



Additional Needs Supplementary Enrolment Form

Please help us to learn more about your child and family by filling in this form alongside the KingsGate enrolment pack. We hope that by having this information we can better cater for your child.

Family name:	First name:
Date of birth: / /	Place in family: of children

Description of needs:

Current support (please list agencies below):	Previous support:
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Does your child have an official diagnosis? Yes No

Have any relevant documents been sent to school? Yes No

If not, please provide previous learning centre and name of best contact.

Please provide information about your child's needs/difficulties/things to be aware of in the following categories:

Your child and the environment (classroom, spaces...):
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Your child and other people:

Your child and learning:



KINGSGATE SCHOOL
To know, to love, to serve. Kia mohio, ki te aroha, ki te mahi.

Please provide strategies that work with your child here:

Medication:

Does your child take medication? Yes No

Will they require medicine administered at school? Yes No

If yes, please provide details below:

Type:

Time of day and frequency:

(An additional yellow form will also need to be completed for medication in the staffroom)

Toileting:

Is your child able to toilet themselves? Yes No

Please add any other additional information here to help us provide the best learning environment for your child: