



Doris Innes House Trust Boarding Scholarship Application for 2020

Section 1 Doris Innes House Scholarship Application

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SCHOLARSHIP CRITERIA

Boarding Scholarships are offered by Doris Innes House Trust to enable students who are permanent residents of New Zealand to attend Diocesan School for Girls. Boarding is available from Year 9.

The criteria for selection is excellence and achievement in one or more of the following areas:

- Academic
- Arts
- Sport
- Leadership

Contribution to school and boarding life will also be considered.

The Scholarship will be available for the duration of a student's time at Diocesan School for Girls but will be subject to the student's reports indicating a continued positive attitude towards academic study, a high level of achievement and commitment to a sport and/or cultural activity, full and enthusiastic participation in the wider life of the School and fulfilling the School's expectations as a role model to other students, particularly in the boarding environment.

PLEASE RETURN THIS COMPLETED FORM ALONG WITH THE FOLLOWING DOCUMENTS BY FRIDAY 22 FEBRUARY 2019

- A recent photograph
- Photocopy of NZ birth certificate or passport
- For students not born in New Zealand a photocopy of their foreign passport with residency visa
- Copy of student's mid-year and end of year 2018 school reports
- If you are a senior student, please attach a copy of all your academic results e.g. NCEA results
- Copies of supporting documentation and certificates
- Photocopy of any educational assessments
- A brief handwritten statement by the student covering why she wishes to attend Diocesan School for Girls, what she hopes to achieve while attending Diocesan School for Girls and why she thinks she is deserving of a Boarding scholarship
- A registration fee of \$250 is payable by direct transfer to 03-0195-0013812-00. Please use your daughter's name as a reference.

Please post your completed application to:
Diocesan School for Girls
Private Bag 99939
Newmarket
Auckland 1149
Attn: Kate Jones, Admissions Director

STUDENT INFORMATION		
First Names	Surname	Attach photo here
Preferred Name	Date of Birth	
Present School	Present Year Level	
Previous Pre-school/School	Nationality	
Religion	Home Language	

ENTRY INFORMATION								
Year of Entry	20_____	Term starting	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	Day Student <input type="checkbox"/>	Boarder <input type="checkbox"/>
Year Level	Foundation <input type="checkbox"/>	Y1 <input type="checkbox"/>	Y2 <input type="checkbox"/>	Y3 <input type="checkbox"/>	Y4 <input type="checkbox"/>	Y5 <input type="checkbox"/>	Y6 <input type="checkbox"/>	
	Y7 <input type="checkbox"/>	Y8 <input type="checkbox"/>	Y9 <input type="checkbox"/>	Y10 <input type="checkbox"/>	Y11 <input type="checkbox"/>	Y12 <input type="checkbox"/>	Y13 <input type="checkbox"/>	

FAMILY INFORMATION	
Parent 1/Guardian	Parent 2/Guardian
Relationship to Student	Relationship to Student
Title	Title
Surname	Surname
First Names	First Names
Preferred Name	Preferred Name
Home address	Home address
Suburb	Suburb
City	City
Postcode	Postcode
Country	Country
Postal address if different to above	Postal address if different to above
Home Phone	Home Phone
Mobile	Mobile
Work Phone	Work Phone
Email	Email
Occupation	Occupation
Business Name	Business Name

ADDITIONAL GUARDIAN CONTACT DETAILS (if applicable)	
Relationship to Student	Title
Surname	First Names
Preferred Name	Home Phone
Mobile	Email
Home address	Postal address (if different from home address)

ADDITIONAL INFORMATION

Please include information relating to the past two years only. Please also include any documents to support information below.

List involvement in school activities in the last two years:

List involvement in community activities or other leisure, sporting and cultural interests outside school:

List any scholarships, special awards or prizes received:

List any other qualifications obtained to date eg, music, speech etc:

DECLARATION

I/We have read this application and am/are aware of the nature and conditions of the Scholarship. I/We am/are aware that personal information contained in this application will be made available to members of the Scholarship Selection Committee. Doris Innes House Trust undertakes to store this application in a secure place in the event that the student is successful in gaining a scholarship and to destroy this application to preserve its confidentiality if the student is not awarded a scholarship.

Signature of Parent	Signature of Parent
Date	Date

FEES

Parents completing this form are responsible for payment of fees. The value of a Boarding Scholarship is 50% of the boarding fee for each year the Scholarship is held. The Scholarship is paid in four equal payments of 50% of the boarding fee due at the beginning of each school term. The balance of each term's boarding fee is to be paid by the person responsible for paying fees to Diocesan School for Girls.

All amounts payable to Diocesan School for Girls must be kept up to date for the Boarding Scholarship to be retained.

