

Application for Admission

Date			
I request that my daughter			
(Sube considered for admission to Taranaki	ırname) Dio as a:	(First Names)	
Weekly Boarder	/ Part Boarder /	Day Girl (Circle one)	
Date of Birth Religio	ous Denomination	Ethnicity	
Proposed Year of Entry to Taranaki Dio	<u>20</u> Year Level	Current School	
Previous family/connections with St Ma	ry's Diocesan/Taranaki Dioc	esan	
If family member is a St Mary's Diocesa	an Old Girl - Maiden Name a	nd Year attended	
Mother or Caregiver's Name	Father or Ca	Father or Caregiver's Name	
Mrs/Ms/Miss			
Address	Address		
Post Code		Post Code	
Home Phone	Home Phon	Home Phone	
Cell Phone	Cell Phone	Cell Phone	
Email	Email	Email	
Occupation	Occupation	Occupation	
Employer	Employer _	Employer	
Student's home is with: (tick as appro	priate)		
Parents / Mother /	Father / Other (Please de	tail)	
I authorise Taranaki Dio School to ask n	ny daughter's previous schoo	l for any relevant school records.	
(Signed)	Mother/Caregiver(Sign	Father/Caregiver	
How did you find out about Taranaki Di		,	
J. J	· ·		

Please forward this application form to the school. Upon receipt it will be acknowledged and you will be invited for an interview when it is the time to consider enrolments for the time/year you wish to start. If you have any queries please do not hesitate to contact us. We look forward to meeting you.