

E kore rawa e monehunehu te pumanawanui ki to totou reo rangatira te mātahi o te tau ki te ura mai o te motu Te Kura Kaupapa Māori o Manawatū ki Rangiāne



Enrolment Booklet 2025

Please provide the following documentation:

1.	Birth Certificate or Passport	
2.	Immunisation Certificate	

Return this booklet and all supporting documentation to:

Te Kura Kaupapa Māori o Manawatū 88 Rhodes Drive Kelvin Grove Palmerston North 4414

Tono/Enrolment Form

Rationale

This booklet has been developed to provide tono/enrolment details for whānau who wish to enrol there tamaiti at Te Kura Kaupapa Māori o Manawatū.

Privacy Act 1993 Statement

The information entered on this form will be used by the Ministry of Education and Te Kura Kaupapa Māori o Manawatū for statistical and administrative purposes only.

Primary and Emergency Contact Details

Te Kura Kaupapa Māori o Manawatū has a process of inputting tauira records to ensure that if, in an emergency, either accident or Civil Defence; matua and kaitiaki are informed at the soonest possible opportunity. This document is aligned to the Health & Safety, and Civil Defence Policies'.

Note: All policies are available for you to read at Te Kura Kaupapa Māori o Manawatū during Kura hours and are situated in the Tari. All Policies are regularly reviewed and we welcome your comments and feedback.

Finance

Te Kura Kaupapa Māori o Manawatū is committed to providing whānau with easy options for meeting costs associated with their child's education.

Hearing and Vision Consent Form

He Puna Hauora Incorporated is an independent Māori Health Provider that provides Vision and Hearing Testing.

School Dental Service Form

Mid Central Health is the provider of free dental treatment for all students. All dental services will be carried out onsite through the Mobile Dental Service.

Publications, Video, Internet Consent and Release Agreement

This section aligns to the Publications, Video, Internet Consent and Release Agreement Policy.

Whānau Committment

It is a requirement that whānau are seen participating and supporting in kura activities. That whānau must attend our kura whānau hui Pa Harakeke.

Primary and Emergency	Contacts		
Name of Tamaiti:	- 0.00X		Li Bamy ka
Preferred Name of Tamaiti:			i i i i i i i i i i i i i i i i i i i
Date of Birth:	Birth Certificate: □	Male: □	Female: □
Kohanga Reo:		ann bar	aodina Marsal
How long did your child attend	Kohanga Reo:		
How many hours per week did Reo:	your child attend Kohanga		
Number of Older Siblings:	Number of Younger Sibl	ings:	
Is your child fully immunised?		Wants.	di gillanonois
NB: Please provide a copy of y	our child's Birth Certificate and Immu	nisation Certific	ate
Ethnicity (please tick) Maori □ Tongan □ Fijian □	Samoan □ Rarotongan □ Other □_		i o
Iwi:			
Hapū:			of the
Marae:	All Earline Commence (Commence of the Commence	the street of the	rise alta Conta
Medical Information (Please p	rovide doctor's information)		
Name:			
Medical Centre (if applicable):			The first section of the section of
Phone:			
Street Number and Name:			And with the same of the same
Suburb:		ordening of the ordening of the	
City:			
		(3.3323322	A SEPTEMBER OF THE SECOND

Primary Contact Information (Mai	in Caregiver)	
First Name:	Surname:	
Phone (hm):	Phone (wk):	
E-mail:	Cellular Phone:	
Street Number and Name:		
Suburb:		
City:		
Relationship to tamaiti:	Occupation:	
Ethnicity (please tick) Maori □ Tongan □ Fijian □ Sam Iwi:	oan □ Rarotongan □ Other □	
Нарū:		
Marae:	·	
Primary Contact Information (Ma	in Caregiver)	
First Name:	Surname:	
Phone (hm):	Phone (wk):	
E-mail:	Cellular Phone:	
Street Number and Name (if different	ent from above):	
Suburb:		
City:		
Relationship to tamaiti:	Occupation:	

Ethnicity (please tick) Maori □ Tongan □ Fijian □	☐ Samoan ☐ Rarotongan ☐ Other ☐	
Iwi:		
Hapū:		
Marae:		
Emergency Contact Informat	tion	
First Name:	Surname:	
Phone (hm):	Phone (wk):	
E-mail:	Cellular Phone:	
Street Number and Name:		
Suburb:		
City:		
Relationship to tamaiti:		
Emergency Contact Informat	ion	
First Name:	Surname:	
Phone (hm):	Phone (wk):	
E-mail:	Cellular Phone:	
Street Number and Name:		
Suburb:		
City:		
Relationship to tamaiti:		

Access Section Please complete the following sections:	ion if there is any person(s) NOT permitted to access your tamaiti/
tamariki at Kura.	
First Name:	Surname:
Comments:	
Transport Consent Te Kura Kaupapa Māori o Manawa transport as part of the Kura's Educ	atū will be going on regular outings — both walking and by vehicular cation Outside The Classroom (EOTC) programme.
I (Full Name)	
I give \square do not give \square permission EOTC outings.	n for my child named in this booklet to participate in all
Signature	

Finance

Invoices - (Whānau Accounts)

Upon enrolment of your tamaiti at kura, you will be set up with a whānau account. Provided you are not over \$200 in debit you may charge any donations, purchases, trip expenses or hākinakina fees to your account. If you are eligible for Transport Pūtea, this will be credited to your account at the start of each term. If you are over \$200 in credit you will be asked to withdraw some of this pūtea.

Kura Donation - Parents and Caregivers invest in their child's future through making a valuable contribution by way of a donation. The money received from donations enables us to provide equipment and resources which are not covered by state funding, but which are vital to providing the level of education expected of us. These donations are voluntary, tax deducatible and not for a specific purpose. Our Kura donation request is \$200 per tamaiti/per year. Again, this is a voluntary donation. You will be eligible for a tax rebate on this donation and upon request a receipt will be given to you or you can use the statements sent to you at the start of each term to submit to IRD.

Trips and Excursions - There are often off-site activities that the Kura participate in. Date/s and any associated costs are normally advertised well in advance. Mātua are asked to meet the costs associated with any of these activities, which are always kept to an absolute minimum.

Te Puāwaitanga Fund - The Te Puāwaitanga Fund of \$100 per tamaiti/per year is a savings that accumulates for your child's graduation when they reach Tau 8. \$20 per year of the \$80 is utilised to pay for your child's meal for the current year which leaves a total of \$80 per year saved. Should your child be a transfer student then the amount you pay per year will be calculated based on the amount of years your child will be at kura. Again, this is not compulsory, but if not paid will affect what your child's year group can afford to do for their graduation. See the table below to work out how much you will be expected to pay per year:

Year the Students START	Amount Payable	Formula
Year One	\$640	\$80 per year x 8 Years = \$640
Year Two	\$630	\$90 per year x 7 Years = \$630
Year Three	\$620	\$103.35 per year x 6 Years = \$620
Year Four	\$610	\$122 per year x 5 Years = \$610
Year Five	\$600	\$150 per year x 4 Years = \$600
Year Six	\$590	\$196.70 per year x 3 Years = \$590
Year Seven	\$580	\$290 per year x 2 Years = \$580
Year Eight	\$570	\$570

Purchases -

- 1. Kākāhu Kura (uniform).
- 2. Sundry items, e.g photos.

Please be aware that if your account is over the \$200 in debit limit you will not be able to charge any of these to your account

Agreement to pay the Te Puāwaitanga Fund

Iagree fo	or the Te Puāwaitanga Fund for my child/ren
to be ch	narged to my whānau account for the duration
of my child/ren's education at Te kura Kaupapa Māori o	Manawatū. I will inform the Tari should this
change.	
	D. (
Signed:	Date:

Transport Pūtea

The criteria for Transport Pūtea is based on the distance you travel from home to kura, Students under 10 years that live more than 3.2 kilometres from Kura are eligible, however the amount you receive is based on how many days your tamaiti or tamariki attend school during the term. It is the whānau's responsibility to inform the Tari of any change of circumstances that could change their entitlement to this Pūtea; eg: Change of Address. We also request that you provide confirmation of your address; ie Letter from an organisation dated in the last four months with your name and address eg PNCC Rates, Power Account, Telephone Account — please note that we only want a photocopy of the letterhead with your name and address no other personal details are required. Any Transport Pūtea entitlement will in the first instance be used to offset any outstanding debt owing to the Kura. Any surplus will be credited to your whānau account. Upon request a refund cheque can be issued.

If you think you may be eligible for Transport Pūtea please fill in the form attached and don't forget too provide us with proof of address.

School Transport Pūtea Application for Assistance Form:

Privacy Act 1993 Statement: The information entered on this form will be used by the Ministry of Education and Te Kura Kaupapa Māori o Manawatū only for statistical information and the purpose of funding school transport pūtea.

SECTION A: To be com	pleted by Parent/Care	giver		
1. Student Details (Please p	rint clearly)			
WHĀNAU NAME:				
RESIDENTIAL ADDRESS:	House Number:			
	Street/Road Name:			
	Suburb:			
	City/Town:			
DISTANCE ONE WAY FROM	M HOME TO KURA (by Shor	test Route): KM		
and the second second second				
Name all students in your	household applying for, or	already receiving Transport Pates:		
First Names:		DOB:		
Last Name:		Gender: Male Female		
First Names:		DOB:		
Last Name:		Gender: Male Female		
First Names:		DOB:		
Last Name:		Gender: Male Female		
First Names:	First Names:			
Last Name:		Gender: Male Female		
2. Parent/Caregiver Details (Please print clearly)				
TITLE:	(Please Circle): Mr Mrs	Ms Miss No Title		
NAME:	First Names:			
	Last Name:			
ADDRESS:				
PHONE NUMBER:	Home:	Cell:		
EMAIL ADDRESS:				

。 Te Kura Kaupapa Maori o Manawata

5. Parent/Caregiver Declaration	
I declare that the information entered on this form is true and conto the information entered on this form.	orrect. I undertake to notify the Kura of
Signature of Parent/Caregiver:	Date:
SECTION B: To be completed by the Principal a	nd/or authorised person
I declare the above applicant is:	
Eligible to receive School Transport Assistance	
Student Name:	Start Date:
Ineligible to receive School Transport Assistance	
Signature of Principal:	Date:

Hearing & Vision Consent

This section requests your consent for the He Puna Hauora Nurse and/or Vision Hearing Technicians to carry out the following (please circle the appropriate answer):

Hearing & Middle Ear/Tympanometry Screening Tests

Yes / No

Vision Screening Tests

Yes / No

Ear and eye checks can he requested 11) teachers, principals, caregivers or parents

Any results will be sent on to your GP 'Doctor to ensure better co-ordinated care of your tamaiti.

Is your child up-to-date with their immunisations?	e i de la constitución de la con	Yes / No
We can provide immunisation programmes as required	· Personies Automoral Thank	
		X7 / NT .
Has your child had any ear problems?		Yes / No
Please provide more details		Has your
child had grommets inserted into their ears?		Yes/No
If so please provide more details.		er groupe company a subdividual de la company de la co
Does your child wear glasses or do they have difficulty with their vision?		Yes / No
If so, please provide more details.	High	ner to musepi
Please list any other health conditions or concerns	your child may have	genderic met in men in de trippiniste in protessional
Child's Full Name:	D.O.B:	
Parent/Guardian Full Name:		
Signature:	Date:	

If you have any queries or concerns, please contact Dale Phillips-Tuivaga, Registered Nurse.

He Puna Hauora:

Unit 5 /160 Grey Street

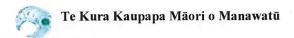
phone:

356 7037

Enrolment Form For the School Dental Service

Some medical conditions and some medicines affect dental care. To help the school Dental Clinic take good care of your tamaiti, please answer the following questions:

Has your tamaiti ever had / has any of the follow	ing? (Plea	se ✓ t	he appro	priate	□)		
Rheumatic Fever	Vac		NI.				
Rheumatic FeverA Heart Condition	Yes		No No	Ц			
	Yes		No				
• Diabetes	Yes		No		#A riq iy		
• Epilepsy	Yes		No				
• Hepatitis A, B or C	Yes		No				
• Asthma	Yes	400	No				
• Bleeding Trouble	Yes		No				
• HIV /Aids	Yes		No				
Other Medical Condition	Yes		No				
• An allergy to a Drug or Substance	Yes		No				
(If yes please describe):							
If yes, please state the name of the drug (it's usual Reason for taking the drug:		- 12 11 20 16				serveral control	
Permission to contact the doctor if necessary		e a fee e especie	Yes		No	Stave.	Park C
You will be advised of any specific treatment requal (full Name)	aired.						
understand no treatment will proceed until a con	npleted sig	ned c	onsent f	orm is	returne	d each i	recall.
I wish, do not wish (circle one) to enrol my tamair	ti at the Sc	hool (Clinic				
Child's full name:			D.O.B:				
Signature:		Constitution (Constitution (Co	eli delikati likki ola turusi un esistema ana a				nazada e ele con en con il con e en de acestado en en



Publications, Video, Internet Consent And Release Agreement

Students who attend school at Te Kura Kaupapa Māori o Manawatū (TKKMoM) are occasionally asked to be a part of TKKMoM publicity, publications and/or public relations activities. In order to guarantee student privacy and ensure you agree with your child's participation, TKKMoM asks that you sign this form and return to the Kura. The form reference below indicates approval for the student's name, picture, art, written work, voice, verbal statements or portraits (video or still) to appear in school publicity publications, videos or on TKKMoM website. For example, pictures and articles about school activities may appear in local newspapers or government publications. These pictures and articles may or may not personally identify the student. TKKMoM may also us the pictures and/or videos in subsequent years.

