

New Zealand Catholic Bishops Conference

PREFERENCE OF ENROLMENT CERTIFICATE

for the Catholic Diocese of Auckland

* * * * * All 3 PARTS of this form MUST be completed before sen	ding in* * * * *
PART 1 This is to certify that	
In accordance with Private Schools' Conditional Integration Act, Section Catholic School Integration Agreements, through a general or particula connection as stated in the Preference Criteria Numbers 5.1, 5.2, 5	r religious
(Please refer to Criteria details or	n back of form)
Mr/Mrs/Ms/Dr	
Address	
Is/are eligible to have preference of enrolment for their child at	
ST PAUL'S COLLEGE	
183 Richmond Road, Ponsonby, AUCKLAND 1021, New Zo	ealand
Name of child (please note one form per child)	
I/We undertake to support our child in the formation of their faith and the p Catholic church.	practices of the
Parent(s)/Guardian(s) SignatureDate	
PART 2	
Under which Criterion (see reverse) is the child eligible for preference?	
Please circle ONE only: 5.1 5.2 5.3 5.4	5.5
f Criterion 5.1 applies please complete:	
Saptised in	on
f Criterion 5.4 applies please complete the section on the back of this forr	n.
PART 3	
Certified by (Name):as of the Roman Catholic Bishop of the Diocese of Auckland	s authorized agent
Position:	
Address:Parish Stamp	
Signature Date	
This form must be completed by the Parent(s)/Guardian(s), and the Parish designated authorities <i>prior</i> to the enrolment of a student in a Catholic Inte	

NEW ZEALAND CATHOLIC BISHOPS' CONFERENCE

Criteria for Preference of Enrolment in Integrated Catholic Schools

- 5.1 The child has been baptised or is being prepared for baptism in the Catholic Church.
- 5.2 The child's parents/guardians have already allowed one or more of its siblings to be baptised in the Catholic faith.
- 5.3 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.
- 5.4 With the agreement of the child's parent/guardian, a grandparent or other significant adult in the child's life, such as an aunt, uncle or godparent, undertakes to support the child's formation in the faith and practices of the Catholic Church.
- 5.5 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

- 6.1.1 Parish Priest of their Parish of Residence
- 6.1.2 Assistant Priest of their Parish of Residence
- 6.1.3 Priests appointed under c. 517/1
- 6.1.4 Deacons and lay persons appointed to pastoral care under c. 517/2
- 6.1.5 Ethnic chaplains who liaise with parish priests or their delegate
- 6.1.6 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.

8.3.1 If a preference certificate has been refused and the parents, either directly or through the Headmaster, 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.

Please note that in the Diocese of Auckland the appointed appeal authority for Preference is the Vicar for Education (Linda McQuade)

NOTE: This section is ONLY for students applying under criterion 5.4. Part 3 on the first page MUST STILL BE COMPLETED. All other criteria i.e. 5.1, 5.2, 5.3 AND 5.5 should NOT fill the section below.

If Criterion 5.4 (above) applies the parents/guardians and significant adult completes the following:

Significant adult to fill in:	
I agree to support (child's name) formation in the faith and practices of the Catholic Church.	
Name: Mr/Mrs/Ms/Dr	
Address:	
Relationship to child:	
Signature	Date:
Parish	
Parent(s)/Guardian(s) to fill in:	
I agree that my child will be supported by the faith and practices of the Catholic Church.	in the formation of
Signature:	Date: