

# Bayview Primary School

Bayview Rd Glenfield

Auckland 0629

Phone: 09 444 2222

Email: [office@bayview.school.nz](mailto:office@bayview.school.nz)



## OUT-OF-ZONE BALLOT APPLICATION 2018

Out-of-zone enrolment applications are now being accepted for entry into Bayview Primary School through the out-of-zone ballot. Please check carefully the entry level and priority for your child to ensure they are in the correct ballot draw.

If you reside out-of-zone and you wish for your child to be considered for enrolment through the out-of-zone ballot, you will need to complete this Ballot Application Form. Please return

the completed application form to the school no later than **4:00pm on the application closing date shown below.**

Parents will be sent results of the outcome of the ballot within three school days of the ballot being held. Please allow for postage delays. If you have any queries, please contact the school office on **(09) 444 2222.**

**There are 40 spaces available in this years ballot draw.**

### APPLICATIONS OPEN

TUESDAY  
12 SEPTEMBER 2017

### APPLICATIONS CLOSE

WEDNESDAY  
18 OCTOBER 2017  
NO LATER THAN 4 PM

### BALLOT DRAWN

WEDNESDAY  
25 OCTOBER 2017

Learning is Freedom

# PERSONAL DETAILS

This section must be completed by parents or legal guardians.

## CHILD'S DETAILS

Expected Start Date
Family Name
Middle Name
Legal First Name
Preferred First Name
Date of Birth

Entry Level (Circle)	New Entrant	Y1	Y2	Y3	Y4	Y5	Y6
Gender	<input type="checkbox"/> MALE	<input type="checkbox"/> FEMALE					
Home Address	<hr/> <hr/> <hr/> <hr/>						

## PARENT/GUARDIAN 1

Relationship to Child	
First Name	
Family Name	
Home Address	<hr/> <hr/> <hr/> <hr/>
Occupation	
Contact Phone	
Email	

## PARENT/GUARDIAN 2

Relationship to Child	
First Name	
Family Name	
Home Address	<hr/> <hr/> <hr/> <hr/>
Occupation	
Contact Phone	
Email	

Should a ballot be necessary to determine out-of-zone placements at Bayview Primary School, the details given in this application will be used in such a ballot. Applications for out-of-zone enrolments will be processed in the following order of priority. **Please tick which priority you are applying under:**

- |   |  |  |
|---|--|--|
| <input type="checkbox"/> 1. Siblings of current students* | <input type="checkbox"/> 3. Children of former students                              | <input type="checkbox"/> 5. All other applicants |
| <input type="checkbox"/> 2. Siblings of former students** | <input type="checkbox"/> 4. Children of a Board member / Children of Board employees |  |

\*Name of **CURRENT** Student/Sibling at Bayview Primary School

Date started at school	<input type="text" value=" / /"/>	Date left school	<input type="text" value=" / /"/>	Date of Birth	<input type="text" value=" / /"/>
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\*\*Name of **FORMER** Student/Sibling at Bayview Primary School

Date started at school	<input type="text" value=" / /"/>	Date left school	<input type="text" value=" / /"/>	Date of Birth	<input type="text" value=" / /"/>
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Parent/Guardian Signature
<b>X</b>

Date
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**THIS APPLICATION FORM SHOULD BE RETURNED TO THE SCHOOL NO LATER THAN 4PM WEDNESDAY 18 OCTOBER 2017. BALLOT DRAWN: 25 OCTOBER 2017**