

Student Enrolment Form



Telford

Te Whare Wānaka o Puerua

A Division of Lincoln University

Please detach these pages before completing and return to Telford - a Division of Lincoln University, Private Box 6, Balclutha 9240

Programme

STAR by mail STAR by eLearning Gateway

Family name: Given name(s):

Home address:

Telephone: Mobile (optional):

Date of Birth: Gender: Female Male

Ethnic Identity

Pakeha/European 111

New Zealand Māori – 211

Iwi (tribe)

Samoan 311

Cook Island 321

Niuean 341

Tongan 331

Tokelauan 351

Chinese 421

Indian 431

Other 611

School Details

School name and address:

National student index/NZQA number: Year (at school):

Signature

For the purposes of the Privacy Act 1993, the Applicant consents to Telford - a Division of Lincoln University obtaining the above information about the applicant.

This consent only extends to the information stated on this form. The Applicant agrees to allow Telford - Division of Lincoln University to disclose this information, for either the purposes of statistical reporting to the Ministry of Education, or to be included as part of statistical reporting information contained in the Telford - a Division of Lincoln University.

I hereby declare this information to be true.

Date: Signature:

STAR by Mail

Please select the unit standards that you wish to do. When writing down your initial selection of units, we suggest that you write four to six to begin with. We will start the year by sending you two units. When the assessment for one of these has been sent in for marking we will then send a further unit, and so on.

You can order additional units at a later date if you wish. Please ensure that the school's STAR co-ordinator has sighted this form and signed it before it is sent in.

To be filled in by STAR by Mail STUDENTS ONLY

Unit	Title of unit standard

STAR by eLearning

Please tick the course you wish to enrol in. See the course booklet for information about each course.

Courses eLearning STUDENTS ONLY			
Agriculture Year One	<input type="checkbox"/>	Equine Year One	<input type="checkbox"/>
Agriculture Year Two	<input type="checkbox"/>	Apiculture Beekeeping	<input type="checkbox"/>
Agriculture Year Three (Specialist)	<input type="checkbox"/>	Horticulture Year One	<input type="checkbox"/>
Sheep <input type="checkbox"/>	Dairy <input type="checkbox"/>	Cattle <input type="checkbox"/>	

Signature

I agree that I have sighted this enrolment form and the accompanying order.

School STAR Co-ordinator name:

Date: Signature: