





# **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 Letter and an invoice for fees payable for the qualification/courses you selected.
- You must pay all fees payable before the first day that teaching starts in the programme of study you are enrolled in, otherwise QCONZ reserves the right to cancel your enrolment by letter.

#### HELP IN COMPLETING THE ENROLMENT FORM

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 and fees. "New Zealand Citizen" includes citizens of Tokelau, the Cook Islands and Niue.

# **Qualification/Course**

Please state the name of the course you wish to enrol in.

### **RPL**

Recognition of Prior Learning (RPL) is when you apply to credit your prior learning towards the qualification you are enrolling in. Your prior learning may be from courses studied, or may be from your life experience, or on-the-job training. If you tick "yes", please contact as at <a href="mailto:admini@trainingcentric.co.nz">admin@trainingcentric.co.nz</a> for more information. There may be an administration fee for this.

### 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, you must pay ALL fees in full prior to the First Date of your programme of study. If fees are not received by the due date we reserve the right to cancel your enrolment by letter.

If you start your classes but stop attending you must contact us within the withdrawal period. If you have not paid your fees, and you start your classes you are still liable to pay those fees.

If you are utilising fees-free funding and if for any reason at any time you and your chosen study are not eligible for fees-free funding then if you have not withdrawn within the time required to be eligible for a fees refund, you agree to pay all fees for your chosen study.

If you are eligible for and using fees-free funding, you agree to pay any fees payable that are not covered by fees-free.

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. If a guardian signs this form then the guardian agrees to pay your fees if required.

# **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 New Zealand Milking and Pumping Trade Association, Ministry of Education, New Zealand Qualifications Authority, Tertiary Education Commission, and Industry 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 https://qconz.co.nz/student-section/ Or contact us on admin@trainingcentric.co.nz

		Please comp	plete all sectio	ns	
National Student Nu	umber (NSN) (i	f known):			
		,			
Date of Birth: DAY	MONTH	YEAR			
Preferred Name(s):					
,					
Legal First Name(s):					
Legal Surname:					
Any previous Surnar	mes (e.g. maide	en name):			
Gender: Male	Female Ge	ender Diverse Pleas	e specify	,	
Citizenship and Resi	dency Status:				
	-				
New Zealand	Citizen				
Australian Cit	izen				
Permanent R	esident New Z	ealand			
Mailing Address wh	ile studying:				
Ctua at Addusas					
Street Address:					
Town/City				Postcode	

Mobile: Email:  Emergency Contact Person:  Contact: Relationship to you: Phone:  Qualification/Course:
Email:  Emergency Contact Person:  Contact: Relationship to you:
Emergency Contact Person:  Contact: Relationship to you: Phone:  Qualification/Course:
Contact: Relationship to you: Phone:  Qualification/Course:
Contact: Relationship to you: Phone:  Qualification/Course:
Relationship to you: Phone:  Qualification/Course:
Relationship to you: Phone:  Qualification/Course:
Phone:  Qualification/Course:
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 according qualification 44 or many availte at any level NCTA Level 4 or Cabacl
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:
Curon, prodess opening.
Will this be your first year of tertiary study at any provider?
Yes No
f no, please enter the name of the tertiary institute you last studied at:
What was the first year of your appalment in Tartiany Study?  YEAR
What was the first year of your enrolment in Tertiary Study?
What qualification(s) did you achieve?
rinat qualification(s) did you achieve:

What ethnic group(s) do you beld You may tick up to 3 boxes.  European/Pākehā or NZ Eu NZ Māori (Please see iwi be Australian Cook Island Māori Fijian Niuean Samoan Tokelauel Other Pacific People British Dutch German Greek Italia South Slav Other European Chinese Indian Japanese Sri Lanka Other Southeast Asian Afr Latin American Middle Eastern Other:  If you identified as New Zealand I	uropean elow) n Tongan n/Irish n Polish n Other Asian Cambodian Filipino Ko	orean V	ïetnamese	
Do you live with the effects of an Yes No  If yes, please specify:	injury, long-term illness or impairmen	nt?		
Reasonable additional support is learning difficulties.	s available for students with medical o	condition	ons, disabilities and/or	
Acknowledgement/Declaration				
ii. receiving Confirmation Letter.  iii. payment of all fees payable by  b) That when I receive a Confirmation	requirements. See minimum course require me is completed on or before the First Date <sup>o</sup> n Letter I will (subject to my right to withdra s to successfully complete those qualificat	Teachin aw) parti	g Starts.	
d) That I have read and understand t	he terms of my enrolment.			
Signature:			Date	
Signature of Parent/Guardian: (if applicant is under 18 years of age at the date of signing)			Date	