

**1. Personal Information**

Applicant's family name:

Applicant's first name(s):

Gender: Female Male

Date of Birth:

Marital status: Single Married Divorced Separated Other (please state): _____**Current NZ Address**

No: Street: Suburb: City:

Phone: Email:

Address in home country:

Town/city of birth:

Country of birth:

Your student advisor's details will be given to Immigration NZ for communication about this application.

 Yes No**2. Course Information**

Student ID#: Name of course:

Course start date: Course end date: Government scholarship? Yes No

Date fees have been paid up to/ scholarship ends:

3. Passport details

Passport number: Passport country: Expiry date:

Other citizenships you hold (if applicable):

4. Employment history (List all periods of employment, including self-employments)

Date from	Date to	Name of employer	Location	Occupation

5. Your character**Have you been**Convicted Yes No Charged Yes No Under investigation Yes No
for any offence(s) against the law in any country, including New Zealand?**Have you been**Excluded/refused entry from Yes No Refused a visa by Yes No Removed/ deported from Yes No
any country including New Zealand?If you have answered **Yes** to any of the above, please provide details: _____**Police certificates you must provide**

Select the appropriate option to indicate whether you are required to provide a police certificate with this application. Police certificates must be less than six months old when you submit them to immigration New Zealand.

You do not need to provide a police certificate if:

- you are under 17, or
- you are not intending to be in New Zealand for more than 24 months, or
- you have provided a police certificate to immigration New Zealand with a previous application, and that certificate was dated less than 36 months ago
- you are younger than 20, and
- held a visa on your 17th birthday, and
- have held student visas (or interim visas with study conditions) continuously since turning 17

You must provide police certificates from your country of citizenship and any country you have lived in for five years or more since the age of 17 if you plan to be in New Zealand for 24 months, and, either:

- You have not previously provided police certificates to Immigration New Zealand, or
- You have previously provided a police certificate to Immigration New Zealand, but that certificate was dated more than 36 months ago.

6. Your health

Do you have Tuberculosis (TB)? Yes No

Do you have any medical condition(s) that requires, or may require one of the following during your stay in New Zealand?

Renal dialysis Yes No Hospital care Yes No Residential care Yes No

If you have answered Yes to any of the questions above, please provide details:

Are you pregnant? Yes Date you are due to give birth _____ No

If you intend to give birth in New Zealand, please indicate how the cost of maternity health services will be paid for and provide the relevant evidence.

- Not applicable as I do not intend to give birth in New Zealand.
- I am, or will be eligible for publicly-funded maternity health services and have provided evidence of my eligibility
- I will cover the cost myself and have attached copies (not originals) that I have at least NZ\$9000 of funds available
- My sponsor has guaranteed to cover the cost and I have attached a completed Sponsorship Form for Temporary entry (*INZ 1025*)

a) Will you be in New Zealand for less than 6 months?

Yes You do not need to provide a medical certificate or chest X-ray certificate. Go g) No Go to b)

b) Have you ever used intravenous drugs? Yes No

Have you ever had a blood or blood product transfusion? Yes No

Have you ever participated in or been exposed to any activity which may have exposed you to a serious infectious disease (such as HIV, or hepatitis B or c)?

Yes No

If you have answered YES to any of the questions in b) you **must** provide a completed *General Medical Certificate (INZ 1007)* regardless of any of the advice below. Go to c)

c) Are you from, or have you visited for more than 3 months, a place that is outside the list of 'Countries, areas, and territories with a low incidence of tuberculosis'?

Yes Go to d) No You do not need to provide a chest X-ray certificate Go to f)

d) Have you previously provided a chest X-ray certificate which was issued less than 36 months ago?

Yes Go to e)

No You must provide a Chest X-ray Certificate (INZ 1096) unless you are (select an option if applicable):

pregnant, or under 11 years of age. Go to f)

e) Have you spent six consecutive months since your previous visa application in a place that is outside the list of 'Countries, areas, and territories with a low incidence of tuberculosis'?

Yes You must provide a new Chest X-ray Certificate (INZ 1096) unless you are (select an option if applicable):

Pregnant, or under 11 years of age. Go to f)

No You do not need to provide a chest X-ray certificate Go to f)

f) Have you been advised in writing by Immigration New Zealand to provide a medical certificate, a chest X-ray certificate or any other medical information with this application?

Yes You must provide a General Medical Certificate (INZ 1007), a Chest X-ray Certificate (INZ1096) or the further medical information requested by Immigration New Zealand. Go to g)

No Unless the previous questions have indicated that you must provide a medical certificate, or a chest X-ray certificate, or further medical information, you do not need to provide further documents about your health. Go to g)

g) Declaration regarding insurance requirements

I agree to arrange and hold insurance which my education provider considers acceptable, from the period of my enrolment, until the expiry of my student visa, unless I depart New Zealand earlier.

Yes

I understand that holding insurance will be a condition of my visa and that I may become liable for deportation if I do not hold insurance, from the period of my enrolment until my visa expires, unless I depart New Zealand earlier.

Yes

I understand that if I apply for a further visa, I may be required to provide evidence that I held acceptable insurance while in New Zealand, holding the visa that I am currently applying for.

Yes

7. Financial Support (Tick one or more)

- I have attached copies of evidence that I have sufficient funds equivalent to NZ\$ 15000 for a full year of study, or NZ\$ 1250 per month that I will be in New Zealand.
- I have attached a receipt showing I have paid homestay fees for the full duration of my course.
- I have attached a sponsorship Form for Temporary Entry (INZ1025) completed by an acceptable sponsor.
- I have attached a completed *Financial Undertaking for a Student (INZ 1014)* (**Note:** If you are in New Zealand, a financial undertaking can only be provided if your original student visa application made outside New Zealand included a financial undertaking. The financial undertaking supplied with this application must be completed by the same person who completed the original undertaking)

8. Declaration

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 visa expires. If I remain in New Zealand after my visa has expired, I may be liable for deportation.

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 understand that if I have received immigration advice from an immigration adviser and if that immigration adviser is not licensed under the Immigration Advisers Licensing Act 2007 when they should be, Immigration New Zealand will return my application.

I understand that Immigration New Zealand may provide information about my entitlement to work to potential employers via the online VisaView system. VisaView is authorised by legislation.

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 and/or accompanying documentation.

I authorise any agency whether in New Zealand or overseas, including but not limited to border or immigration agencies, education providers, financial institutions, foreign embassies, government authorities, healthcare providers, police or other law enforcement agencies, that holds information (including personal information) related to information on this application form and/or accompanying documentation to disclose that information to Immigration New Zealand.

I authorise Immigration New Zealand to provide information about my immigration status to my past, present or future education provider and to the International Education Appeal Authority. I authorise Immigration New Zealand to provide information about the status of my student visa application to my present education provider.

If I am granted a student visa with the condition that I am accompanied by a legal guardian, I agree to live with my legal guardian. I understand that both I and my legal guardian could be made liable for deportation if this condition is not met.

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

If I am granted a student visa with the condition that I hold acceptable insurance, I understand the requirements regarding insurance that I have agreed to at 6g).

Signature of applicant _____ **Date:** _____

OFFICE USE ONLY

Check that all applications include the following:

Student's Name: _____

Application Date: _____

Document Checklist

	✓, X or N/A
Completed & signed form	
2 x passport photos	
X-ray Certificate for Temporary Entry	
Medical Certificate	
Police Certificate	
Offer of Place	
Receipt	
Report and attendance	
Evidence of Financial support	
Accommodation Guarantee	
Saudi supplementary form (scholarship students only)	
Paid fee	

Passport received: _____ (Signature) _____ (Date)

Passport returned: _____ (Signature) _____ (Date)

Notes: