College unless I have been granted written permission by my Parents, or Legal Guardian, and the College. I understand that this cannot be in my first year of enrolment.
16. I understand I must complete the End of Enrolment procedures when I finish my enrolment.
17. I understand that request for late arrivals, early departures and holiday will not be approved and will be entered as UNJUSTIFIED or TRUANT on the attendance record. Failure to attend school during the prescribed school days may jeopardise my future visa applications and enrolment at ATEA College. I understand that I must attend class at all times as far as reasonably possible.

### EXECUTION: International Student Contract: 2024/2025

#### Parents/Legal Guardians

By signing below, the Parents or Legal Guardians (as applicable) confirm that they have read and understood the Agreement and agree to be bound by it in all respects:

|                      |                     |               |
|----------------------|---------------------|---------------|
| <b>Name(s):</b>      | -----               | -----         |
|                      | <b>Father</b> _____ | <b>Mother</b> |
| <b>Signature(s):</b> | -----               | -----         |
| <b>Date:</b>         | -----               | -----         |

#### Student

By signing below, the Student confirms that he/she has read and understood the Agreement and agrees to abide by the Code, the College Policies and (to the extent applicable) to the Agreement:

|                    |                         |
|--------------------|-------------------------|
| <b>Name:</b> ----- | <b>Signature:</b> ----- |
| <b>Date:</b> ----- |                         |

#### College

By signing below, the authorized signatory of the College confirms that he/she is authorized to sign on behalf of the College, and confirms that the College will be bound by the Agreement in all respects:

|                    |                         |
|--------------------|-------------------------|
| <b>Name:</b> ----- | <b>Signature:</b> ----- |
| <b>Date:</b> ----- |                         |

## PARENTAL AGREEMENT 2024/2025

The Parents or Legal Guardian of the Student agree to adhere to the following terms and conditions while the student is enrolled at the College:

1. Confirm that the details provided in this enrolment application and accompanying documentation are correct and complete and that the Parents or Legal Guardian agree to all conditions contained therein.
2. The Parent or Legal Guardian and Student acknowledge that the College may obtain at any time from any person or entity any information it requires to process and/or accept the Student for admission to the College or to perform or complete any of the other purposes under this Agreement. The Parents or Legal Guardians and the Student authorise any such person to release to the College any personal information that person holds concerning the Student and/or Parents and Legal Guardians.
3. Have read and understood all the signed contracts within this application, have had the opportunity to seek independent legal advice in respect of its content and effect, and have received sufficient information as to make an informed decision about enrolment at the College.
4. Understand that the Offer of Place will be valid for a maximum of 4 weeks unless otherwise stated. The conditions in this Agreement apply for the whole time the Student is enrolled at the College during a Period of Study. Renewal of this Agreement is at the sole and absolute discretion of the College and is subject to:
  - a. satisfactory academic performance, attendance and behaviour (both in and out of school) of the Student; and
  - b. the issue of an Offer of Place for a further Period of Study; and
  - c. The payment of Fees.
5. Understand the requirement for International Students to have maximum insurance cover for medical needs and personal loss – including fee protection.
6. Understand that all pre-existing health (including mental health) conditions must be disclosed and that non-disclosure could lead to termination of enrolment of the Student.
7. Have read and understood the College's Policies and procedures relating to the Privacy Act 2020 and the release of information, and give my consent for the College to gather and use information as outlined.
8. Understand that the Student requires a new visa for each academic year prior to being enrolled on the first day of the school year.
9. Understand that requests for late arrivals, early departures and holiday will not be approved and will be entered as UNJUSTIFIED or TRUANT on the attendance record. Failure to attend school during the prescribed school days may jeopardise the Student's future visa applications and enrolment at the College. I understand that the Student must attend class at all times in accordance with the Education Act, Immigration New Zealand, Laws of New Zealand and College Policies.
10. Understand that the College has an obligation to report any breaches of the immigration requirements to Immigration New Zealand.
11. Agree that this Agreement is subject to an Accommodation Agreement being entered into by all relevant parties.