In addition it is possible to nominate further persons/organisations who will also be responsible for payment of fees.

FURTHER PERSON(S) OR ORGANISATION(S) RESPONSIBLE FOR PAYMENT OF FEES (to be completed where applicable)

Name of person(s) or organisation(s)	
Address	
Email	
Home Phone	Mobile Phone
Signature	Date

This application form is to be read in conjunction with the fees notice.

If any details given on the Application Form are incorrect or false, the Doris Innes House Trust may withdraw the Boarding Scholarship at any time.

PRIVACY ACT 1993

The information in relation to this Boarding Scholarship Application is retained by Doris Innes House Trust and will be used for the following purposes;

- To maintain contact with parents as required.
- To facilitate the operation and administration of the Doris Innes House Trust.



Doris Innes House Trust Boarding Scholarship Application for 2020

Section 2 Diocesan School for Girls Application Form

APPLICATION FOR ENROLMENT

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Be more than
you ever imagined

STUDENT INFORMATION

First Names	Surname	Attach photo here
Preferred Name	Date of Birth	
Present School	Present Year Level	
Previous Pre-school/School	Nationality	
Religion	Home Language	

ENTRY INFORMATION

Year of Entry 20_____	Term starting 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/>	Day Student <input type="checkbox"/>	Boarder <input type="checkbox"/>
Year Level	Foundation <input type="checkbox"/> Y1 <input type="checkbox"/> Y2 <input type="checkbox"/> Y3 <input type="checkbox"/> Y4 <input type="checkbox"/> Y5 <input type="checkbox"/> Y6 <input type="checkbox"/>	Y7 <input type="checkbox"/> Y8 <input type="checkbox"/> Y9 <input type="checkbox"/> Y10 <input type="checkbox"/> Y11 <input type="checkbox"/> Y12 <input type="checkbox"/> Y13 <input type="checkbox"/>	

FAMILY INFORMATION

Parent 1/Guardian	Parent 2/Guardian
Relationship to Student	Relationship to Student
Title	Title
Surname	Surname
First Names	First Names
Preferred Name	Preferred Name
Home address	Home address
Suburb	Suburb
City	City
Postcode	Postcode
Country	Country
Postal address if different to above	Postal address if different to above
Home Phone	Home Phone
Mobile	Mobile
Work Phone	Work Phone
Email	Email
Occupation	Occupation
Business Name	Business Name

ADDITIONAL GUARDIAN CONTACT DETAILS (if applicable)

Relationship to Student	Title
Surname	First Names
Preferred Name	Home Phone
Mobile	Email
Home address	Postal address (if different from home address)

FAMILY ARRANGEMENTS

The student lives with Both parents Shared care Father Mother

Other If other, please specify.

Is there a court order in relation to the student ? Yes No

If yes, please attach a copy.

DIOCESAN CONNECTIONS

Does the student have any sisters currently attending Diocesan? Yes No

Name	Current Year Level	House

Does the student have any other relative that attends or has attended Diocesan?

Name	Maiden Name	Relationship to student	Years attended	House

MEDICAL / LEARNING NEEDS

Are you aware of any special learning needs the student may have? Yes No

If yes, please specify.

Has the student ever received additional support e.g. tutoring, psychologist, speech therapist, SPELD tutor, occupational therapist? Yes No

If yes, please specify and attach relevant reports e.g. Educational Psychologist assessment.

Has the student been involved with any Gifted and Talented Programmes at her current school? Yes No

If yes, please specify.

Does the student have any medical conditions or allergies? Yes No

If yes, please specify.

PERSON RESPONSIBLE FOR PAYMENT OF FEES (if different to Parents/Guardians)

Relationship to Student	Title
Surname	First Names
Company/Trust	
Phone	Mobile
Home address	Postal address (if different from home address)

DECLARATION

- I/we declare that the information provided in this enrolment application is true and correct
- I/we understand that acceptance of this form does not constitute admission of the student to Diocesan
- I/we will be required to agree to the Terms and Conditions of entry at the time an offer is made
- I/we agree to the school checking my/our credit rating

Signature of Parent / Guardian	Signature of Parent / Guardian
Date	Date

PRIVACY ACT 1993

The information in relation to enrolment procedures is retained by the school and will be used for the following purposes:

- To maintain contact with parents/guardians
- To facilitate the education and general enhancement of the student
- To facilitate the operation and administration of the School
- To provide for the health, welfare and safety of the student



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Section 3 Boarding Application Form

Application for Admission to Innes House

STUDENT DETAILS Current Student New Student

Family name	
Given Names	Preferred Name

PROPOSED ENTRY TO INNES HOUSE

Year of entry 20	Year Level	<input type="checkbox"/> 9	<input type="checkbox"/> 10	<input type="checkbox"/> 11	<input type="checkbox"/> 12	<input type="checkbox"/> 13	Term	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4
Short Term Dates <small>if applicable</small>	Start Date			Finish Date							

FAMILY INFORMATION

Mother / Step Mother / Guardian	
Father / Step Father / Guardian	

STUDENT LIVES WITH

<input type="checkbox"/> Both parents	<input type="checkbox"/> Father	<input type="checkbox"/> Mother	<input type="checkbox"/> Shared	<input type="checkbox"/> Other
If other, please provide name				
Relationship to applicant				

EMERGENCY CONTACT IN NEW ZEALAND

Name in full			
Address			
Phone (Home)		Phone (Mobile)	
Email			

CONTACT IN NEW ZEALAND IF PARENTS LIVE OVERSEAS

Please note: Innes House is closed during school holidays and one exeat weekend per term. Parents must make other accommodation arrangements for their daughter for these times.

A student who boards at Innes House must have a contact living in the greater Auckland region. This contact is expected to take an active interest in the life of the student, to make leave and accommodation arrangements during school holidays and exeat weekends, to be able to assist with any emergency arrangements and to assist with transport to and from the airport when required.

I, the undersigned parent of the above named student hereby nominate:

Full Name			
Address			
Phone (Home)		Phone (Mobile)	
Email			
Relationship to Student			

as contact for my daughter in New Zealand.

I acknowledge that the appointment of the above-named person is subject to the approval of Diocesan School for Girls.

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Signature of Parent / Guardian

Signature of Parent / Guardian

I am willing to be the contact for the above named student during her parents' absence from New Zealand.

Signature of NZ contact	
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HEALTH

Does your daughter suffer from any health problems / allergies?

Yes

No

If yes, please specify below:

Any special dietary needs:

DECLARATION

We confirm this application is true and accurate and understand that our daughter's admission to Innes House can only be considered AFTER she has been offered a place at Diocesan School for Girls.

Where Diocesan School seeks consent of a parent/guardian for my daughter to participate in any school activity or day trip I authorise the Boarding Director or Duty Housemistress of Innes House to provide that consent as they see fit.

Notice of withdrawal from Innes House. Twelve weeks' written notice of intention to withdraw your daughter from boarding is required. This written notification must be addressed to the Boarding Director. For withdrawal at the end of the school year, notice is required by the last day of Term 3. Fees are payable over the notice period. Where no notice or insufficient notice is given, a fee of up to one quarter's annual boarding fee will be charged.

Signature of Parent / Guardian

Signature of Parent / Guardian

Date

Date

FEES 2018

Nightly \$100.00

Weekly \$420.00

Termly \$3,830.00

Annually \$15,320.00



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Section 4 Information to Support your daughter's application

Information in Support of your Application to Diocesan

Student Name

What is it about Diocesan School for Girls that has motivated you to apply to enrol your daughter?

What cultural activities does your daughter take part in? e.g. choir, drama, music, dance. If applicable, state the level/group/exam qualifications:

What sporting activities does your daughter take part in? If applicable state the level/team/group in which she participates:

Has your daughter been involved in any Gifted and Talented Programmes at her current school? If yes, please specify.

Has your daughter received additional support e.g. learning support at school, tutoring, psychologist, speech therapist, SPELD tutor, occupational therapist? If yes, please specify.



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Section 5

Please have your daughter's
current teacher complete this
section

Student Information to be completed by the student's current teacher

Thank you for providing this information. Once the page is completed please email to admissions@diocesan.school.nz

Student Name					
ACADEMIC ACHIEVEMENT					
	Curriculum Level	Below Average	At	Above Average	Date
Reading		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Writing		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Mathematics		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Tests	Level/Stage	Raw Score	Stanine	Date of Testing	
PAT Reading Comprehension					
PAT Listening					
PAT Reading Vocabulary					
PAT Mathematics					
PAT Punctuation and Grammar					
asTTle or e-asTTle Writing					
asTTle or e-asTTle Reading					
asTTle or e-asTTle Numeracy					
Mathematics GloSS					
Mathematics IKAN					
Numeracy (any other info)					
Has the student ever received Learning Support e.g. tutoring, psychologist, speech therapist, SPELD tutor, occupational therapist?				<input type="checkbox"/> Yes	<input type="checkbox"/> No
If yes, please specify e.g. Educational Psychologist assessment.					
Has the student been involved with any Gifted and Talented Programmes?				<input type="checkbox"/> Yes	<input type="checkbox"/> No
If yes, please specify.					
	Below Average	At	Above Average		
Behaviour	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Attendance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Comments:					
Teacher's name:				Date:	