

Tibbs House

Boarding Application

for entry in 2021

Auckland Grammar School
87 Mountain Road
Epsom
Auckland
New Zealand

- Tibbs House is Auckland Grammar School's boarding establishment and is located next to the School on Mountain Road. Tibbs House espouses the Grammar philosophy of all-round excellence and provides a secure and friendly environment for all its students of all nationalities.
- Tibbs House accommodates up to 125 boarders from Form 3 to Form 7 level.
- The primary purpose of Tibbs House is to cater for boys from communities outside the School Zone who may not have the educational opportunities they desire in their local area.
- The boarding fees for Tibbs House for 2020 are currently **\$15,500** (including GST). The fees for 2021 will have an inflation adjustment made to them and this will be done late in 2020.
- Further information about Boarding at Tibbs House is available on our website: www.ags.school.nz/at-grammar/boarding.
- Applicants to Tibbs House should be advised that it is in their interest to apply before the end of Term 2. Enrolment interviews occur throughout the first half of the year and whilst applications do remain open for the entirety of the year, and "late" applications are always welcome, the majority of interviews, and offers of placement, occur by the end of August.
- Any parents wishing to apply for a position for their son at Tibbs House should complete this application form and send it to:

Director of Boarding
Auckland Grammar School
Private Bag 99930
Newmarket
Auckland 1149



Tibbs House

Auckland Grammar School
87 Mountain Road
Epsom
Auckland
New Zealand

Application for Boarding

Attach a recent
passport-sized
photo here.

Date of Application :

Year to Commence at Tibbs House:

PART ONE - General Information

Form level and year for which you are applying:

 Form 7
(Yr 13) Form 6
(Yr 12) Form 5
(Yr 11) Form 4
(Yr 10) Form 3
(Yr 9)

A: Particulars of Student

| | | | | | |
|--|----------------------|--|---|--|--------------------------|
| Surname | <input type="text"/> | (Legal Name as per Birth Certificate) | Date of Birth | <input type="text"/> | |
| First Names | <input type="text"/> | | Boy's Age | <input type="text"/> Years <input type="text"/> Months | |
| Residential Address | <input type="text"/> | | <i>Please enclose a copy of the Birth Certificate</i> | | |
| | <input type="text"/> | Post Code | <input type="text"/> | Country of Birth | <input type="text"/> |
| Mail to whom | <input type="text"/> | | If not NZ born, date of arrival in NZ | <input type="text"/> | |
| Home Phone | <input type="text"/> | Student's Mobile | <input type="text"/> | Tick one box: NZ Citizen | <input type="checkbox"/> |
| Student's email | <input type="text"/> | | | Permanent Resident | <input type="checkbox"/> |
| Current School (or last attended) and current Form Level (class) | <input type="text"/> | | | Student Permit Holder | <input type="checkbox"/> |
| Ethnicity | <input type="text"/> | Iwi (if NZ Maori) | <input type="text"/> | First Language: | <input type="text"/> |
| Nationality | <input type="text"/> | Name of brother/s currently at AGS & Class | <input type="text"/> | | |

B: Interests and Achievements

Sporting interests:

Musical, Cultural or Dramatic pursuits:

Other Activities: (hobbies, personal and community interests)

C: Particulars of Parents

Father's Details:

| | | | | | | | | |
|---|----------------------|------------|----------------------|---------------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| First Names | <input type="text"/> | Title | <input type="text"/> | Currently Living with Son | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> |
| Family/Surname | <input type="text"/> | | | Legal Access | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> |
| Residential Address | <input type="text"/> | | | Tick one box: NZ Citizen | <input type="checkbox"/> | | | |
| Post Code | <input type="text"/> | Occupation | <input type="text"/> | Permanent Resident | <input type="checkbox"/> | | | |
| Email | <input type="text"/> | | | Permit Holder | <input type="checkbox"/> | | | |
| Home Phone | <input type="text"/> | Work Phone | <input type="text"/> | Mobile Phone | <input type="text"/> | | | |
| If you live at a different address from your son, do you wish to receive copies of the School report? | | | | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> | |
| If you live at a different address from your son, do you wish to receive financial requests? | | | | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> | |

Mother's Details:

| | | | | | | | | |
|---|----------------------|------------|----------------------|---------------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| First Names | <input type="text"/> | Title | <input type="text"/> | Currently Living with Son | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> |
| Family/Surname | <input type="text"/> | | | Legal Access | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> |
| Residential Address | <input type="text"/> | | | Tick one box: NZ Citizen | <input type="checkbox"/> | | | |
| Post Code | <input type="text"/> | Occupation | <input type="text"/> | Permanent Resident | <input type="checkbox"/> | | | |
| Email | <input type="text"/> | | | Permit Holder | <input type="checkbox"/> | | | |
| Home Phone | <input type="text"/> | Work Phone | <input type="text"/> | Mobile Phone | <input type="text"/> | | | |
| If you live at a different address from your son, do you wish to receive copies of the School report? | | | | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> | |
| If you live at a different address from your son, do you wish to receive financial requests? | | | | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> | |

For boarding families who live outside of the Auckland City boundaries, an Auckland City based contact must also be supplied.

| | | | |
|---------------------|----------------------|------------|----------------------|
| First Name | <input type="text"/> | Home Phone | <input type="text"/> |
| Family/Surname | <input type="text"/> | Mobile | <input type="text"/> |
| Relationship to boy | <input type="text"/> | Work Phone | <input type="text"/> |
| Address | <input type="text"/> | | |
| | <input type="text"/> | | |

D: Emergency Details (not parents or caregivers)

This information is for use by the School/House ONLY if the application is successful.

Please give details of an emergency contact person (other than a parent, guardian or caregiver)

| | | | |
|---------------------|----------------------|------------|----------------------|
| First Name | <input type="text"/> | Home Phone | <input type="text"/> |
| Family/Surname | <input type="text"/> | Mobile | <input type="text"/> |
| Relationship to boy | <input type="text"/> | Work Phone | <input type="text"/> |
| First Name | <input type="text"/> | Home Phone | <input type="text"/> |
| Family/Surname | <input type="text"/> | Mobile | <input type="text"/> |
| Relationship to boy | <input type="text"/> | Work Phone | <input type="text"/> |

E: Medical Details

This information is for use by the School/Tibbs House ONLY if the application is successful.

Name of Doctor _____ Phone No _____

Address of Doctor _____

Please record details of any medication/condition (allergies, disabilities and special medication)

Please record details of any special dietary requirements

Does the student have a physical condition that might affect classroom learning e.g. hearing loss, need for glasses, motor skills loss etc? If yes, please explain: Yes No

F: Health Statement

All students should have completed their Childhood Immunisation Programme before commencing secondary school. Has your son had the following vaccinations?

MMR (Measles, Mumps and Rubella)

Polio Sips

Tetanus (in which year?)

Hepatitis B (3 injections)

IN CASE OF AN ACCIDENT OR EMERGENCY if the School or Tibbs House CANNOT CONTACT YOU, or if the illness is serious, the School Nurse, Matron or Master on Duty may need to take your son to an Accident and Emergency Clinic or to a hospital.

I give permission for the School or Tibbs House to make such arrangements as are necessary for the treatment of my son in an emergency and agree to meet any costs incurred.

Signed _____

Date _____

PART TWO - Other Particulars

(If you wish to attach a more detailed statement in answer to some of these questions, the please feel free to do so, however please keep your response to no more than a page in length.)

1. Please list your reasons for wishing to attend Auckland Grammar School. (This question is to be answered by both the parents and by the boy.)

a) Parents' reasons: _____

b) Boy's reasons: _____

2. Please record any family connection your son has with Auckland Grammar School.

| | |
|------------|------------|
| Name _____ | Year _____ |
| Name _____ | Year _____ |
| Name _____ | Year _____ |
| Name _____ | Year _____ |

Please tick if father is a current financial member of the Old Boys' Association.

3. Please record any other significant connection your son might have with Auckland Grammar School.

4. Please record any other school(s) for which you have applied.

5. Please record details of the school you are currently in zone for _____

6. Please record the details of a contact person at your current school to act as a reference for your application.

Contact person e.g. Classroom teacher or Dean*:

Position:

Email address:

* Your nominated contact person may receive a brief profile questionnaire on your son via email. Please notify them of this possibility and ensure that they are happy to complete such a form before writing their name down, as this profile questionnaire is an important part of your son's application.

PART FOUR Privacy of Information

I agree to Auckland Grammar School collecting personal information

Full name of student

I have been advised by Auckland Grammar School that the information I provide will be used for:

Student records

Accounting purposes of the Auckland Grammar School Board of Trustees

Communication with Alumni

The Auckland Grammar School Old Boys' Association

NZ Qualifications Authority examination information

Special Education Services

I accept that this information may later be used for statistical and/or research purposes and agree to its use for that purpose, provided that if the information is published in any way it will not identify me or the individual concerned.

I understand that the information that I provide will be held at the offices of Auckland Grammar School at Mountain Road, Epsom, Auckland and Tibbs House.

I am aware of the rights of access to and correction of this information.

I give Auckland Grammar School permission to use my / my son's likeness in a photograph in any of its publications including website entries; and in the media, without payment or any other considerations.

Signed (Student)

Signed (Guardian)

PART FIVE How did you hear about us?

Please tick as many of the following that apply to you:

My father is an Old Boy of Tibbs House - his final year at the Hostel was _____

My father is an Old Boy (day boy) of Auckland Grammar School - his final year at School was _____

My brother is/was attended Tibbs House - his final year at the Hostel was _____

Advertisement in a newspaper / print media - the name of the publication was _____

Agricultural Field Day exhibition - the location _____

Visited the website: www.ags.school.nz

Word of mouth in our community

Other means - please list here _____

Notes Relating to the Completion of the Application Form

PART ONE - General Information

A: Particulars of Boy

The address for all return mail will be the "Boy's Residential Address".

The address given should be the boy's usual home address. If the boy spends lengthy periods at another address then that address should be noted.

C: Particulars of Parents, D: Emergency Details and E: Medical Details

The word 'parents' on other sections of the Application Form should be taken to include natural parents, guardian or caregiver. Caregiver is a term used by the Ministry of Education to describe the person(s) taking care of the boy. The School understands that in most cases, this/these person(s) is/are the parent(s) of the boy. If the boy is living other than with his parent's we require a legal guardianship agreement. This information is required for the Auckland Grammar School Board of Trustees Parents' Representative Roll. Addresses given remain confidential to the School.

The Emergency Contact should be a relative or neighbour who can be contacted during the day by the School should some medical or other unforeseen emergency arise. The Emergency Contact will be rung only if neither parent can be contacted.

Medical information is only required for emergency or welfare purposes by the School. It will form no part of the consideration of your application. Please note any allergies (bee stings, penicillin, antihistamines, etc) and any disabilities requiring any special care (epilepsy, heart conditions, etc). The information is required by the Physical Education, Outdoor Education and Sporting Departments and the staff of Tibbs House and may be referred to if a Doctor is required.

Checklist

Please check that you have:

Included the non-refundable fifty dollar (\$50.00) administration fee or pay online using the details opposite:

BANK ACCOUNT DETAILS

Bank ASB
Branch Auckland
Account Name Auckland Grammar School
Account Number 12-3011-0156506-00

Completed all the details in Part One.

Reference 1 Family Name
Reference 2 Tibbs House
Reference 3 Application Fee

Attached a passport size photograph.

Signed the Health Statement.

Completed all the details in Part Two (Parents and Boy).

Completed all the details in Part Three (Boy's personal profile).

Included a copy of his latest 3 school reports, (especially his latest school report), along with other appropriate references and /or awards dating back no longer than 2 years.

Included a copy of the Birth Certificate and/or permanent resident/student visa permit.

Completed forms should be sent to: Director of Boarding, Auckland Grammar School, Private Bag 99930, Newmarket, Auckland 1149.

Tibbs House does not require your valuable originals so please ensure that all documentation that accompanies your application are photocopies that can be kept on file.

No correspondence will be entered into by the School at the completion of the enrolment process.