### Conduct, Discipline and Termination

12. Agree that the Student will comply at all times with College Policies, Immigration New Zealand requirements, the Code and the Education Act and the Parents/Legal Guardians shall work with the College to ensure such compliance. This includes, without limitation, the compliance with the Code of Student Conduct, including any amendments made by the College during the Period of Enrolment.

In the event of any breach of this agreement by the Student, the Parents/Legal Guardians, the College may take any disciplinary action it considers appropriate, including terminating this Agreement, and/or suspending, excluding or expelling the Student and (if applicable) notify Immigration New Zealand of its decision to terminate the Agreement or to exclude or expel the Student.

Without limitation, the following actions shall be deemed to be breaches of this Agreement which may warrant disciplinary action:

- Refusal by the Student to obey any reasonable instruction given by any employee or officer of the College during the Period of Enrolment;
- Any breach of the Code of Conduct by the Student;
- Any breach of the Accommodation Agreement or Designated Caregiver Agreement by the Student or Parent/Legal Guardian;
- Any act by the Student during the Period of Enrolment that creates a risk to the safety of any person;
- Any act during the Period of Enrolment that jeopardises the education of any other Student;
- Any other breach of this Agreement.

Where appropriate the College will follow the process set out in the Disciplinary Policy for International Students when exercising its disciplinary powers, nothing in this Agreement shall limit the power of the College to summarily terminate this Agreement or expel or exclude the Student for serious misconduct or to suspend the Student pending investigation if the College concludes that this step is necessary for the purpose of protecting the safety of any person, including the Student.

13. Notices given under this Agreement must be in writing and given to the addresses set out in the Application Form. Those notices sent by post will be deemed to have been received ten days (10) after posting. The parties also agree that email correspondence is a suitable means of communication.

14. Unless otherwise agreed in writing between the parties, the College's responsibility for the Student begins on the first day of the period of Enrolment and ends on the last day of the Period of Enrolment, or in the event that the Student's Tuition is terminated, on the date of termination. The parties agree that any period of time in which the Student is in New Zealand before or after the Period of Enrolment will be at the risk of the Student and Parents/Legal Guardians and that the College will have no legal or moral responsibility for what occurs during this period unless otherwise agreed in writing.
15. If the College is unable to meet the Student's needs, including but not limited to physical, emotional and educational needs, this Agreement, and as such the Student's enrolment, could be terminated.
16. Nothing in this Agreement limits any rights that the Parents or Student may have under the Consumer Guarantees Act 1993.
17. The parties agree that any dispute in relation to this Agreement will be resolved in accordance with the Code and the College Policies.

No party to this Agreement is liable to the other for failing to meet its obligations under this Agreement to the extent that the failure was caused by an act of God or other circumstances beyond reasonable control.

**PARENTS/LEGAL GUARDIANS AND STUDENT'S DECLARATION AND AUTHORISATION**

We declare that the information contained in this application is true and complete. We understand that any false or incomplete information submitted in support of this application may invalidate this application and may result in the withdrawal of an Offer of Place. We agree that we have received sufficient information to make an informed decision about enrolment at the College.

Key terms:

This Contract of Enrolment includes provisions:

- i. That allow the College to discipline the Student, including by expulsion
- ii. That control and limit the Student's rights of refund when an Enrolment ends early
- iii. That require the Parents to make full disclosure of all relevant information.

This is an important legal document, please read all clauses carefully.

By signing this Agreement, you confirm that all of the information in the application is true and correct.

