

Students Online

Permit Application Form 2009



Please complete this form and have checked by the Student Enrolment and Information Centre BEFORE paying fee at Finance.

Student to Complete

First Name _____ Family Name _____ (as in Passport)

Gender Male Female Date of Birth ____/____/____ Student ID _____

Address _____

Current Email _____ Preferred Contact Phone _____

Emergency Contact Person _____ Emergency Contact Person Phone _____

Programme of Study _____

Country of Passport _____ Passport No _____

Passport Expiry Date ____/____/____

Have you obtained a new Passport since receiving the last student permit? Yes No

Tick the box if you have the following documents with you:

- A **New Zealand** bank statement in your name showing a street address and that you have NZ\$5,000.00 (half year study) or NZ\$10,000.00 (one year study) for living expenses or a completed Immigration New Zealand Financial Undertaking form NZIS1014
- Evidence of sufficient funds to purchase an outward ticket approximately NZ\$1,000.00
- Supplementary form for Citizens of Fiji or Zimbabwe

Have you ever had any Criminal Convictions? Yes No

If yes please state details _____

Have you already sent a Police certificate to Immigration New Zealand in the last 24 months? Yes No
Immigration New Zealand will tell you if any further information about your character is needed.

Are you currently receiving, or likely to require any Medical treatment during your stay in New Zealand. Yes No

Are you pregnant? Yes No

Have you provided Immigration New Zealand with a completed Medical and X Ray form in the last 24 months? Yes No

If Yes please advise approximate date: _____

If No, you will be required to provide one. Please use the Medical and X ray form (NZIS 1007)
You may continue with this application but will be granted a 3 month interim permit electronically (no label provided).

Do you intend to be in New Zealand for more than 6 months but less than 12 months? Yes No

If **Yes** you will need to provide a Temporary Entry X Ray Certificate (NZIS 1096)

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Additional Details

(Only complete this section if student is aged 17 years or over.)

Do you have a national identity number, or other unique identifier that was issued to you by any government?

No Yes National identity number/unique identifier: _____

Have you completed military service in any country? No Yes

If yes, please provide information about your military service including the dates of your military service, your position and rank, the unit or units that you served in, and your role within each unit.

Date from (DD/MM/YY)	Date to (DD/MM/YY)	Rank	Unit name or number	Role
/ /	/ /			
/ /	/ /			

Please also list any military identity numbers you were given. ID number: _____

Are you presently subject to military service obligations in any country? No Yes

If you have answered **NO**, and you are a citizen of a country in which compulsory military service exists, please give details. _____

Have you been associated with any intelligence agency or group, or law enforcement agency? No Yes

If Yes, please describe how you were involved

Have you been associated with any group or organisation that has used or promoted the violence to further their aims? No Yes

If Yes, please describe how you were involved

Have you ever committed or been involved in war crimes, crimes against humanity, and/or human rights abuses?

No Yes

If Yes, please describe how you were involved

Declaration by Student

I have provided true and correct answers to the questions in this form.

I agree to tell Immigration New Zealand about any changes to my circumstances that occur after making this application.

I agree to leave New Zealand before my permit expires. If I remain in New Zealand after my permit has expired, I may be removed by Immigration New Zealand.

I agree that if I am not entitled to free health care in New Zealand, I will pay for any health care or medical assistance I may require in New Zealand.

I authorise Immigration New Zealand to provide information about my health and my immigration status to any health service agency.

I authorise any health service agency to provide information about my health to Immigration New Zealand.

I authorise Immigration New Zealand to make any necessary enquiries about information on this form so that they can:

- make a decision on this application
- answer enquiries about my immigration status once my application has been decided.

I authorise any agency that holds information (including personal information) related to those matters to disclose that information to Immigration New Zealand.

If I am granted a student permit with the condition that I am accompanied by a legal guardian, I agree to live with my legal guardian. I understand that my permit and the permit of my legal guardian may be withdrawn if I do not meet this condition.

If I am granted a limited purpose permit, I agree that I will leave New Zealand on or before the expiry date of that permit. If I do not leave New Zealand, I may be immediately removed from New Zealand without the right of appeal.

I hereby authorise Wintec to act as an agent on my behalf for the purpose of liaising with Immigration New Zealand Service for the application and decision of my student permit and visa.

Student Signature

Date