

**FORM OF APPLICATION FOR A BORDER
AT THE DARGAVILLE HIGH SCHOOL HOSTEL**

Dargaville High School Hostel commencing _____

Child's Name in full: _____

Date of Birth: _____ Present School: _____

Class: _____

Names of Parents/Caregivers: Mr _____

Mrs _____

Address of Parents/Caregivers: _____

Telephone: _____

Health: Any remarks concerning child's health, hearing, sight etc (a medical certificate of good health is required on admission)

Do you wish your child to be the patient of a particular Doctor? Yes/No

If Yes, give Doctor's name: _____

Do you wish your child to be the patient of a particular Dentist? Yes/No

If Yes, give Dentist's name: _____

Can your child travel daily to any other Secondary School? Yes/No

If yes, please give name of school: _____

Is the course desired available at that school? Yes/No

Have you any special reason for wishing your child to attend Dargaville High School?

Bursaries/Scholarships Information

Distance from your home to the nearest Secondary School? _____

Distance from your home to the nearest Secondary School transport? _____ km

Bursaries: Tick the appropriate box, if any, for those you will seek.

SECONDARY

TECHNICAL

BOARDING

(All bursary forms are available through the school)

PLEASE ENSURE THAT ALL QUESTIONS ARE ANSWERED
PLEASE COMPLETE BOTH SIDES OF THIS APPLICATION

Office Use:
Date:
Receipt No:

**Declaration by parent/caregiver of prospective boarder
at Dargaville High School.**

1. I agree to keep in regular contact (at least once a term) with the Hostel Manager.
2. I realise the importance of notifying the Hostel/school of any behaviour problems my child may have.
3. I understand that my child may only be in the hostel from 3.10pm Monday to 8.34am Friday of each school week unless special arrangements have been made with the Manager.
4. I understand that my child needs to be provided with lunch from home – Mondays only.
5. I understand and agree that while my child is in the Hostel, he/she is under the control and supervision of the Principal and Hostel management staff.
6. Permission to leave the Hostel to attend a function or to visit outside of school hours must be sought in writing if the child is not in the care of his/her own parents, guardians or staff.
7. Permission to leave the Hostel after school must be sought in advance from the Hostel manager.
8. All places granted in the Dargaville High School hostel are subject to review at anytime. There is no automatic right of renewal from year to year. Withdrawal of a right to a place in the Hostel will be made by the Hostel Committee of the Board of Trustees with a right of appeal to the full Board.
9. Any matters dealing with my child's schooling will be discussed with the Principal.
10. Boarding Bursaries are paid to the school from the Ministry of Education several weeks into the new term. The school then refunds the parents or credits their Hostel fee account if the bursary has been assigned.
11. Boarding fees are required to be paid at the commencement of each term, the amount being that set by the DHS Board of Trustees. The current fees are NZ \$1200 per term. I agree that if a debt collection agency is employed to recover the cost of any outstanding amount the recovery cost will be added to my account.
12. I agree to the scale of fees and the rules and regulations of the Hostel and school. I have read the notes above and accept responsibility for the payment of fees.
13. A REGISTRATION FEE OF NZ \$25 is to be forwarded with this application.
14. I understand and agree that no alcohol, cigarettes, drugs or pets are permitted in the hostel. Expulsion from the hostel will result if my child is found guilty o breaking these rules.
15. This form together with the registration fee should be returned to
Dargaville High School, Plunket Street, Dargaville, New Zealand.

Parent/Caregiver Signature

Boarder Signature

Date: _____

Registration Fee: _____