**Parents/Legal Guardians**

By signing below, the Parents or Legal Guardians (as applicable) confirm that they have read and understood the Agreement and agree to be bound by it in all respects:

|                      |               |               |
|----------------------|---------------|---------------|
| <b>Name(s):</b>      | <b>Father</b> | <b>Mother</b> |
| <b>Signature(s):</b> |               |               |
| <b>Date:</b>         |               |               |

**Student**

By signing below, the Student confirms that he/she has read and understood the Agreement and agrees to abide by the Code, the College Policies and (to the extent applicable) to the Agreement:

**Name:** ----- **Signature:** -----  
**Date:** -----

**College**

By signing below, the authorized signatory of the College confirms that he/she is authorized to sign on behalf of the College, and confirms that the College will be bound by the Agreement in all respects:

**Name:** ----- **Signature:** -----  
**Date:** -----



## PARENTAL AUTHORISATION FORM

### Copyright Permission

Please tick all that you agree to:

**I agree for:**

- my child's photo
- my child's art work
- my child's written work
- recordings of my child's voice or instrument playing
- video of my child

**To be used by ATEA College as follows:**

- on a poster
- in a printed document
- on the College website
- in marketing or advertising material for the College
- in a school newsletter
- in a newspaper article or television programme about the College.

### EOTC

I authorise the Residential Caregiver/Designated Caregiver of our child to approve any school sponsored activities, events or programmes.

#### Low Risk Education Outside the Classroom Activities within a 3km radius of the school site

I understand that my child may be involved in activities off the school site, within a 3km radius, under the jurisdiction of members of staff. Normal risk management and safety management processes from the College apply.

**My signature below indicates that:**

- I give permission for my child to participate in these trips.
- I am aware that all trips will still be notified by letter/email and it is my responsibility to inform the College if my child does not have permission to attend.
- I understand that it is my responsibility to inform and update the College with any medical concerns of which the staff taking these trips need to be aware.
- Any cost associated with the trip must be paid before the trip.
- Where an event involves risk exposure greater than what would typically be the case at school or occurs outside the 3km radius, separate permission will be obtained.

**Student name:** \_\_\_\_\_

**Parent name(s):**

-----

**Father**

-----

**Mother**

**Parent Signature(s):**

-----

-----

**Date:**

-----

-----

## CHECKLIST:

Please check you attached all the following documents to this application

|  | Completed |
|--|-----------|
| Fully completed Application and Tuition Agreement form — all relevant pages signed.  |           |
| Photocopy of photo page of Student's Passport – verified as a true and correct copy by a lawyer, agent, Justice of the Peace or Notary Public.   |           |
| Photocopy of Student’s latest school report — translated into English by a registered translator.  |           |
| Two (2) letters of recommendation from a trusted referee who is not related (e.g. Head of Department, coach, religious leader). This must be written on letterhead or with a school/organization stamp, and be signed.   |           |
| Handwritten letter – This should be written by the student without any assistance from Parents, or Legal Guardians, friends or dictionaries. The student must write about him/herself, what he/she likes to do, and why he/she would like to study in New Zealand and ATEA College.  |           |
| Copy of official ID containing Parents’ or Legal Guardians’ signature and date of birth (for example the signature and photo page of Parents’ or Legal Guardians’ passport, signature on a driver’s license, letter signed in front of a lawyer or Notary Public) – verified as a true and correct copy by a lawyer, agent, Justice of the Peace or Notary Public. |           |
| Copy of Student's Birth Certificate – translated by a registered translator and verified as a true and correct copy by a lawyer, agent, Justice of the Peace or Notary Public.   |           |
| Vaccination Record – evidence of what vaccinations the Student has had and when.   |           |
| Medications Advice Form – if the Student will be required to take medication(s) for a chronic condition during school hours  |           |
| Pictures of the Student with their Parents, family and friends   |           |
| An Accommodation Agreement for living with Parents/RCG/DCG [2] and a Residential Caregiver Application form (if applicable)  |           |
| Cybersafety and Internet Contract  |           |

Note: Incomplete applications may cause delays in processing. Delays in providing a complete application will inevitably jeopardise the ability to receive an Offer of Place.

Please send applications to [admin@ateacollege.com](mailto:admin@ateacollege.com)  
We appreciate files being sent in pdf format.

On receipt of a fully completed application, an English Test will be sent for the Student to complete under supervision, and a online interview will be scheduled. The Student must be able to be seen online.

Our latest ERO report can be found on the “Our School” page of our website.