



GATEWAY STUDENT 2026

ENROLMENT FORM

SCHOOL NAME _____

STUDENT DETAILS

First name _____ Surname _____

Date of birth _____ Gender Male Female

National student number _____

Address _____

Postcode _____

Home phone _____ Mobile _____

Email _____

School year Year 11 Year 12 Year 13 Year 14

STATISTICAL INFORMATION

Ethnicity (Please tick at least one)

| | | | | |
|---|--|---|--|---|
| <input type="checkbox"/> NZ European Pākehā | <input type="checkbox"/> Māori | <input type="checkbox"/> Samoan | <input type="checkbox"/> Cook Islands Māori | <input type="checkbox"/> Tongan |
| <input type="checkbox"/> Niuean | <input type="checkbox"/> Tokelauan | <input type="checkbox"/> Fijian | <input type="checkbox"/> Other Pacific Peoples | <input type="checkbox"/> Sri Lankan |
| <input type="checkbox"/> Indian | <input type="checkbox"/> Chinese | <input type="checkbox"/> Japanese | <input type="checkbox"/> Korean | <input type="checkbox"/> Other Asian |
| <input type="checkbox"/> Filipino | <input type="checkbox"/> Cambodian | <input type="checkbox"/> Vietnamese | <input type="checkbox"/> Other Southeast Asian | <input type="checkbox"/> British |
| <input type="checkbox"/> Dutch | <input type="checkbox"/> Greek | <input type="checkbox"/> Polish | <input type="checkbox"/> South Slav | <input type="checkbox"/> Italian |
| <input type="checkbox"/> German | <input type="checkbox"/> Australian | <input type="checkbox"/> Other European | <input type="checkbox"/> Middle Eastern | <input type="checkbox"/> Latin American |
| <input type="checkbox"/> African | <input type="checkbox"/> Other Ethnicity | <input type="checkbox"/> Not stated | <input type="checkbox"/> Irish | |

In NZ Māori (Please state)

Main tribal affiliation _____

Other tribal affiliation _____

PLACEMENT DETAILS

Employer _____

Address _____

Postcode _____

Phone _____ Email _____

DURATION OF PLACEMENT WITH EMPLOYER

Start date _____ Proposed duration of placement _____ Weeks

Proposed hours per week _____

