

Home Educators Application Form

The following questions are designed to collect information needed for our Curriculum Service. To ensure our records are up-to-date a new application form will need to be completed each year. We appreciate your assistance in answering these questions.

Supervisor's name:

Address:

Telephone: Fax:

Email:

Do you belong to a home school association? Yes/No

If YES, what is the name of your association?

Signed:

Date:

Please complete for each child:

Name:

Date of Birth

.....
.....
.....
.....
.....
.....

Is your child/children enrolled in the NZ Correspondence School? Yes/No

OFFICIAL USE ONLY

Current certificate/s of exemption (or birth certificate for 5 year olds) sighted for (name/s of child/children):

.....

Date copy filed: