# Whakaaetanga Whakangungu

# **Student Education Agreement**



# NZ Diploma of Early Childhood Education and Care: Home-Based

To be completed by the person in charge of the home-based provider you will be working with while studying

### APPLICANT/STUDENT INFORMATION NGA MO HIOHIO KAITONO/AKONGA

| Name of student in full   |                         |                    | Pos         | ition held                                 |
|---|-------------------------|--------------------|-------------|--|
| Please tick as applicable:  | Permanent               | Voluntary          | Othe        |  |
| How long has the student we   |                         | -                  |             |  |
| How many child-contact hours per week will be worked while student is studying? |                         |                    |             |  |
| HOME-BASED SET  | TING INFORM             | ATION NGA          | MO HIOHIO P | OKAPU                                      |
| Name of home-based provider   | r                       |                    |             |  |
| Provider Address  |                         |                    |             |  |
| Phone Number  |                         | Email              |             |  |
| Your name as provider repres  | sentative               |                    |             |  |
| To comply with the Unsolicited your consent to receive electric                 |                         |                    |             | ildhood New Zealand is required to request |
| I give my consent to receive e  | electronic/text messagi | ng                 | Yes No      |  |
| Is the Home-based provider a  | a member of Te Rito M   | aioha Early Childh | ood New     |  |
| Zealand?  |                         |                    | Yes No      |  |
| Tick this box if you would li   | ke to receive informati | on about Centre M  | lembership  |  |
| VISITING TEACHER  | R INFORMATIO            | N NGA MO H         | IOHIO TAKAW | AENGA KAIAKO                               |
| Name and Position   |                         | ECE Qualifi        | cation      |  |
| Teacher Registration Number   | r of Visiting Teacher   |                    |             |  |
| AGREEMENT DECI  | LARATION TE             | WHAKAPUAKI         | TANGA       |  |
| I have read the following train while studying for the NZ Dipl                  |                         |                    | •           | er is willing to support this student      |
| Signature of HB Provider Rep  | presentative            |                    |             | Date                                       |
| Student Signature   |                         |                    |             | Date                                       |
| NATIONAL OFFICE USE ONLY HEI WHAKAMAIHI MA TE TARI ANAHE                        |                         |                    |             |  |
| Signature   |                         |                    |             | Date                                       |

#### STUDENT EDUCATION AGREEMENT TE WHAKAAETANGA WHAKANGUNGU

The following agreement is in recognition of the importance of the relationship between the student, their Home-based Provider and Te Rito Maioha Early Childhood New Zealand (ECNZ), in order to support the student to achieve their NZ Diploma in Early Childhood Education and Care. Please note the following:

- 1. A copy of this form will be sent to the Home-based Provider once the student has been enrolled
- 2. Information about a student's progress can only be released to the Home-based Provider manager if the student provides written approval
- 3. ECNZ reserves the right to make changes to the programme, programme requirements and/or delivery arrangements throughout the period of a student's enrolment. Wherever possible, such change would be preceded by consultation and every effort made to minimise any inconvenience to either party

# A: The early childhood service agrees to the following:

- 1. To abide by the Education (Home Based Care) Order 1992 and any amendments
- Home Centre Hours: To provide the student with employment for a minimum of 12 hours per week while studying and allow the student to contribute to all areas of home-based care.
- 3. Course requirements: To support the student to complete course requirements including the following: opportunities to be involved in all aspects of the early childhood curriculum, including planning, assessment and evaluation.

## B: The student agrees to the following:

- To abide by ECNZ rules, regulations and policies including the standards of conduct, rules and responsibilities detailed in the Student Handbook
- 2. To respect the role of lecturer/pouako and the interactions that take place in the learning environment and maintain confidentiality at all times
- 3. To respect the learning environment and property of ECNZ
- 4. To take responsibility for his/her own learning, utilising the learning opportunities made available
- 5. To abide by any agreements between themselves, their lecturers/pouako, fellow students and any other interested parties (e.g. visiting teacher and home-base provider)
- 6. To abide by the law and, if charged with a criminal offence, to report this to the Chief Executive within 5 working days

## C: ECNZ agrees to the following:

- 1. To provide a programme of study leading to a NZ Diploma (ECE) Level 5 Home-based qualification that is recognised and approved by the New Zealand Qualifications Authority
- 2. To liaise regularly with home-based providers so they are informed about the programme
- To seek and respond to feedback from home-based providers and students regarding the programme