Bayview School

Empower Our Future

OUT-OF-ZONE | BALLOT APPLICATION 2027

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 into 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 **3:00pm on the application closing date shown below.**

Parents will be sent results of the outcomes 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 30 spaces available in this years ballot draw.

APPLICATIONS OPEN	**APPLICATIONS CLOSE**	**BALLOT DRAWN**
TUESDAY 1st SEPTEMBER 2026	WEDNESDAY 14th OCTOBER 2026 NO LATER THAN 3 PM	(IF REQUIRED) WEDNESDAY 21st OCTOBER 2026

www.bayview.school.nz

60 Bayview Road, Bayview 0629 **09 444 2222** **office@bayview.school.nz**

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 (Tick Box) ☐ New Entrant ☐ Y1 ☐ Y2 ☐ Y3 ☐ Y4 ☐ Y5 ☐ Y6

Gender ☐ MALE ☐ FEMALE

Home Address

PARENT/GUARDIAN 1

Relationship to Child

First Name

Home Address

Occupation

Contact Phone

Email

PARENT/GUARDIAN 2

Relationship to Child

First Name

Home Address

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:

1. Siblings of current students*
2. Siblings of former students**
3. Children of former students
4. Children of a Board Member/ Children of Board employees
5. All other applicants

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

Date started at school / / Date left school / / Date of birth / /

Name of **FORMER Student/Sibling at Bayview Primary School

Date started at school / / Date left school / / Date of birth / /

Parent/Guardian Signature

X

DATE

THIS APPLICATION FORM SHOULD BE RETURNED TO THE SCHOOL NO LATER THAN WEDNESDAY 14TH OCTOBER 2026.

BALLOT DRAWN (IF REQUIRED) 21ST OCTOBER 2026.