Korakonui School Enrolment
~ Expression of Interest Form for 2024

Child's Name: _____ **Child's Date of Birth:** _____

Enrolment Period: The period in which you wish your child to start school

Please circle one:	**1**	**2**	**3**	**4**
	1Feb - 12 April	**29 April - 5 July**	**22 July - 27 Sept**	**14 Oct - 16 Dec**

Parents/Caregivers Details:

Names: _____

Address: _____

_____

Phone: _____ Email: _____

Order of Priority as set down by the Ministry of Education:
Please circle which applies to this application

1. **Not applicable to this school**
2. **Siblings of current students**
3. **Siblings of former students**
4. **Children from former students**
5. **Children of Board employees or Board members**
6. **All other children**

Signed: _____ **Date:** _____

Please email, post or deliver to: **Korakonui School, R D 3, Te Awamutu 3873**
office@korakonui.school.nz

PLEASE NOTE: in order to be considered in the ballot your form must arrive at the school before The relevant application closing date (refer to enrolment period timetable above)

Learning For Life

He mataurahga mo te ora

Small enough to care ~ big enough to challenge and inspire