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| **New Zealand Catholic Bishops Conference** Diocesan Crest should be inserted  **Preference of Enrolment Certificate**  **for the Diocese of ……………..**  **This is to certify that**  In accordance with the Education Act 1989, Part 33, S442, 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*)  MR/MRS/MS  Address  Is/are eligible to have preference of enrolment for their child at  School/College  in Town/City  Name of child  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.  Parent(s)/Caregivers Signature Date  Under which Criterion (see reverse) is the child eligible for preference?..................................  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.  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)/Caregiver(s), and the Parish Priest or other designated authorities *prior* to the enrolment of a student in a Catholic Integrated School.  **PTO**  *Approved NZCBC October 2016 (updated November 2018)* |

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| **NEW ZEALAND CATHOLIC BISHOPS CONFERENCE**  **Criteria for Preference of Enrolment in Integrated Catholic Schools**   * 1. The child has been baptised or is being prepared for baptism in the Catholic Church.   2. The child’s parents/guardians have already allowed one or more of its siblings to be baptised in the Catholic faith.   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.   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. 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**   * + 1. Parish Priest of their Parish of Residence     2. Assistant Priest of their Parish of Residence     3. Priests appointed under c. 517/1     4. Deacons and lay persons appointed to pastoral care under c. 517/2     5. Ethnic chaplains who liaise with Parish Priests or their delegate     6. Local committees appointed by the Bishop or by any of the above agents of the Bishop.   **Process of Appeal**  *Handbook for Boards of Trustees of New Zealand Catholic Integrated Schools (section 5.14)*  If a preference certificate has been refused and the parents, 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 parents/caregivers and significant familial adult completes the following:  **Significant familial adult:**  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.  Mr/Mrs/Ms:  Address:  Relationship to child:………………………. Email address:……………………….. Phone No:……………  Parish  Signature Date:  **Parent(s)/Caregiver(s):**  I 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:  *Approved NZCBC October 2016 (updated November 2018)* |