



**NAME**

Please print your full legal name: Family.....

Given Names:.....

Preferred first name:..... Previous name(s) known by:.....

If you have previously enrolled in this organisation under another name, what was that name? .....

**Please read the instructions below carefully before you complete this enrolment form.**

**INSTRUCTIONS**

The purpose of this enrolment form is to obtain from you the information we need to enrol you into a qualification at our organisation. We also need to collect information from you which is required by the Ministry of Education and other Government agencies for statistical and registration reasons. Please fill in the form properly by:

- Completing all sections of the form.
- Printing your answers clearly in pen, or by ticking the box that applies for multi-choice questions.
- Signing the form.
- Attaching to the form additional documentation that is required for Ministry of Education funding purposes. A description of the required documentation is provided on page 5 of the form.

A QUALIFICATION			
1	Please indicate the qualification you are enrolling for:	LTh Diploma <input type="checkbox"/> Assoc Diploma <input type="checkbox"/> Ministry Cert <input type="checkbox"/> Ministry Dip <input type="checkbox"/> Stand Alone Subject <input type="checkbox"/>	<i>Office Use</i>
2	Will you be completing the above qualification in 2010?    Yes <input type="checkbox"/> No <input type="checkbox"/>		
3	Study start date..... Study end date (if known) .....		
4	Have you studied with EIDTS before?    Yes <input type="checkbox"/> No <input type="checkbox"/> If you answered "yes" what was your ID number?..... Where did you hear about EIDTS?..... Do you intend to study:    Part time <input type="checkbox"/> Full time <input type="checkbox"/>		
5	Please enter the codes and names of the courses you wish to enrol in for 2010:		
	<b>Code</b>		<b>Code</b>

B PERSONAL						
6	Preferred title:	Ms <input type="checkbox"/>	Miss <input type="checkbox"/>	Mrs <input type="checkbox"/>	Mr <input type="checkbox"/>	Other (Specify): <input type="checkbox"/> Rev <input type="checkbox"/>
7	Date of birth:	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 19 <input type="text"/> <input type="text"/>	8	Gender:	Male <input type="checkbox"/>	Female <input type="checkbox"/>
		<small>day month year</small>				
9	If you know your NSN (National Student Number), please write it here:		<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>			
10	Denomination (optional)					
11	Citizenship and Residency:  You may need to supply evidence of residence or citizenship	Tick the box which best describes your citizenship: <i>New Zealand Citizen</i> <input type="checkbox"/> NZL <i>Australian Citizen</i> <input type="checkbox"/> AUS <i>Other</i> <input type="checkbox"/> Please specify if "Other": <hr/> (For students with dual citizenship, specify the country of citizenship of the passport used to enter New Zealand.)				
		If you ticked "Other", please also specify your fee/assistance status. <i>NZAID Scholarship (incl. Aotearoa, short-term training, and post-graduate)</i> <input type="checkbox"/> 01 <i>Full Fee Paying Foreign Student</i> <input type="checkbox"/> 03 <i>Exchange Scheme approved by Ministry of Education</i> <input type="checkbox"/> 04 <i>Foreign Research Based Post-Graduate</i> <input type="checkbox"/> 06 <i>Military Personnel, Diplomatic Staff or Family, or Persons Associated with Operation Deep Freeze</i> <input type="checkbox"/> 08 <i>On-Shore International PhD student</i> <input type="checkbox"/> 09 <i>International ITO Off-Job Trainee</i> <input type="checkbox"/> 12				
		Tick the box if you have New Zealand Permanent Residency Status: <i>New Zealand Permanent Resident</i> <input type="checkbox"/> NZP				
		During your time studying in this qualification will you be resident in New Zealand or overseas? <i>In New Zealand</i> <input type="checkbox"/> <i>Overseas</i> <input type="checkbox"/>				

12	<p><b>Ethnicity:</b> What ethnic group(s) do you belong to?</p> <p>You may tick up to three boxes, which apply to you.</p>	<table border="0"> <tr><td><i>NZ European/Pakeha</i></td><td><input type="checkbox"/></td><td>111</td><td><i>Filipino</i></td><td><input type="checkbox"/></td><td>411</td></tr> <tr><td><i>New Zealand Māori</i></td><td><input type="checkbox"/></td><td>211</td><td><i>Cambodian</i></td><td><input type="checkbox"/></td><td>412</td></tr> <tr><td><i>Samoan</i></td><td><input type="checkbox"/></td><td>311</td><td><i>Vietnamese</i></td><td><input type="checkbox"/></td><td>413</td></tr> <tr><td><i>Cook Island Māori</i></td><td><input type="checkbox"/></td><td>321</td><td><i>Other Southeast Asian</i></td><td><input type="checkbox"/></td><td>414</td></tr> <tr><td><i>Tongan</i></td><td><input type="checkbox"/></td><td>331</td><td><i>Chinese</i></td><td><input type="checkbox"/></td><td>421</td></tr> <tr><td><i>Niue</i></td><td><input type="checkbox"/></td><td>341</td><td><i>Indian</i></td><td><input type="checkbox"/></td><td>431</td></tr> <tr><td><i>Tokelauan</i></td><td><input type="checkbox"/></td><td>351</td><td><i>Sri Lankan</i></td><td><input type="checkbox"/></td><td>441</td></tr> <tr><td><i>Fijian</i></td><td><input type="checkbox"/></td><td>361</td><td><i>Japanese</i></td><td><input type="checkbox"/></td><td>442</td></tr> <tr><td><i>Other Pacific Peoples</i></td><td><input type="checkbox"/></td><td>371</td><td><i>Korean</i></td><td><input type="checkbox"/></td><td>443</td></tr> <tr><td><i>British/Irish</i></td><td><input type="checkbox"/></td><td>121</td><td><i>Other Asian</i></td><td><input type="checkbox"/></td><td>444</td></tr> <tr><td><i>Dutch</i></td><td><input type="checkbox"/></td><td>122</td><td><i>Middle Eastern</i></td><td><input type="checkbox"/></td><td>511</td></tr> <tr><td><i>Greek</i></td><td><input type="checkbox"/></td><td>123</td><td><i>Latin American</i></td><td><input type="checkbox"/></td><td>521</td></tr> <tr><td><i>Polish</i></td><td><input type="checkbox"/></td><td>124</td><td><i>African</i></td><td><input type="checkbox"/></td><td>531</td></tr> <tr><td><i>South Slav</i></td><td><input type="checkbox"/></td><td>125</td><td><i>Other</i></td><td><input type="checkbox"/></td><td>611</td></tr> <tr><td><i>Italian</i></td><td><input type="checkbox"/></td><td>126</td><td><i>Not Stated</i></td><td><input type="checkbox"/></td><td>999</td></tr> <tr><td><i>German</i></td><td><input type="checkbox"/></td><td>127</td><td></td><td></td><td></td></tr> <tr><td><i>Australian</i></td><td><input type="checkbox"/></td><td>128</td><td></td><td></td><td></td></tr> <tr><td><i>Other European</i></td><td><input type="checkbox"/></td><td>129</td><td></td><td></td><td></td></tr> </table> <p>Please specify if "Other Pacific Peoples", "Other European", "Other Southeast Asian", "Other Asian" or "Other".</p>	<i>NZ European/Pakeha</i>	<input type="checkbox"/>	111	<i>Filipino</i>	<input type="checkbox"/>	411	<i>New Zealand Māori</i>	<input type="checkbox"/>	211	<i>Cambodian</i>	<input type="checkbox"/>	412	<i>Samoan</i>	<input type="checkbox"/>	311	<i>Vietnamese</i>	<input type="checkbox"/>	413	<i>Cook Island Māori</i>	<input type="checkbox"/>	321	<i>Other Southeast Asian</i>	<input type="checkbox"/>	414	<i>Tongan</i>	<input type="checkbox"/>	331	<i>Chinese</i>	<input type="checkbox"/>	421	<i>Niue</i>	<input type="checkbox"/>	341	<i>Indian</i>	<input type="checkbox"/>	431	<i>Tokelauan</i>	<input type="checkbox"/>	351	<i>Sri Lankan</i>	<input type="checkbox"/>	441	<i>Fijian</i>	<input type="checkbox"/>	361	<i>Japanese</i>	<input type="checkbox"/>	442	<i>Other Pacific Peoples</i>	<input type="checkbox"/>	371	<i>Korean</i>	<input type="checkbox"/>	443	<i>British/Irish</i>	<input type="checkbox"/>	121	<i>Other Asian</i>	<input type="checkbox"/>	444	<i>Dutch</i>	<input type="checkbox"/>	122	<i>Middle Eastern</i>	<input type="checkbox"/>	511	<i>Greek</i>	<input type="checkbox"/>	123	<i>Latin American</i>	<input type="checkbox"/>	521	<i>Polish</i>	<input type="checkbox"/>	124	<i>African</i>	<input type="checkbox"/>	531	<i>South Slav</i>	<input type="checkbox"/>	125	<i>Other</i>	<input type="checkbox"/>	611	<i>Italian</i>	<input type="checkbox"/>	126	<i>Not Stated</i>	<input type="checkbox"/>	999	<i>German</i>	<input type="checkbox"/>	127				<i>Australian</i>	<input type="checkbox"/>	128				<i>Other European</i>	<input type="checkbox"/>	129			
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13	<p><b>Iwi:</b> If you identified as New Zealand Māori in question 12, what is the name of your Iwi?</p> <p>You may enter more than one Iwi. If you do not know your Iwi, please enter 'Don't Know'.</p>	<p><i>Iwi:</i> <i>Rohe (Iwi home area):</i></p> <p><i>Iwi:</i> <i>Rohe (Iwi home area):</i></p> <p><i>Iwi:</i> <i>Rohe (Iwi home area):</i></p>																																																																																																												
14	<p><b>Prior activity:</b></p>	<p>What was your MAIN activity or occupation in New Zealand at 1 October 2009? You may tick only one box.</p> <table border="0"> <tr><td><i>Secondary school student</i></td><td><input type="checkbox"/></td><td>01</td><td><i>Non-employed or beneficiary (excluding retired)</i></td><td><input type="checkbox"/></td><td>02</td></tr> <tr><td><i>Wage or salary worker</i></td><td><input type="checkbox"/></td><td>03</td><td><i>Self-employed</i></td><td><input type="checkbox"/></td><td>04</td></tr> <tr><td><i>University student</i></td><td><input type="checkbox"/></td><td>05</td><td><i>Polytechnic student</i></td><td><input type="checkbox"/></td><td>06</td></tr> <tr><td><i>College of Education student</i></td><td><input type="checkbox"/></td><td>07</td><td><i>House-person or retired</i></td><td><input type="checkbox"/></td><td>08</td></tr> <tr><td><i>Overseas (irrespective of occupation)</i></td><td><input type="checkbox"/></td><td>09</td><td><i>Private Training Establishment student</i></td><td><input type="checkbox"/></td><td>11</td></tr> <tr><td><i>Wānanga student</i></td><td><input type="checkbox"/></td><td>12</td><td></td><td></td><td></td></tr> </table>	<i>Secondary school student</i>	<input type="checkbox"/>	01	<i>Non-employed or beneficiary (excluding retired)</i>	<input type="checkbox"/>	02	<i>Wage or salary worker</i>	<input type="checkbox"/>	03	<i>Self-employed</i>	<input type="checkbox"/>	04	<i>University student</i>	<input type="checkbox"/>	05	<i>Polytechnic student</i>	<input type="checkbox"/>	06	<i>College of Education student</i>	<input type="checkbox"/>	07	<i>House-person or retired</i>	<input type="checkbox"/>	08	<i>Overseas (irrespective of occupation)</i>	<input type="checkbox"/>	09	<i>Private Training Establishment student</i>	<input type="checkbox"/>	11	<i>Wānanga student</i>	<input type="checkbox"/>	12																																																																											
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<b>17</b>	Tertiary Study:	<p>Will this be the first year you have ever enrolled in a University, Polytechnic, College of Education, Private Training Establishment, or Wānanga either in New Zealand or overseas since leaving school? Do not include enrolments in STAR, community or hobby classes.</p> <p>No <input type="checkbox"/> Yes <input type="checkbox"/></p> <p>If you answered "No", please enter the <b>name of the organisation</b> you studied at and <b>the year of your first enrolment</b>:</p> <p><b>Name:</b></p> <hr/> <p><b>Year:</b> <input type="checkbox"/><input type="checkbox"/><input type="checkbox"/><input type="checkbox"/></p> <hr/> <p>What year do you expect to complete the academic requirements of your course/s in order to graduate with your qualification?</p> <p>Year: <input type="checkbox"/><input type="checkbox"/><input type="checkbox"/><input type="checkbox"/></p> <hr/> <p><i>Are you currently studying with another tertiary Institution? Yes <input type="checkbox"/> No <input type="checkbox"/></i></p> <p><i>Do you hold other qualifications? Yes <input type="checkbox"/> No <input type="checkbox"/></i></p> <p><i>If yes please state qualifications:.....</i></p> <p>.....</p>
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**D IRD NUMBER COLLECTION FOR STUDENT LOAN INTEREST WRITE-OFF**

<b>18</b>	<p>Do you currently have or will you have a Student Loan this year?</p> <p><input type="checkbox"/> - <b>No</b> – please go to the next section</p> <p><input type="checkbox"/> - <b>Yes</b> – please insert your <b>IRD number</b> (see notes for more information on interest write-off)</p> <p><input type="checkbox"/><input type="checkbox"/><input type="checkbox"/>-<input type="checkbox"/><input type="checkbox"/><input type="checkbox"/>-<input type="checkbox"/><input type="checkbox"/><input type="checkbox"/></p> <p><b>Interest Free Student Loans and other Interest Write-offs</b></p> <p>On 1 April 2006, legislation was introduced to make student loans interest free for borrowers living in New Zealand.</p> <p>Completing your IRD number is voluntary. This is requested so the Ministry of Education can share information with IRD regarding Student enrolments. If you choose to provide your IRD number on the enrolment form this will be included with your enrolment details and will be reported to the Ministry of Education.</p> <p>For more information on interest free student loans, visit <a href="http://www.ird.govt.nz/studentloans">www.ird.govt.nz/studentloans</a>.</p>
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**E DOCUMENTATION**

**For those students enrolling with EIDTS for the first time we require** evidence that you are a citizen of New Zealand (including students from the Cook Islands, Tokelau, or Niue who have New Zealand citizenship) or a permanent resident of New Zealand or a citizen or permanent resident of Australia residing in New Zealand.

**With this registration please include one of the following:**

- Birth certificate with place of birth stated as New Zealand, Cook Islands, Tokelau, or Niue.
- New Zealand passport.
- A statement of Whakapapa, including date of birth, countersigned by a kaumatua.
- Certificate of citizenship or letter of confirmation.
- Overseas passport with residency stamp.

You can send the original documentation to the Academic Registrar. This will be returned to you. Alternatively please provide a certified copy. This means a photocopy of your original document, signed as being a true and accurate copy by a Justice of the Peace (JP), Solicitor, Minister of the Church, General Practitioner or School Principal for example.

**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 Register. For further information please see: <http://www.nsi.govt.nz/ima>

<b>19</b>	Please list here all documents that you have attached to this enrolment form. (Documents should be securely stapled to the back of the form).	<input type="checkbox"/> Passport. <input type="checkbox"/> Birth/marriage certificate <input type="checkbox"/> or other valid evidence of residency (Either original document or certified copy thereof.)
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**F FEES ( \$360 per course)**

<b>20</b>	<p><b>Please include payment herewith or indicate how your fees will be paid.</b></p> <p><input type="checkbox"/> Online banking to the EIDTS Account <b>06 0829 0089430 00</b></p> <p><input type="checkbox"/> Cheque attached.</p> <p><input type="checkbox"/> via Studylink.</p> <p><input type="checkbox"/> I have made alternative arrangements with the Academic Registrar.</p> <p><input type="checkbox"/> Please invoice: .....</p>
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<b>21</b>		<i>Home Address:</i> <i>Street Address:</i>  <i>Suburb:</i>  <i>Town/City:</i>  <i>Post Code:</i>	<i>Postal Address: (if different from home address)</i> <i>Street Address:</i>  <i>Suburb:</i>  <i>Town/City:</i>  <i>Post Code:</i>
		<i>Phone:</i>	<i>Mobile:</i>
		<i>Fax:</i>	<i>Email:</i>

21	Address While Studying:	<i>Address while Studying (if different from home address):</i>	
		<i>Street Address:</i>	
		<i>Suburb:</i>	
		<i>Town/City:</i>	
		<i>Post Code:</i>	
		<i>Phone:</i>	<i>Mobile:</i>
		<i>Fax:</i>	<i>Email:</i>
	Next of Kin:	<i>Name:</i>	<i>Phone:</i>

## DECLARATION

**Privacy** – EIDTS collects and stores information from this form to comply with the requirements of the Ministry of Education (student statistical returns), New Zealand Qualifications Authority (Record of Learning registration and Unit Standard outcomes), Tertiary Education Commission (funding returns), Industry Training Organisations (funding and academic outcomes), Ministry of Social Development (confirmation of enrolment and academic outcomes), Inland Revenue Department (student loan interest rebate), Department of Immigration (if you are not a New Zealand citizen or permanent resident) and Agencies who support particular students through scholarships and prizes, payment of fees or other awards (if you are a recipient of one of these awards). The information is also used to select students for qualifications, to manage internal administrative processes, and for internal reporting. Information about students may be supplied to, and sought from, other educational organisations for the purpose of verifying academic records.

In addition, when required by statute, EIDTS releases information to Government agencies such as the New Zealand Police, Department of Justice, Ministry of Social Development, and the Accident Compensation Corporation (ACC).

In signing this enrolment form you authorise such disclosure on the understanding that EIDTS will observe the general conditions governing the release of information, as set out in the Privacy Act 1993 and the Post-compulsory Unique Identifier Code of Practice. You may see any information held about you and amend any errors in that information. To do so, contact the Academic Registrar.

NB: The Privacy Act came into force on 1 July 1993 with the stated aim of protecting the privacy of natural persons. It requires EIDTS to collect, hold, handle, use and disclose personal information in accordance with the twelve information privacy principles in the Act. <http://www.privacy.org.nz/privacy-act>

**Health and Safety** – Students studying from their own homes, or sites of their own choice, will be responsible to see that those premises comply with all requirements under health and safety regulations.

**Fees** – In signing this enrolment form you undertake to pay all fees at the time of registration unless otherwise arranged with the EIDTS Academic Registrar. (Fees for 2010 are \$360 per course).

**Withdrawal from Course/s** - The Institute's policy on withdrawal is set out in the Handbook.

**Library Facilities** – I agree to my name and address being made available to the libraries listed in the EIDTS Handbook. Yes  No

**Regulations** – I agree to abide by the regulations as set out in the EIDTS 2009 Handbook.

➤ **Please make sure that you sign the declaration over the page** ◀

**Declaration** – I declare that to the best of my knowledge all the information supplied on, and with, this enrolment form is true and complete, I agree to abide by the conditions described above, and I consent to the disclosure of personal information as described above.

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
*Signature* *Date*

<b>Office Use Only</b>		
<b>Enrolment received</b> _____ _____/_____/_____	<b>Payment received</b> _____ _____/_____/_____	<b>Documentation approved</b> _____ _____/_____/_____

<b>Office Use Only</b>		
<b>Class entered</b> _____ _____/_____/_____	<b>Late enrolment start and end date</b> _____ _____/_____/_____/_____/_____	<b>Withdrew</b> _____ _____/_____/_____

<b>Office Use Only</b>		
_____ _____/_____/_____	_____ _____/_____/_____/_____/_____	_____ _____/_____/_____