APPLICATION FORM FOR INTERNATIONAL STUDENTS



NOTE: THERE IS NO REFUND FOR WITHDRAWALS ONCE A PROGRAMME OR COURSE HAS STARTED

This application form is for International Students applying to study at Wintec. In order for your application to be considered, please complete ALL sections of this form, attach the required verified documentation and sign and date the declaration at the end. As programmes are very popular, please apply early while spaces are still available.

Medical and Travel Insurance: It is compulsory for all International Students to have appropriate and current Medical and Travel Insurance while studying in New Zealand. It is a Wintec requirement for International Students to be covered from the day the student leaves their home country to the expiry date

of their Visa plus one week. Proof of current Medical and Travel Insurance is required before your enrolment can be finalised.

Private Bag 3036, Hamilton, New Zealand Phone: +64 7 838 6399

Fax: +64 7 858 0246

Email: international@wintec.ac.nz Web: www.wintec.ac.nz/international

| SECTION ONE - PERSONAL DETAILS | | | | |
|--------------------------------|--|---|--|--|
| SEL | TION ONE - PERSONAL DETAILS | | | |
| 1.1 | Title Mr Mrs Ms Miss Other | OFFICIAL USE ONLY | | |
| 1.2 | First Name(s) | I D N U M B E R | | |
| 1.3 | Family Name (please PRINT your name as shown on your passport) | | | |
| | Comprise (presser that you take as shown on you passport) | BARCODE HERE | | |
| 1.4 | Preferred First Name | BARCOBETIERE | | |
| | | | | |
| 1.5 | Date of Birth 1.6 Gender | | | |
| | d d m m y y Male Female | | | |
| | Please attach a verified copy of your passport or birth certificate | SECTION THREE - AGENT CONTACT DETAILS* | | |
| 1.7 | Country of citizenship | If you are not applying through an agent please go to Section Four. 3.1 Agent's company name: | | |
| 1.7 | Country of Civil C | | | |
| 1.8 | Ethnicity | 3.2 What is the agent's name? | | |
| | | | | |
| | | 3.3 Wintec authorised Agent number | | |
| SEC | TION TWO - YOUR CONTACT DETAILS | | | |
| Pleas | se ensure this is kept up- to-date at all times and advise us of any changes. | (Authorised agents can send scanned copies as long as the email states they are true copies) | | |
| 21 | What is your current address? | 3.4 What is the agent's email address? | | |
| | Unit number/street number and name | | | |
| | | * Note: Original certified copies of documents are preferred, however | | |
| | Suburb | photocopies, fascimilies or emailed scanned documents are acceptable if of a high quality and are legible. You will be required to produce original | | |
| | City/Town | certified documents upon arrival in New Zealand for audit purposes and/or if the electronic copies you have supplied are illegible. | | |
| | | | | |
| | Country Tick if this is your main postal address | SECTION FOUR - WINTEC SERVICES | | |
| 2.3 | How can we contact you? | 4.1 Would you like Wintec to organise accommodation for you?: | | |
| , | Home phone | Yes No | | |
| | | 4.2 If yes, please indicate your accommodation preference: | | |
| | Mobile | Homestay Hostel | | |
| | Work | 4.3 Would you like Wintec to arrange an airport pick-up for you? | | |
| | Email | Yes No | | |
| 2.4 | Who is your emergency contact ? | | | |
| | Name | | | |
| | Relationship to you | | | |
| | Telephone | | | |
| | | | | |

| SECTION FIVE - ENGLISH STUDY | SECTION SEVEN - ENGLISH PROFICIENCY CONT. |
|---|--|
| 5.1 Do you wish to study English (ESOL) before you study a mainstream programme? Yes - go to 5.2 No - go to Section Six. | 7.5 Have you studied in New Zealand before? eg Language School, Secondary School, Polytechnic or University Yes No |
| 5.2 How many weeks? | 7.6 If YES, name of institution |
| | 7.7 Dates attended From To |
| 5.3 Preferred start date 5.4 Preferred end date | 7.7 Bates attended |
| | |
| 5.5 Do you want to study ESOL during Summer School (Dec / Jan)? | SECTION EIGHT - SECONDARY SCHOOL STUDIES |
| S.5 Do you want to study ESOL during Summer School (Dec / Jan)? Yes No | 8.1 Please provide verified official documentation of academic results for all qualifications |
| SECTION SIX - PROGRAMME SELECTION | NEW ZEALAND SECONDARY |
| | NAME OF SCHOOL |
| 6.1 What mainstream programme(s)/Qualification(s) at Wintec are you | HIGHEST |
| wanting to do? | QUALIFICATION |
| NAME OF MAINSTREAM PROGRAMME(S) FOR OFFICE USE ONLY PROGRAMME CORE | YEAR START YEAR FINISH |
| PROGRAMINE CODE | Successfully completed Yes No |
| 1 | OVERSEAS HIGH SCHOOL |
| Pathway: | NAME OF SCHOOL |
| Pathway: | COUNTRY |
| 3 | HIGHEST |
| Pathway: | QUALIFICATION |
| , demoy, | YEAR START YEAR FINISH |
| 6.2 Preferred mainstream programme start date if offerred a place? | Successfully completed Yes No |
| February April/May July October / November (Please check intake is correctly selected: www.wintec.ac.nz/courses) 6.3 Are you applying for transfer of credit? If yes, complete an application form when you arrive at Wintec. You must also provide learning descriptors/learning outcomes of previous study with this application for assessment. Yes No | SECTION NINE - TERTIARY STUDIES 9.1 Please provide verified official documentation of academic results for all qualifications UNIVERSITY/HIGHER EDUCATION/FOUNDATION/LANGUAGE SCHOOL |
| | NAME OF SCHOOL |
| SECTION SEVEN - ENGLISH PROFICIENCY | COUNTRY |
| 7.1 What is your first language? | QUALIFICATION |
| , | YEAR START YEAR FINISH |
| | Successfully completed Yes No |
| 7.2 Have you ever had your English language abilities or proficiency tested? | NAME OF SCHOOL |
| | COUNTRY |
| Yes No Date of Assessment | QUALIFICATION |
| 7.3 What level was your English language assessed at? | YEAR START YEAR FINISH |
| (Please attach a verified copy of your results) | Successfully completed Yes No |
| score: TOEFL Computer based Paper based | 9.2 What is the highest tertiary qualification you hold? (please tick one) |
| score: TOEIC Computer based Paper based | |
| IELTS: | No tertiary qualification |
| | Vocational qualification (Trade, NZ Certificate) |
| inceduing Listering | Certificate |
| score: Writing score: Speaking | Diploma |
| Overall score: | |
| | Graduate Certificate/Diploma |
| NCEA: level: Score: | Bachelors degree |
| Other: level: Score: | Postgraduate qualification |
| 7.4 If you have not sat an English proficiency test in the last 3-4 months, | Masters |
| 7.4 If you have not sat an English proficiency test in the last 3-4 months, do you require a Wintec internal language assessment? | |
| Yes No | Other |
| | Please attach a verified translation of your results. |
| | |

| SECTION TEN - STATISTICAL INFORMATION | SECTION THIRTEEN - STUDENT DECLARATION - ALL STUDENTS MUST READ THE FOLLOWING |
|---|--|
| 10.1 How do you hear about Wintec? Please tick one | INFORMATION AND SIGN |
| Embassy/NZ Trade and Enterprise Agent | Personal information collected, held and exchanged by Wintec is required to enable it to comply with the Education Act 1989 and its role as an |
| Friends Family member | educational provider. The collection, use, storage, exchange and update of personal information will be in accordance with the Privacy Act 1993. |
| Education fair/expo Advertisment | I will make myself familiar and comply with provisions of Wintec's Policies |
| Other NZ education provider NZ High School | and Regulations obtainable from the Library, Faculty/ Schools or Wintec website, www.wintec.ac.nz, including Academic Regulations, Occupational |
| English language school Internet | Health & Safety, Regalia (Graduation), Smokefree, Student Complaints, Student Computer Use and Programme Regulations |
| Other | Key points to include: |
| 10.2 What was (or will be) your main activity on the 1st of October in the year before you start your study? | Students have the right to access and correct any information held about them. |
| Living outside of New Zealand Living in New Zealand | Within Wintec, relevant personal information will be available to staff responsible for enrolment, for establishing and maintaining records, providing tuition, programmes and academic support, |
| If living in New Zealand, please specify Secondary school student Tertiary student | providing student services (including Students' Association), and for maintaining discipline and order. |
| Wage/ salaried worker Non-employed | iii) Wintec is also required to collect and store information from |
| wage/ salaheu worker Non-employeu | this form to comply with the requirements of the Ministry of Education (student statistical returns), New Zealand Qualifications Authority |
| SECTION ELEVEN - IMPAIRMENTS | (Record of Learning registration and Unit Standard outcomes), Ministry of Social Development (confirmation of enrolment and academic outcomes), Immigration New Zealand (if you are not a New Zealand citizen or permanent resident) and other educational organisations and agencies supporting students through scholarships and awards. In addition, when required by statute, Wintec releases information to Government agencies such as the New Zealand Police, Department of Justice, Ministry of Social Development, and the Accident Compensation Corporation (ACC). |
| 11.1 Do you live with the effects of a significant injury, long-term illness, or disability? | |
| Yes No | |
| 11.2 If yes, please indicate by ticking the appropriate box below | |
| Deaf Hearing Impairment | a) I have read and understood the guideline above of how Wintec |
| Blind Vision impairment | will apply the Privacy Act, and I authorise Wintec to collect, use and disclose personal information about me in accordance with that outline and the Privacy Act 1993. |
| Specific learning disability Medical | b) I authorise any agency holding the source of any information I |
| Head injury Mental health | have provided on this form to release that information to Wintec upon request. |
| Mobility/physical Speech impairment | I declare that the information I have supplied in this form and any attached documentation is true and complete and |
| Other - please state | l acknowledge that Wintec may suspend my enrolment if false information has been supplied or required information is not |
| SECTION TWELVE - CRIMINAL CONVICTIONS | supplied by the due date. |
| This information is legally required to provide to any employers of students | d) I will make myself familiar and comply with provisions of Wintec's Policies and Regulations obtainable from the Library, Faculty/Schools or the Wintec website, www.wintec.ac.nz, including Academic Regulations, Occupational Health & Safety, Regalia (Graduation), Smokefree, Student Complaints, Student Computer Use and Programme Regulations. |
| who are placed with them for work experience, clinical, or practical components of the students' programme of study. Wintec must make you | |
| aware that if you have a criminal record, and you are unable to complete a practical component of the programme, you may not be eliqible for the | |
| qualification at the end of the course. Any students enrolling with a criminal record should contact with the Student Enrolment and Information Centre. | e) Please Note: that 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 |
| | |
| 12.1 Have you ever been convicted of or have a pending conviction for any offence against the law (apart from minor traffic convictions)? | Register. For further information please see http://www.nsi.govt.nz/ima |
| Yes No | f) Wintec may contact you via telephone, post, email and/or text message regarding your enrolment or Wintec's services, news |
| 12.2 If yes please complete the consent to disclosure of information which can be found online at www.wintec.ac.nz/forms and attach to this form. | or events. |
| | To be signed by the applicant |
| APPLICATION CHECKLIST | Your Signature Your Signature |
| Answered ALL questions? Attached a verified copy of your English Proficiency | Date |
| Attached your verified copies Test results, if required? (DO | To be signed by a parent/quardian for applicants under the age of 18 years only |
| NOT send originals, only Name, Date of Birth and Residency status? (DO NOT NOT send originals, only verified copies). | Parents/guardians signature |
| send originals, only verified Signed and dated this form? | |
| Attached your results if | Date |
| required by programme entry criteria? (DO NOT send | |
| originals, only verified copies). | |
| | |