

<b>Enrolment Form: NZCALNE</b>	<b>NSN No:</b> <input type="text"/> <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
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Section A – Personal & Contact Details					
<b>First Name (legal):</b>		<b>Surname:</b>			
<b>Preferred Name:</b>					
<b>Title: (Please tick)</b>	<input type="checkbox"/> Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Miss <input type="checkbox"/> Ms <input type="checkbox"/> Other (please specify)	<b>Gender:</b>	<input type="checkbox"/> Female <input type="checkbox"/> Male	<b>Date of Birth:</b>	DD/MM/YY
<b>Address:</b>	<b>Street Address</b>				
	<b>Suburb</b>			<b>Postcode</b>	
<b>Phone Numbers:</b>	<b>Home</b>		<b>Work</b>		<b>Mobile</b>
<b>Email Address:</b>					
<b>Ethnicity</b>	NZ European/Pakeha <input type="checkbox"/> 111 New Zealand Māori <input type="checkbox"/> 211 Samoan <input type="checkbox"/> 311 Cook Island Māori <input type="checkbox"/> 321 Tongan <input type="checkbox"/> 331 Niue <input type="checkbox"/> 341 Tokelauan <input type="checkbox"/> 351 Fijian <input type="checkbox"/> 361 Other Pacific Peoples <input type="checkbox"/> 371 British/Irish <input type="checkbox"/> 121 Dutch <input type="checkbox"/> 122 Greek <input type="checkbox"/> 123 Polish <input type="checkbox"/> 124 South Slav <input type="checkbox"/> 125 Italian <input type="checkbox"/> 126 German <input type="checkbox"/> 127 Australian <input type="checkbox"/> 128	Other European <input type="checkbox"/> 129 Filipino <input type="checkbox"/> 411 Cambodian <input type="checkbox"/> 412 Vietnamese <input type="checkbox"/> 413 Other Southeast Asian <input type="checkbox"/> 414 Chinese <input type="checkbox"/> 421 Indian <input type="checkbox"/> 431 Sri Lankan <input type="checkbox"/> 441 Japanese <input type="checkbox"/> 442 Korean <input type="checkbox"/> 443 Other Asian <input type="checkbox"/> 444 Middle Eastern <input type="checkbox"/> 511 Latin American <input type="checkbox"/> 521 African <input type="checkbox"/> 531 Other <input type="checkbox"/> 611 Not Stated <input type="checkbox"/> 999			
If you identify as New Zealand Māori, what iwi are you from? .....  Please specify if "Other Pacific Peoples", "Other European", "Other Southeast Asian", "Other Asian" or "Other" .....					
<b>Citizenship and Residency</b> <i>(Attach verified copies)</i>	<input type="checkbox"/> NZ Citizen (NZL) <input type="checkbox"/> Australian Citizen (AUS) <input type="checkbox"/> Permanent Resident (NZP) <input type="checkbox"/> If other, please specify your Country of Citizenship				

<b>Section B – Education Information</b>			
Have you studied at VisionWest previously: <input type="checkbox"/> Yes <input type="checkbox"/> No			
If you have studied at VisionWest before have you enrolled under another name?: <input type="checkbox"/> Yes <input type="checkbox"/> No			
If yes, what was that name: .....			
What was the last Secondary School you attended: ..... <i>(state overseas, if applicable)</i>			
What is your highest secondary school qualification (tick one box only)			
No formal qualifications	<input type="checkbox"/>	00	
14 or more credits at any level	<input type="checkbox"/>	11	
NCEA Level 1 or School Certificate	<input type="checkbox"/>	12	
NCEA Level 2 or 6 <sup>th</sup> Form Certificate	<input type="checkbox"/>	13	
NCEA Level 3 or Bursary	<input type="checkbox"/>	15	
University Entrance	<input type="checkbox"/>	14	
Overseas qualification	<input type="checkbox"/>	09	
Other	<input type="checkbox"/>	98	
Not known	<input type="checkbox"/>	99	
Please specify if "Overseas qualification" or "Other" .....			
Do you have any other qualifications that you have achieved once leaving secondary school: <input type="checkbox"/> Yes <input type="checkbox"/> No			
If yes, please state: .....			
Have you attended any other tertiary institution: <input type="checkbox"/> Yes <input type="checkbox"/> No <span style="float: right;"><i>If yes, please answer the following questions:</i></span>			
What tertiary institutions have you attended? .....			
What year did you first enrol in tertiary studies?		When did you graduate?	

<b>Section C (Part 1) – Employment Information: NZCALNE only</b>			
Are you currently employed <input type="checkbox"/> Yes <input type="checkbox"/> No <span style="float: right;"><i>If yes please give details below</i></span>			
Employer	Role	Length of employment	Reason for leaving
Total Number of years teaching/training: .....			
<b>Section C (Part 2) – Prior Activity</b>			
What was your main occupation or activity in New Zealand three months ago to this day? (tick one box only)			
Secondary school student	<input type="checkbox"/>	01	Non-employed or beneficiary (excluding retired) <input type="checkbox"/>
Wage or salary worker	<input type="checkbox"/>	03	Self-employed <input type="checkbox"/>
University student	<input type="checkbox"/>	05	Polytechnic student <input type="checkbox"/>
House-person or retired	<input type="checkbox"/>	08	Overseas (irrespective of occupation) <input type="checkbox"/>
Private Training Establishment student	<input type="checkbox"/>	11	Wānanga student <input type="checkbox"/>
			02 <input type="checkbox"/>
			04 <input type="checkbox"/>
			06 <input type="checkbox"/>
			09 <input type="checkbox"/>
			12 <input type="checkbox"/>

**Section D - Health**

Do you have any illnesses that staff should be aware of that might affect your studies:  Yes  No

*If yes please specify: .....*

Do you have any current disabilities?  Yes  No

*If yes please specify: .....*

Do you suffer from any mental health issues:  Yes  No  
*(for eg. anxiety, depression, disorders, learning development etc)*

*If yes please specify: .....*

**Section I - Emergency Contact Details**

**First name:**

**Surname / family name:**

Address:

Post Code:

Phone (Home):

Phone (Work):

Mobile:

Relationship:

**Enrolment Declaration**

**Confidentiality Disclosure**

**Collection of Information:** The information we collect will enable us to keep records about our work with people who use our services.

**Use of Information:** This information is kept to enable us to coordinate and manage the services we provide to you.

**Access to Information:** Records will be kept in our secure client database and in lockable cupboards in our premises and access to this information will be restricted to authorised personnel. You may access personal information that we hold about you. You may also request us to correct any errors or delete any information we hold about you. VisionWest will not disclose any personal information to any other party without your consent unless there is a serious risk of safety to yourself or others.

In signing this enrolment form you authorise such disclosure on the understanding that VisionWest Training Centre will observe the conditions governing the release of information, as set out in the Privacy Act 1993, the Education Act 1989 and other relevant legislation. 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 VisionWest Training Centre to collect, hold, handle, use and disclose personal information in accordance with the twelve information privacy principles in the Act. <http://www.privacy.org.nz>

When requested VisionWest may be required (by law) to supply information to Government Agencies, such as:

- the Ministry of Education
- the New Zealand Qualifications Authority
- the Tertiary Education Commission
- the Ministry of Social Development (in relation to student loans and allowances) and Inland Revenue (student loans)
- Immigration New Zealand and the Ministry of Business, Innovation and Employment (for those who are not New Zealand citizens or permanent residents)
- Agencies who support particular students through scholarships, payment of fees or other awards (if you are a recipient
- of one of these awards)
- National Student Index
- NZ Police
- Other Education Organisations (verification of academic records)

Those agencies use the data collected from tertiary education organisations to:

- administer the tertiary education system, including allocating funding
- develop policy advice for government
- conduct statistical analysis and research

Your personal details (name, date of birth and residency) as entered on this form will be included in the National Student Index and may be used in an authorised information matching programme with the New Zealand Birth Register. Information collected on this form may be supplied to other educational organisations for the purpose of verifying academic records.

**Rules**

On signing this Enrolment form you undertake to comply with VisionWest Training Centre’s rules regarding attendance, academic integrity, conduct and use of Information Systems (IT).

**Declaration**

I declare that all the information I have supplied on this form is to be true and complete

**Student Signature:**

x

**Date:**

**Enrolment Checklist (Student):**

- Student Enrolment Form signed
- Verified copy of ID – NZ Birth Certificate/Passport/Overseas Passport with bio data page and Residency page

**NZCALNE STUDENT:**

- Verified copy of prior learning record (NZQA ROL) - Relevant Level 4 qualification or above or US 4098
- Letter of employer endorsement to state learner competency if applicable
- To gain entry into this programme you will need to be involved in training and have access to at least two adult learners, either in a workplace, community-based organisation or by distance learning\*  
To confirm you meet the on-the-job requirements of the programme, you will be asked to provide details of your employment in adult education or workplace training as part of the enrolment process.

\*Access to adult learners/trainees means that you are able to train adult learners towards a specific skill or that you are involved in on-the-job training. Contact us before applying to enrol if you’re unsure about the above.

SAVE DOCUMENT

SUBMIT

***For office use only***

- Student Enrolment Form signed*
- Copy of ID obtained – Birth Certificate/Passport/Residency*
- Prior learning record obtained (NZQA ROL)*
- Offer of Placement Letter is given to learner (copy of letter is attached)*
- Learner is qualified to have adequate academic achievement (see Learner Qualification Checklist)*

**Approved by APM/GM**

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\_\_\_\_/\_\_\_\_/\_\_\_\_

**Entered by EA**

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