



Enrolment Guide/Form

This Enrolment Guide and the Enrolment Form contain important terms and conditions of your enrolment.

- Please complete all the sections on the Enrolment Form.
- If you meet selected programme entry requirements (if any) you will receive a Confirmation for the qualification/courses, you selected.

If you require help with the form, or have any questions, please contact us at admin@trainingcentric.co.nz

Personal Information

National Student Number (NSN)

Every student in New Zealand is allocated a unique identifier called a National Student Number, which is stored in the National Student Index (NSI) on the Ministry of Education national database.

Your name, date of birth and residency as entered on this application will be matched with your National Student Number to confirm your identity.

Name

If you do not have an active NSN, then QCONZ requires a certified copy of your birth certificate or passport.

A certified copy means that you have taken a photocopy of the original and a Justice of the Peace has signed the copy stating that it exactly matches the original.

Citizenship & Residency Status

Please select what best describes your citizenship and residency status. This is an important question as it affects your enrolment. "New Zealand Citizen" includes citizens of Tokelau, the Cook Islands and Niue.

Education

Please indicate the highest level of academic achievement you gained while at secondary school. If you have completed courses at a Polytechnic, Institute of Technology, University, College of Education, Private Training Establishment or Wānanga since leaving secondary school then please complete this section too.

Disability Details

This information is required for the Tertiary Education Commission and helps us to provide better services to our students.

Please contact us about your needs and discuss support strategies by email at admin@trainingcentric.co.nz.

Fees

Once you receive your Confirmation Letter, your fees are paid to QCONZ by either an Industry Body or NZ Government Body.

If you start your classes but stop attending you must contact us as soon as possible.

If you are under 18 years old when you sign the Enrolment Form, you will also need a parent/guardian to sign your Enrolment Form.

Privacy Statement

- a) You agree that QCONZ will collect, hold, use and disclose personal information about you.
- b) Some of this information will be collected from you. You agree that QCONZ may also collect personal information about you from other sources (including for verification purposes).
- c) The primary purpose of collecting the information is to decide whether to confirm your enrolment and, if your enrolment is confirmed, for purposes in connection with your study. This may include corresponding with you, supplying course and enrolment information, providing associated services, facilitating assistance, quality assurance and planning, complying with legislation, reporting and record keeping.
- d) You authorise QCONZ to disclose such information to other government agencies and organisations including the Ministry of Education, New Zealand Qualifications Authority, Tertiary Education Commission, and Training Organisations.
- e) You have the right of access to personal information about yourself (subject to exceptions in the Privacy Act). If you disagree with any such information you may ask to have it corrected.

For further programme specific information/support please see
QCONZ Training QCONZ Website Or contact us on admin@trainingcentric.co.nz

Please complete all sections

National Student Number (NSN) (if known):

Date of Birth:

DAY

MONTH

YEAR

Preferred Name(s):

Legal First Name(s):

Legal Surname:

Any previous Surnames (e.g. maiden name):

Gender: ☐ Male ☐ Female ☐ Gender Diverse Please specify (optional):

Country of Birth

Citizenship and Residency Status:

☐

New Zealand Citizen

☐

Australian Citizen

☐

Permanent Resident New Zealand

☐

Other

Mailing Address while studying:

Street Address:

Town/City

Postcode

Home Phone:

Work Phone:

Mobile:

Email:

Emergency Contact Person:

Contact:

Relationship to you:

Phone:

Qualification/Course:

Please write the full name of the qualification you are applying for:

Do you intend applying for any form of Recognition of Prior Learning (RPL)? Yes ☐ No ☐

Name of last secondary school attended:

Which years did you study from at your last secondary school?

YEAR to YEAR

What is the highest level of achievement you hold from a secondary school? (Please tick one box only)

☐ No formal secondary qualification 14 or more credits at any level NCEA Level 1 or School

☐ Certificate NCEA L2 or Sixth Form Certificate University Entrance

☐ NCEA Level 3 or Bursary or Scholarship

☐ Overseas qualification (includes International Baccalaureate and Cambridge Exams)

Other, please specify:

Will this be your first year of tertiary study at any provider?

Yes ☐ No ☐

If no, please enter the name of the tertiary institute you last studied at:

What was the first year of your enrolment in Tertiary Study?

YEAR

What qualification(s) did you achieve?

What ethnic group(s) do you belong to?

- ☐ Pākehā or NZ European
- ☐ NZ Māori - Please specify iwi: - _____
- ☐ Australian
- ☐ Pacific Islander – Please specify: - _____
- ☐ Indian
- ☐ European – Please specify: - _____
- ☐ Asian - Please specify: - _____
- ☐ Other: - Please specify _____

Do you live with the effects of an injury, allergy, long-term illness or impairment?

Yes ☐ No ☐

If yes, please specify (including medications if allergy):

Reasonable support is available for students with medical conditions, disabilities and/or learning difficulties.

Acknowledgement/Declaration

I hereby apply for enrolment and I understand and agree to the following:

a) That my enrolment is subject to:

- i. **Me meeting course enrolment requirements. See minimum course requirements <https://qconz.co.nz/student-section/>**
- ii. **receiving Confirmation Letter.**
- iii. **payment of all fees payable by me is completed on or before the First Date Teaching Starts.**

b) That when I receive a Confirmation Letter I will (subject to my right to withdraw) participate in the qualification/courses I am enrolled in and use my best efforts to successfully complete those qualification/courses.

c) That the information I have provided is true and correct.

d) That I have read and understand the terms of my enrolment.

Signature:

Date

Signature of Parent/Guardian:

(if applicant is under 18 years of age at the date of signing)

Date