

School Reports: Please attach a copy of all subject reports for the current school year
Essay on 'YOU' Please write about yourself and return with your application
I would like to study the following subjects at school:
What is your current English language ability? Beginner <input type="checkbox"/> Intermediate <input type="checkbox"/> Advanced <input type="checkbox"/>
The school reserves the right to place students according to their language ability and academic performance
When I leave school I intend to study further for state qualifications aimed at, e.g. a university degree in (subject), a polytechnic degree/certificate/diploma in (subject), teacher training:
How did you find out about this school? (a) From an Education Agency (name) (b) From the NZ Embassy or High Commission (c) From a friend of relative
What type of accommodation would be preferred? Hostel <input type="checkbox"/> Homestay <input type="checkbox"/> Please tick <input checked="" type="checkbox"/> the appropriate box
Health Problems
Overseas students must take out a comprehensive travel and health insurance before coming to New Zealand

I request that _____ be admitted to Gisborne Boys' High School. I have read the conditions for Parents, Students and the School as defined in the International Student Enrolment Folder and I agree to accept and follow all school and hostel/homestay rules. I have read and understood the 'Gisborne Boys' High School Refunds Policy for International Students'. I agree to the school acting on my behalf in an emergency medical situation where authorization consent documents may need to be signed.

Signature of Father or Guardian: _____

Signature of Mother or Guardian: _____

Signature of Student: _____

Date: _____

Please forward this application form with supporting information, and the application for accommodation to:
The Director of International Students
 Gisborne Boys' High School
 Private Bag 7002
 GISBORNE

Should your application be successful, you will receive a Letter of Acceptance. However, you will need to pay the year's fees before an Offer of Place and a student Visa will be granted



Homestay Student Profile

To be completed by Student and/or Agent

Last Name		First Name/s	
I am usually called		Religion	
Street		Postal Code	
City		Country	
Area Code/Phone Number		Fax Number	Email
Citizenship		Date of Birth	Place of Birth
Height	Weight (kg)	Eye Colour	Hair Colour

Father or Legal Guardian

Last Name		First Name/s	
Street	City	Country & Post Code	
Area Code/Phone Number		Fax Number	

Mother or Legal Guardian

Last Name		First Name/s	
Street	City	Country & Post Code	
Area Code/Phone Number		Fax Number	

Brothers and Sisters

Name	Age	Sex M/F	School/Occupation

Nearest relative or friend to contact if parent or legal guardian is not available (2 please)

Name	Area Code/Phone Number	Relationship
Name	Area Code/Phone Number	Relationship
List hobbies, interests, including sports you participate in, in order of importance to you		
What are your household responsibilities?		
Indicate any part-time jobs or work experience you may have had		
Do you have relatives or friends in your host country, if so where?		
Indicate the foreign languages you speak and/or have studied		
Language	Years of study	
How do you feel about learning about a new and different language and culture?		
Do you want to be part of the homestay family's activities? (e.g. visiting relatives, social functions)		
I would prefer to stay with a family with: (Please tick \surd the appropriate boxes)		
no children	<input type="checkbox"/>	younger children <input type="checkbox"/> children my age <input type="checkbox"/> no smoking <input type="checkbox"/>
I would prefer a family with:		
pets (for example, cat or dog) (most New Zealand families have pets)		<input type="checkbox"/> no pets <input type="checkbox"/>
My religion is:		
<input type="checkbox"/> Buddhist	<input type="checkbox"/> Christian	<input type="checkbox"/> Muslim <input type="checkbox"/> Other _____ (please state)
I play a musical instrument:	yes <input type="checkbox"/> no <input type="checkbox"/>	Please state what _____
Do you smoke?	yes <input type="checkbox"/> no <input type="checkbox"/>	

Medical

Indicate with an X if you have had one of the following illnesses

	Yes	No		Yes	No		Yes	No
Asthma	<input type="checkbox"/>	<input type="checkbox"/>	Eczema	<input type="checkbox"/>	<input type="checkbox"/>	Rheumatic Fever	<input type="checkbox"/>	<input type="checkbox"/>
Cancer/Tumors	<input type="checkbox"/>	<input type="checkbox"/>	Hepatitis	<input type="checkbox"/>	<input type="checkbox"/>	Rubella	<input type="checkbox"/>	<input type="checkbox"/>
Chickenpox	<input type="checkbox"/>	<input type="checkbox"/>	Measles	<input type="checkbox"/>	<input type="checkbox"/>	Scarlet Fever	<input type="checkbox"/>	<input type="checkbox"/>
Convulsive Disorder	<input type="checkbox"/>	<input type="checkbox"/>	Migraine/Headaches	<input type="checkbox"/>	<input type="checkbox"/>	Thyroid Disease	<input type="checkbox"/>	<input type="checkbox"/>
Diabetes	<input type="checkbox"/>	<input type="checkbox"/>	Mumps	<input type="checkbox"/>	<input type="checkbox"/>	Ulcer	<input type="checkbox"/>	<input type="checkbox"/>
Dyslexia	<input type="checkbox"/>	<input type="checkbox"/>	Nervous/Mental/ Disturbance	<input type="checkbox"/>	<input type="checkbox"/>	Urological Problems	<input type="checkbox"/>	<input type="checkbox"/>
Eating Disorder	<input type="checkbox"/>	<input type="checkbox"/>	Whooping Cough	<input type="checkbox"/>	<input type="checkbox"/>	Physical Handicaps	<input type="checkbox"/>	<input type="checkbox"/>

Are there any health conditions i.e.allergies, we have to take into consideration by any normal host family? If yes please explain.

If you will be required to take any prescription medications during your stay, please specify which medications and for what condition.

Do you have an allergic reaction to any medication or anesthetics?

Do you have any special Dietary requirements e.g. Vegetarian

There is a FOUR week trial period for both student and the homestay family. After this time, the Homestay Manager will interview you and your homestay family, separately, and if all is well, then both of you will sign an agreement to continue with the homestay. If it is not working satisfactorily, other arrangements will be made.

You are expected to take part in family life and daily routines.

I guarantee the good behaviour of the student in New Zealand

My parents and I understand these conditions and agree to these requirements.

Signature of Applicant: _____

Signature of Mother or Father: _____

Date: _____