DOMESTIC STUDENTS Application/Enrolment Form



Hamilton, Pukekohe and Auckland Enrolments:

Post to: Fax 07 853 0223
Vision College Enrolments Office Enquiries 0800 834 834
21 Ruakura Road Administration 07 853 0777
Hamilton 3216 Email enrol@visioncollege.ac.nz

Christchurch Enrolments:

Post to: Fax 03 366 9271
Vision College Enquiries 0800 834 834
50 Hazeldean Road Administration 03 377 2364
Christchurch 8024 Email christchurch@visioncollege.ac.nz

- Please complete all sections of this form and sign the declaration.
- Please attach all additional documentation required as per the documentation section.
- Note: International students should use the International Student enrolment form, which is available on the website.

	QUALIFICATION							
1.	What qualification do you wish to enrol in?							
	Qualification start date: Qualification end date:							
2.	Have you studied at Vision College before? Yes No If yes, what was your Student ID number?							
3.	How do you intend to study?							
4.	Where do you intend to study? On Campus – Which one? Distance/Online/Block Courses/Internship (Not all courses have this option. Please check first.)							
5.	If there are options for your course, what option are you choosing? e.g. Music students write your chosen stream. Leadership students could write "internship" or "part time"							
	If the qualification you have chosen does not have options, or if you are unsure, leave this field blank.							
6.	What year do you expect to complete the academic requirements of your course(s) with Vision College in order to graduate							
	with your qualification? Year							
	PERSONAL DETAILS							
7.	Your full legal name: Family Name:							
	First Name(s):							
8.	Preferred name (if different to above):							
	Previous name(s) known by:							
9.	If you have previously enrolled under another name, what was that name?							
10.	D. Date of birth:							
11.	L. Gender: ☐Male ☐Female							
12.	. Do you know your NSN (National Student Number)? No Yes If yes, please write it here:							
13.	. Citizenship: New Zealand Citizen Australian Permanent Resident Other (please specify)							
14.	During your study, where will you be residing? New Zealand Overseas							

15.	which ethnic group(s) do you	belong to:							
	NZ European/Pakeha New Zealand Māori Samoan Cook Island Māori Tongan Niue Tokelauen Fijian Other Pacific Peoples	☐ British/Irish ☐ Dutch ☐ Greek ☐ Polish ☐ South Slav ☐ Italian ☐ German ☐ Australian	Other European Filipino Cambodian Vietnamese Other Southeast Asian Chinese Indian Sri Lankan	☐ Japanese ☐ Korean ☐ Other Asian ☐ Middle Eastern ☐ Latin American ☐ African ☐ Other ☐ Not Stated					
	If Other European / Other Asian / Other Southeast Asian / Other Pacific Peoples or Other, please specify:								
	15a. If you identified as New Zealand Māori , what is the name of the Iwi you have the strongest affiliation to?								
	You may enter up to three.								
	lwi	lwi	lwi						
	Rowe (Iwi h	ome area) Rowe	e (Iwi home area)	Rowe (Iwi home area)					
16.	How did you hear about this	course?							
	ACADEMIC INFORMA	ATION							
17.	What was your main activity	in New Zealand as at 1 October i	in the year prior to this course s	tart date?					
	Secondary SchoolStudent	Self-employed	House-person or Retired	☐ Wānanga student					
	Non-employed or beneficiary	University Student	☐ Irrespective of Occupation						
	Wage or salary worker	Polytechnic Student	Private training establishment student						
18.	Do you live with the effects of	f significant injury, long term illn	ness or disability? Yes No						
	If yes, how would you descri	be your significant injury, long te	erm illness or disability? The infor	mation you supply is confidential.					
19.	Is there anything that you su	ffer from that is likely to affect yo	our study, or that we should be	aware of while on campus?					
	☐ Chronic Fatigue	Depression	Diabetes	Other (please specify)					
	☐ Epilepsy	Migraines	RSI (OOSE)						
	No, I don't suffer from any of	these health issues.							
20.	What was the name of the la	st secondary school you attende	d?						
	School:		Year:	☐New Zealand ☐Overseas					
21.	What is the highest level of a	chievement you hold from a sec	ondary school?						
	No formal secondary	☐ 14 or more credits at any level	☐ NCEA Level 1 or School Certificat						
	qualifications University Entrance	NCEA Level 3 or Bursary or Scholarship	Overseas qualification (includes Cambridge & International Bacca exams) please specify	6 th Form Certificate Not Known laureate					
	Other (please specify)		examply preade specify						
22.	Is this the first time you have	enrolled at a tertiary institution	in New Zealand or overseas?						
	Yes No (if yes, go to question 24)								

if No, please enter the name of the	organization you first studied at and the year	ar of your first (enroiment:					
School:	Year:		New Zealand Overseas					
Please list any tertiary study that you have done (include the highest level qualifications that you have completed).								
Institution	Course	Year Studied	Successfully completed?					
			☐Yes ☐No					
			☐Yes ☐No					
24. Do you have a StudyLink student loa	an from a previous course? Yes No							
Are you applying for a StudyLink stu	Are you applying for a StudyLink student loan for this course? Yes No							
If yes to either question, what is you	If yes to either question, what is your IRD number?							
	On 1 April 2006, legislation was introduced to make student loans interest free for borrowers living in New Zealand. For more information on interest free student loans, visit www.ird.govt.nz/studentloans . Completing your IRD number is voluntary.							
25. Please provide details of your bank	account for deposit in the event of refunds:							
Bank Branch A								
CONTACT DETAILS	CONTACT DETAILS							
Home Address:								
			Post Code:					
Postal Address:								
(if different)			Post Code:					
Email Address:	Email Address:							
Daytime Phone:	Mobile:							
Next of Kin (emergency contact) Na	me:	Relations	hip:					
Next of Kin Mobile:	Home Ph:	Work	Ph:					
Next of Kin Email:								
DOCUMENTATION								
To qualify as a domestic student,	Citizenship/Permanent Residency	Photo ID						
and so be entitled to the Government tuition subsidy, you must be a citizen of	You will need to produce one form of documentation from the following	You must p Photo ID.	produce one form of					
New Zealand (including students from t	he checklist as evidence of citizenship/		's Licence					
Cook Islands, Tokelau, or Niue who have New Zealand citizenship) or a permaner	nt	☐ Passpo	ort er Student ID Card					
resident of New Zealand or a citizen or	☐ Birth certificate with place of birth stated as New Zealand, Cook		D Card					
permanent resident of Australian residing in New Zealand.	^{ng} Islands, Tokelau, or Niue. □ New Zealand passport.		ing the original					
	 A statement of Whakapapa, including date of birth, 		ation to the enrolment natively please provide a					
	countersigned by a Kaumatua.		opy by a Justice of the Solicitor, Minister of the					
	 Certificate of citizenship or letter of confirmation. 		General Practitioner.					

 $\ \ \Box \ \ \ Overseas \ passport \ with \ residency$

stamp.

DECLARATION

Privacy - ATC New Zealand collects and stores information from this form to comply with the requirements of the Ministry of Education (student statistical returns), New Zealand Qualifications Authority (Record of Learning registration and Unit Standard outcomes), Tertiary Education Commission (funding returns), Industry Training Organisations (funding and academic outcomes), Ministry of Social Development (confirmation of enrolment and academic outcomes), Inland Revenue Department (student loan interest rebate), Department of Immigration (if you are not a New Zealand citizen or permanent resident) and Agencies who support particular students through scholarships and prizes, payment of fees or other awards (if you are a recipient of one of these awards).

Those agencies use the data collect from tertiary education organisations to: administer the tertiary education system, including allocating funding. Develop policy advice for government, conduct statistical analysis and research.

Your name, date of birth and residency as entered on this enrolment will be included in the National Student Index, and will be used in an Authorised Information Matching programme with the New Zealand Birth Register.

For further information please see: http://nsi.education.govt.nz/home.aspx

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The government agencies above may supply data collected on this form to Statstics New Zealand for the purposes of integrating data with data collected by other government agencies, subject to the provisions of the Statistic Act 1975. Integrated data is used for the production of official statistics, to inform policy advice to government and for research purposes.

In handling data supplied by you on this form, the government agencies are required to comply with the provisions of the Privacy Act 1993.

The information is also used to select students for qualifications, to manage internal administrative processes, for internal reporting and for contacting students before, during and after their studies.

Information about students may be supplied to, and sought from, other educational organisations for the purpose of verifying academic records.

In addition, when required by statute, the Institute releases information to Government agencies such as the New Zealand Police, Department of Justice, Ministry of Social Development, and the Accident Compensation Corporation (ACC).

In signing this enrolment form you authorise such disclosure on the understanding that ATC New Zealand will observe the general conditions governing the release of information, as set out in the Privacy Act 1993 and the Post-compulsory Unique Identifier Code of Practice. You may see any information held about you and amend any errors in that information. To do so, contact the Enrolments Officer.

NB: The Privacy Act came into force on 1 July 1993 with the stated aim of protecting the privacy of natural persons.

It requires ATC New Zealand to collect, hold, handle, use and disclose personal information in accordance with the twelve information privacy principles in the Act. www.privacy.org.nz

Fees – In signing this enrolment form you undertake to pay all fees as they become due, and to meet any late fees and collection charges associated with debt recovery. ATC New Zealand's policy on withdrawal and refund of fees may be obtained from the Enrolments Officer.

In signing this form you authorise ATC New Zealand to request payment of your course costs from StudyLink (if applicable). This includes course fees as well as any course related costs that are outstanding more than 60 days.

In signing this form you give ATC New Zealand authorisation to provide details to the Trustee who administers the Trust account for student fees

Photography and Video –At times photos or video might be recorded on campus, in classes or at events. If I am included in these photo or videos I agree that ATC New Zealand owns the images and all rights related to them and understand that the images may be used in any manner, any media and any location. I exempt ATC New Zealand from any payment or compensation to me for the images.

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Rules – In signing this enrolment form you undertake to comply with the published rules and policies of ATC New Zealand with regard to attendance, academic progress, standard of dress, health and safety, and behaviour.

NZ Police Vetting/Ministry of Justice check - I understand that police checks will be done upon completion of the relevant consent forms (ECE/Counselling/Leadership/Music courses only). The result of this check will be held on my student file for the duration of my enrolment and may be sent to a placement upon written request. By signing the enrolment form I agree to this.

Declaration – I declare that to the best of my knowledge all the information supplied on, and with, this enrolment form is true and complete, I agree to abide by the conditions described above, and I consent to the disclosure of personal information as described above.

ignature						Date		
OFFICE USE ONLY:								
Document type		date of birth	gender	citizenship or residency status	Photo ID	Name of person sighting document	Date	Signature