

____ / ____ / ____

GATEWAY APPLICATION 2026

Name _____ DOB ____ / ____ / ____ Year _____ Age _____

Student Personal Email _____ Student Mobile _____

Are you a: **NZ Citizen/Permanent Resident/Student Visa/International Student**
(circle the answer that applies)?

Residential Address: _____

Parent/Caregiver: Name: _____ Mobile _____

Email: _____

Subjects studying in 2025 (write in full) Eg: History 1: _____ 2: _____

3: _____ 4: _____ 5: _____ 6: _____

Did you do Gateway last year? **Yes / No** If yes, what did you do? _____

Have you worked in paid employment? **Yes / No** If yes where? _____

Have you thought about what career you would like to pursue when you **leave school**, if so what?

Are you considering further education? E.g. Course, University if so, please state:

In which industry area would you like to gain work experience? _____

Are you part of any school programmes/sports that may interfere with certain days you cannot do Gateway? EG, Training Wednesdays.

Yes / No If yes, what and when? _____

Would you prefer to do gateway in **school time / weekends / school holidays**

In which industry area would you like to gain work experience? _____

How will you get to your gateway placement? **car / bus / train / get dropped off/ walk / not sure**

Do you have a driver's licence? **Yes / No** **Learners / Restricted / Full**

If accepted, are you prepared to commit to the programme (including the completion of all unit standards) to the very best of your ability? **Yes/No**

Are you prepared to be interviewed for work placement by employers and allow the school to supply prospective employers with your details, held by the school? **Yes/No**

Please Turn Over

Do you understand that all other NCEA course work from the school teachers will need to be caught up with and are you prepared to do this in your own time? **Yes/No**

Do you understand that an application for a Gateway programme does not guarantee you a place? **Yes/No**

Parental Permission

I _____ Parent/Caregiver

hereby give permission for _____ Student

to apply for the Pukekohe High School Gateway Programme. I agree to the terms stated above and agree to _____ leaving school to visit work sites (with the Gateway Coordinator) as necessary. I also agree to taking student photographs/videos during training and work placement that may be published.

Health and Medical issues: Does _____ (student) have any health or medical issues that the School/Gateway Coordinator/or Employers need to be aware of before they commence the programme? **Yes/No**

Is there any other information Pukekohe High School needs to be aware of before considering this student for Gateway? **Yes/No**

Parent/Guardian Sign: _____ **Date:** ____/____/____

Please see our school website for more information about Gateway and what is expected from the students that take part.

www.pukekohehigh.school.nz

- Select the “Learning” Tab
 - Select the “Careers” Tab
 - Scroll down to Gateway.

Students can either complete an online application form or collect one from the careers room 😊