



Preference of Enrolment Certificate for the Catholic Diocese of Dunedin

INTRODUCTION

- 1.1 The Proprietor has entered into an Integration Agreement with the Minister of Education in respect of the school. The Integration Agreement provides that the Proprietor may enter into an agreement with the Parents or other persons accepting responsibility for the education of a child providing that, as a condition of the enrolment or attendance of the child at the school, the Parents or other persons shall pay attendance dues.
1.2 Attendance dues are used by the Proprietor to service school debt, insure school buildings and other costs as specified in the Education and Training Act 2020.

ATTENDANCE DUES PAYMENT

- 2.1 I/we agree to pay attendance dues to the Proprietor as approved by the Minister of Education from time to time in terms of the Education and Training Act 2020 and as a condition of enrolment of the student(s) at the School.
2.2 I/we acknowledge that the Proprietor: (a) May increase attendance dues from time to time provided such increases are within the maximum attendance dues permitted to be charged by the Ministry of Education; and (b) Is likely to review and, if necessary, increase the level of attendance dues payable at least annually.
2.3 I/we understand that if I/we default in paying my/our attendance dues then any recovery costs incurred by the Proprietor will be an additional expense to be paid by me/us (and will be added to the total attendance dues owing and payable by me/us).
2.4 I/we understand that, each year, the Proprietor will issue me/us an invoice for all attendance dues payable in respect of the student(s) and I/we agree to pay the total attendance dues payable in full by the date stipulated in the invoice unless I/we have previously made alternative payment arrangements with the Proprietor.

STUDENT ENROLMENT INFORMATION AND THE PRIVACY ACT 2020

- 3.1 The Proprietor is committed to respecting your privacy by protecting the information you voluntarily provide. The information will be held and stored securely by the Catholic Diocese of Dunedin (CDD), which administers attendance dues on behalf of the Proprietor.
3.2 Information entered into the CDD database is protected using industry standard technology. Information is only accessible to personnel who need access to do their work and will be used primarily for administration of attendance dues.
3.3 Information about outstanding attendance dues may be shared by the CDD with the Proprietors and personnel of other Catholic Schools attended by members of your family, and with their attendance dues collection agents.
3.4 Information voluntarily provided by you to the Proprietor may also be shared with your Parish for the purpose of supporting the student(s) formation of the faith and practices of the Catholic Church.
3.5 The information will not be shared with any other party without your permission.
3.6 You can ask for a copy of any personal information the proprietor holds about you, and ask for it to be corrected if you think it's wrong. For a copy of your information, or to have it corrected, please contact CDD.

The CDD ATTENDANCE DUES TEAM

- 4.1 The Proprietor has appointed the Catholic Diocese of Dunedin Attendance Dues Team (the CDD Attendance Dues team) to administer the invoicing and collection of attendance dues in respect of the school.
4.2 The CDD Attendance Dues office is at the Pastoral Centre, 300 Rattray Street, Dunedin.

ACKNOWLEDGEMENT

- 5.1 I/we acknowledge that we have read and understand this agreement and agree to comply with the terms and conditions.
5.2 I/we agree to advise the School Principal and CDD Attendance Dues team in writing if our circumstances change.

Signature of parent/caregiver 1 Print Name Date
Signature of parent/caregiver 2 Print Name Date
Signature of bill payer (if not the people above) Print Name Date

Once completed, this form and all other enrolment information required by the Proprietor for the purposes of charging and collecting attendance dues, are to be scanned, by the school, for the CDD Attendance Dues Team.

Contact for all enquiries: Phone 03 222 0006 Email dues@cdd.org.nz

This is to certify that:

In accordance with the Education and Training Act 2020, Schedule 6, Cl 26, and Catholic School Integration Agreements, through a general or particular religious connection as stated in the Preference Criteria Numbers: 5.1, 5.2, 5.3, 5.4, 5.5. (Please refer to Criteria details on back of form).

Name (parent/guardian)
Address:
Phone: Email Address:
Is/are eligible to apply for enrolment of their child at: (school)
In: Town/City
Name of Child

For preference enrolment: I/We undertake to support our child in the formation of their faith and the practices of the Catholic church. I/we further agree that my/our contact details will be shared with the school and parish for the purpose of faith formation.

For non-preference enrolments: I/We agree to participate in the general school program which gives the school its special character including participating in Religious Education, school Masses and Liturgies.

Parent /Guardian 1 Signature: Date

Parent /Guardian 2 Signature: Date

This certificate supports an application for placement that is: Non-Preference Preference

If the placement is a preference one, under which Criterion (see reverse) is the child eligible?

- 5.1 (Baptised Catholic) 5.2 (Catholic Sibling) 5.3 (Catholic Parent)
5.4 (Catholic Significant Adult) 5.5 (Parent Becoming Catholic)

If Criterion 5.1 applies, please complete:

Baptised in at on

If Criterion 5.4 applies, please complete the section on the back of this form.

Bishops Agent Use Only

Certified by (name) as authorised agent of the

Roman Catholic Bishop of the Diocese of

Position: (see: Administration of the Criteria, 6.1.1-6.1.6, Agents who may sign, listed over page)

Address:

Signature Date

This form must be completed by the Parent(s)/Guardian(s), and the Parish Priest or other designated authorities prior to the enrolment of a student in a Catholic Integrated School.

Privacy Statement: The information on this form (pages 1 and 2) will be used solely for confirming eligibility to enroll a student in a Catholic Integrated School or as otherwise described on the form. The information in this form will only be share as required with the School Board and management of the school and /or a Parish office and /or the Proprietor of the school such as the Proprietors diocesan education office. This

information will be stored in accordance with each entities document retention policies or schedules in accordance with the Privacy Act 2020. You have a right to access and change your information at any time. Please contact the Proprietor, parish office and/or school management to do so.

When parent/guardians apply to enroll a child in a Catholic school, the principal must inform them that if they wish to claim preference and have not yet done so, they need to obtain a preference certificate. To do this they visit their parish priest, or other person designated by the Bishop (diocesan offices will let schools know who is eligible to sign this certificate.) This is in accordance with the Education and Training Act 2020, Schedule 6, Clause 26.

Criteria for Preference of Enrolment in Integrated Catholic Schools

- 5.1 The child has been baptised or is being prepared for baptism in the Catholic Church.
- 5.2 The child’s parents/guardians have already allowed one or more of its siblings to be baptised in the Catholic faith.
- 5.3 At least one parent/guardian is a Catholic, and although their child has not yet been baptised, the child’s participation in the life of the school could lead to the parents having the child baptised.
- 5.4 With the agreement of the child’s parent/guardian, a significant familial adult such as a grandparent, aunt or uncle who is actively involved in the child’s upbringing, undertakes to support the child’s formation in the faith and practices of the Catholic Church.
- 5.5 One or both of a child’s non-Catholic parents/guardians is preparing to become a Catholic.

Agents of the Bishop, Who May Sign the Certificate on his Behalf

- 6.1.1 Parish Priest of their Parish of Residence
- 6.1.2 Assistant Priest of their Parish of Residence
- 6.1.3 Priests appointed under c. 517/1
- 6.1.4 Deacons and lay persons appointed to pastoral care under c. 517/2
- 6.1.5 Ethnic chaplains who liaise with Parish Priests or their delegate
- 6.1.6 Local committees appointed by the Bishop or by any of the above agents of the Bishop.

Process of Appeal

If a preference certificate has been refused and the parent/guardian, either directly or through the Principal, wish to appeal the matter, the application can be referred to the Proprietors’ Office (Diocesan Education Office). The Director of the Office, or whoever is the appointed appeal authority in the diocese, after making whatever investigation is necessary, including consulting the Parish Priest if appropriate, will make a ruling, or seek a ruling from the Bishop. The Parish Priest or delegated person who refused the certificate in the first instance is normally informed whenever a preference certificate is issued in virtue of this paragraph.

If Criterion 5.4 (above) applies the parent(s)/guardian(s) and significant familial adult completes the following:

Significant familial adult: (to be filled in only when Preference Criteria 5.4 applies)

I agree to support (child’s name) formation in the faith and practices of the Catholic Church and agree to my contact details being available to the school and parish for this purpose.

Name (familial adult):

Address:

Relationship to child:..... Email address:..... Phone No:.....

Parish

Signature..... Date:.....

Parent(s)/Guardian(s):

I/we agree that my child will be supported by:..... in the formation of the faith and practices of the Catholic Church. I/we further agree that my/our contact details will be shared with the school and parish for the purpose of faith formation.

Signature:..... Date:.....

Attendance Dues Agreement



Between: The Roman Catholic Bishop of Dunedin (“the Proprietor”) as the owner of

(School name) _____ (“the School”)

And: the following parents or caregivers or bill payer:

Parent /Caregiver 1

Please print clearly

Title:	First names:	Surname:
Residential address:		
Postal Address (if different):		
Daytime Phone:	Mobile:	
Email:		

Parent /Caregiver 2

Please print clearly

Title:	First names:	Surname:
Residential address:		
Postal Address (if different):		
Daytime Phone:	Mobile:	
Email:		

Bill Payer (if different to the people listed above)

Please print clearly

Title:	First names:	Surname:
Residential address:		
Postal Address (if different):		
Daytime Phone:	Mobile:	
Email:		

WHO have enrolled the following student at the school:

Please print clearly

First and middle names of Student	Surname of Student	Start Date	Year Level	National Student Number (NSN) (School to complete)