Te Kura Kaupapa Māori o Manawatū agrees that the student's name, picture, art, written work, voice, verbal statements, portraits (video or still) shall only be used for the public relations, public information, school promotion, publicity, and instruction.

If the Student and Parent/Guardian understand and agree that (please tick check boxes):

- No monetary consideration shall be paid
- > Consent and release have been given without coercion or duress
- > This agreement is binding upon heirs and/or future legal representatives
- > The photo, video or student statements may be used in subsequent years

If the Student and Parent/Guardian wish to rescind this agreement they may do so at any time with written notice.

This release form applies to Te Kura Kaupapa Māori o Manawatū publications and programming and is not transferable to any commercial media enterprise

Full Name		
	and a substitution of the	ie5}
Signature	Date	
L No L	Yes to unity to the decign if marcisales Yes	101

TKKM o Manawatu Background Information for Parents of Primary and Intermediate Students

Dear parent(s)*,

This background information may be helpful as you read through and discuss the cybersafety use agreement with your child.

In conjunction with the cybersafety There are the sixteen rules to help keep students cybersafe as outlined in the cybersafety use agreement that you have been asked to sign.

- 1. I know I cannot use the school ICT equipment until my parent(s) have signed the use agreement and it has been returned to school.
- 2. I can only use the computers and other school ICT equipment for my school work.
- 3. If I am unsure whether I am allowed to do something involving ICT, I will ask the teacher first.
- 4. If I have my own user name, I will log on only with that user name. I will not allow anyone else to use my user name.
- 5. I will not tell anyone else my password.
- 6. I can only go online or access the Internet at school when a teacher gives permission and an adult is present.
- 7. I understand that I must not, at any time use the Internet, email, mobile phones or any ICT equipment to be mean, rude, offensive or to bully, harass, or in any way harm anyone else connected to our school, or the school itself, even if it is meant as a 'joke'.
- 8. While at school, I will not:
 - **a.** Attempt to search for things online I know are not acceptable at our school. This could include anything that is rude or violent or uses unacceptable language such as swearing
 - **b.** Make any attempt to get around, or bypass, security, monitoring and filtering that is in place at our school.
- 9. If I find anything that upsets me, is mean or rude, or things I know are unacceptable at our school, I will not show others, I will click on the Hector Safety Button or turn off the screen and get a teacher straight away.
- **10.** I understand that I must not download or copy any files such as music, videos, games or programmes without the permission of a teacher. This is to ensure we are following copyright laws.
- 11. I must have a letter from home and permission from the school before I bring any ICT equipment/ device from home. This includes things like mobile phones, iPods, games, cameras, and USB drives.
- 12. I will not connect any device (such as a USB drive, camera or phone) to school ICT or run any software without a teacher's permission. This includes wireless technologies.
- 13. The school cybersafety rules apply to any ICT brought to school, like a mobile phone.
- 14. I will ask my teacher's permission before I put any personal information online. I will also get permission from any other person involved. Personal information includes: name, address, email address, phone numbers, and photos.
- 15. I will respect all school ICT and treat ICT equipment/devices with care. This includes not intentionally disrupting the smooth running of any school ICT systems, not attempting to hack or gain unauthorised access to any system, following all school cybersafety rules, not joining in if other students choose to be irresponsible with ICT, and reporting any breakages/damage to a staff member.
- 16. I understand that if I break these rules, the school may need to inform my parent(s). In serious cases the school may take disciplinary action against me. I also understand that my family may be charged for repair costs.
 - * The term 'parent' used throughout this document also refers to caregivers and legal guardians.

- 9. If I find anything mean or rude or things I know are not acceptable at our school on any ICT, I will:
- Not show others
 Turn off the screen and
 Get a teacher straight away.
- 10. I understand that I must not download or copy any files such as music, videos, games or programmes without the permission of a teacher. This is to ensure we are following copyright laws.
- 11. I must have a letter from home and permission from school before I bring any ICT equipment/device from home. This includes things like mobile phones, iPods, games, cameras, and USB drives.
- 12. I will not connect any device (such as a USB drive, camera or phone) to school ICT or run any software, without a teacher's permission. This includes all wireless technologies.
- 13. The school cybersafety rules apply to any ICT brought to school like a mobile phone.
- 14. I will ask my teacher's permission before giving out any personal information online. I will also get permission from any other person involved.

Personal Information includes:

- Name
- Address
- · Email address
- Phone numbers
- Photos.
- 15. I will respect all school ICT and will treat all ICT equipment/devices with care. This includes:
 - Not intentionally disrupting the smooth running of any school ICT systems
 - Not attempting to hack or gain unauthorised access to any system
 - Following all school cybersafety rules, and not joining in if other students choose to be irresponsible with ICT
 - Reporting any breakages/damage to a staff member.
- 16. I understand that if I break these rules, the school may need to inform my parents. In serious cases the school may take disciplinary action against me. I also understand that my family may be charged for repair costs.

SECTIONC TKKN O MANAWATU CYBERSAFETY USE AGREEMENT FORM

To the parent/caregiver/legal guardian, please:

Read this page carefully to check that you understand your responsibilities under this agreement

Sign the appropriate section on this form

- 3. Detach and return this form to the school office
- 4. Keep the document for future reference, as well as the copy of this signed page which the school

I understand that TKKM o Manawatu will:

- Do its best to enhance learning through the safe use of ICT. This includes working to restrict access to inappropriate, illegal or harmful material on the Internet or school ICT equipment/devices at school, or at school-related activities
- Work progressively with children and their families to encourage and develop an understanding of the importance of cybersafety through education designed to complement and support the use agreement initiative. This includes providing children with strategies to keep themselves safe in
- Keep a copy of this signed use agreement on file
- Respond to any breaches in an appropriate manner
- Welcome enquiries from parents or students about cybersafety issues.

My responsibilities include:

- I will read this cybersafety use agreement document
- I will discuss the information with my child and explain why it is important
- I will return the signed agreement to the school
- I will support the school's cybersafety programme by encouraging my child to follow the cybersafety rules, and to always ask the teacher if they are unsure about any use of ICT
- I will contact the principal or school cybersafety manager to discuss any questions I might have about cybersafety and/or this use agreement and I am welcome to do this at any time.

Additional information can be found on the NetSafe website www.netsafe.org.nz/ua Please detach and return this section to school. I have read this cybersafety use agreement and I am aware of the school's initiatives to maintain a cybersafe learning environment, including my child's responsibilities. Name of parent/caregiver/legal guardian: Parent's signature: Date:

Pleasemote:

This agreement for your child will remain in force as long as he/she is enrolled at this school. If it becomes necessary to add/amend any information or rule, parents will be advised in writing. There will be an reminder of the agreement distributed annually.





Te Kura Kaupapa Māori o Manawatū

Te Kura Kaupapa Māori o Manawatū Student Information Consent Form

Te Kura Kaupapa Māori o Manawatū Student Information Consent Form

Images of our students (photographs, video clips, etc), and examples of their school work, are sometimes published in our newsletters, on our school website, and other online channels such as the school/class blogs, Facebook page, YouTube, etc. All staff must check with the tari before information is released on social media.

We publish student material to celebrate students' work and achievement, to encourage students to participate in our school community, and to promote the school.

We believe it is important to celebrate students' achievements, but are aware of the potential risks when such personal information or material is published online.

In the interest of safety and security we require parents to give consent before publication. With consent, we share no more than a student's first name, image, or work in the school newsletter, on the school website, or in the wider online community. All staff will check with the tari before information is released on social media.

	Please indicate your wishes by ticking the relevant box:
And the state of t	I give permission for my child's name, image, or work to be published in the school newsletter, on the school website, or the wider online community (as indicated above).
Canada	I DO NOT give permission for my child's name, image, or work to be published in the school newsletter, on the school website, or the wider online community (as indicated above).
Student's	
name:	
I	Parent / legal guardian / caregiver <i>(circle as applicable)</i>
Name:	
Signature: _	Date: / /

Last scheduled review
Last internal review

Term 1 2018



Whānau Name:
Emergency Contact cell phone number:
I have child/ren attending Te Kura Kaupapa Māori o Manawatū.
In the event of an earthquake my parents / caregiver expect me to:
Remain at school until collected
(Name of person/s who will collect your child/ren from school:
I will be collecting my child/ren from:
Hard Courts (Best option):
Signature: