

DOMESTIC STUDENTS Application for Enrolment Form

Hamilton, Christchurch, Auckland and Online Enrolments:



Post to: Vision Enrolments Office 21 Ruakura Road, Hamilton 3216	Enquiries: 0800 834 834 Administration: 07 853 0777 Email: hamilton@visioncollege.ac.nz
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- Please complete the sections of this form that are relevant, and sign where indicated.
- Please attach all additional documentation required as per the documentation section.
- Note: International students should use the International Student enrolment form, which is available on the website.

As a provider of educational services, the information you provide in this enrolment form will be used for purposes including considering and assessing your application to study with us. Our Privacy Statement (back page) sets out in more detail our functions as an education services provider, the purposes for the collection of your personal information, what we use it for, who we may share it with and your rights in relation to those activities.

QUALIFICATION

1. What qualification do you wish to enrol in?
Qualification start date: Qualification end date:
2. Have you studied at Vision College before? Yes No If yes, what was your Student ID number?
3. Do you intend to study? Full time Part time
4. Where do you intend to study? Campus: Hamilton Papakura Christchurch Online
5. If there are options for your programme, what option are you choosing?

If the qualification you have chosen does not have options, or if you are unsure, leave this field blank.

PERSONAL DETAILS

6. Full legal name: Family Name: Title: Mr Miss Mrs Ms, Other (specify):
First Name(s):
7. Preferred name (if different to above):
Previous name(s) known by:
8. If you have previously enrolled under another name, what was that name?
9. Date of birth: / /
10. Gender: Male Female Another Gender
11. Do you know your NSN (National Student Number)? No Yes If yes, please write it here:
12. Citizenship: New Zealand Citizen New Zealand Permanent Resident Australian Citizen Australian Permanent Resident Other (please specify)
Note: For students with dual citizenship, specify the country of citizenship of the passport used to enter New Zealand
13. During your study, where will you be residing? New Zealand Overseas
14. Do you have a driver licence? No Yes If yes, please state the type: Learner Restricted Full
15. What ethnic group(s) do you belong to? You may tick up to three boxes which may apply to you.

<input type="checkbox"/> NZ European/Pakeha	<input type="checkbox"/> British/Irish	<input type="checkbox"/> Other European	<input type="checkbox"/> Japanese
<input type="checkbox"/> New Zealand Māori	<input type="checkbox"/> Dutch	<input type="checkbox"/> Filipino	<input type="checkbox"/> Korean
<input type="checkbox"/> Samoan	<input type="checkbox"/> Greek	<input type="checkbox"/> Cambodian	<input type="checkbox"/> Other Asian
<input type="checkbox"/> Cook Island Māori	<input type="checkbox"/> Polish	<input type="checkbox"/> Vietnamese	<input type="checkbox"/> Middle Eastern
<input type="checkbox"/> Tongan	<input type="checkbox"/> South Slav	<input type="checkbox"/> Other Southeast Asian	<input type="checkbox"/> Latin American
<input type="checkbox"/> Niuean	<input type="checkbox"/> Italian	<input type="checkbox"/> Chinese	<input type="checkbox"/> African
<input type="checkbox"/> Tokelauen	<input type="checkbox"/> German	<input type="checkbox"/> Indian	<input type="checkbox"/> Other
<input type="checkbox"/> Fijian	<input type="checkbox"/> Australian	<input type="checkbox"/> Sri Lankan	<input type="checkbox"/> Not Stated
<input type="checkbox"/> Other Pacific Peoples			

If Other European / Other Asian / Other Southeast Asian / Other Pacific Peoples or Other, please specify:

If you are identified as New Zealand Māori, what is the name of the Iwi you have the strongest affiliation to?

You may enter up to three.

Iwi <input type="text"/>	Iwi <input type="text"/>	Iwi <input type="text"/>
Rowe (Iwi home area)	Rowe (Iwi home area)	Rowe (Iwi home area)

16. How did you hear about this programme?

HEALTH AND DISABILITY INFORMATION

23. Is there anything that is likely to affect your study, ability to participate fully, or that we should be aware of including any of the following?
- Chronic Fatigue
 - Mental health condition (anxiety, personal disorder, etc)
 - Diabetes
 - Repetitive Strain Injury (OOS)
 - Specific learning disability (dyslexia, dysgraphia, etc)
 - Autistic spectrum disorder
 - Other (*please specify*)
 - No, I do not have any of the above that will affect my study.
24. Do you have a medical action plan for any medical condition that is likely to affect your study, ability to participate fully, or that we should be aware of? Yes No If yes, please attach a copy to this form.
25. Do you take any medicine or drugs that are likely to affect your study, or ability to participate fully, or that we should be aware of? Yes No
26. Do you live with the effects of a disability? Yes No. If yes, please indicate which of the following apply to you:
- Physical disability or impairment
 - Psychiatric illness
 - Vision impairment
 - Hearing impairment
 - Intellectual or psychological disability or impairment
 - Any other loss or abnormality of psychological, physiological, or anatomical structure or function
 - Reliance on a disability assist dog, wheelchair, or other remedial means
 - Other (*please specify*)

In an emergency would you require help to leave the building? Yes No

Depending on your answer to this question, we may contact you for further information.

WORK AND RELEVANT EXPERIENCE

Please indicate any relevant employment or voluntary experience that may support your application.

Employer		Employer	
Start Date		Start Date	
End Date		End Date	
Job Title		Job Title	

Note: Attach your CV if you have important achievements that are not covered above. Work experience is not required for certain programmes.

DOCUMENTATION

To be treated as a **domestic student**, and so be entitled to the Government tuition subsidy, you must be

- 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 **or**
- a citizen of New Zealand (including students from the Cook Islands, Tokelau, or Niue who have New Zealand citizenship)

If you are studying overseas full-time and face-to-face at a campus or delivery site of a New Zealand tertiary education organisation (TEO), you may also qualify as a domestic student if:

- you are a permanent resident of New Zealand or a citizen or permanent resident of Australia **and**
- you are studying in an approved country **and**
- the overseas study is level 7 or above on the New Zealand Qualification Framework.

The 29 approved countries are in the Asia, Latin America and Middle East regions. A full list is available on the [Education New Zealand website](#).

You must provide evidence of citizenship or permanent residency. To do so you must produce one of the following:

- Birth certificate with place of birth stated as New Zealand, Cook Islands, Tokelau, or Niue
- New Zealand passport
- A certificate of identity

- A statement of Whakapapa, including date of birth, countersigned by a kaumatua
- A New Zealand certificate of citizenship
- Overseas passport with residency stamp

You can bring the original documentation to the enrolment desk, alternatively please provide a certified copy. This means a photocopy, photograph or scanned copy of your original document, signed as being a true and accurate copy by a Justice of the Peace (JP), Barrister or Solicitor, Notary Public, Court Register or Deputy Registrar, Member of Parliament, Land Transport New Zealand, Public trust, or local authority employee designated for this purpose.

When a learner is in a remote community and unable to access a person listed in the Oaths and Declarations Act, a member of the New Zealand Police, school principal, minister of religion, or general practitioner is acceptable.

Please note that your name, date of birth and residency as entered on this form will be included in the National Student Index, and will be used in an Authorised Information Matching programme with the New Zealand Birth Register.

On occasion, more than one National Student Number is created for an individual. The Ministry regularly monitors the quality of the National Student Index and, when duplicates or errors are discovered, it works with providers and government agencies to merge duplicates and correct errors. This may require the documentation you provide at enrolment being shared between agencies authorised to access the National Student Index to make these corrections.

For further information please see: <http://nsi.education.govt.nz/home.aspx>

PRIVACY STATEMENT

1. This Privacy Statement describes how we collect, store, use and share your personal information and explains your rights in relation to those activities. "we" "us" "our" means Vision College Limited.

2. We collect your information to carry out our operations, functions and activities as a provider of education. The purposes for which information is collected (under the **Privacy Act 2020**) include:

- (a) our learning, teaching, research and other educational activities;
- (b) our administrative, enrolment, employment and management activities;
- (c) complying with our legal, regulatory and contractual obligations;
- (d) providing a safe, secure and healthy environment;
- (e) providing an appropriate level of student support and pastoral care;
- (f) recruitment and marketing activities that we undertake;
- (g) assessing whether we can reasonably make available our services or facilities to a person who has a disability for the purposes of the **Human Rights Act 1993**;
- (h) managing our business including internal reporting, administrative processes and selection of scholarship and prize winners.

3. Personal information we collect for our purposes includes:

- (a) biographical details;
- (b) contact details;
- (c) education records and academic history;
- (d) health information (which could include a medical action plan);
- (e) disability information;
- (f) criminal convictions;
- (g) ethnicity;
- (h) images (still/moving);
- (i) any other information you may provide to us or we may request from you in relation to our purposes.

4. To carry out our purposes, some of the ways we will use your information include:

- (a) to assess your application to study with us;
- (b) if you have a disability (and have provided us with all information we have requested), to undertake an assessment to determine whether we are able to reasonably make available special services or facilities to:
 - enable you to participate in our educational programme, or;
 - enable you to derive substantial benefits from the programme;
- (c) to communicate with you including providing monthly mailouts;
- (d) to make our staff aware if you have a medical action plan;
- (e) to carry out NZ Police vetting checks.

5. We may be required to, or we may have a need to, share certain of your personal information with third parties including:

(a) government agencies (which in handling data provided by you on this form or more generally, are required to comply with the provisions of the Privacy Act 2020) such as:

- Ministry of Education
- Education New Zealand
- New Zealand Qualifications Authority
- Tertiary Education Commission

- Ministry of Social Development (in relation to student loans and allowances) and Inland Revenue (student loans)
- Immigration New Zealand (for those who are not New Zealand citizens or permanent residents)
- Ministry of Business, Innovation and Employment, These agencies use the information we share with them to:
 - (i) administer the tertiary education system, including allocating funding and the administration of the Fees-Free and Fees-Free Trades Training initiatives;
 - (ii) develop policy advice for government;
 - (iii) conduct statistical analysis and research,

(b) your personal details (name, date of birth and residency) as entered on this form will be included in the National Student Index and may be used in an authorised information matching programme with the New Zealand Birth Register.

The government agencies above may supply data collected on this form to Statistics New Zealand for the purposes of integrating data with data collected by other government agencies, subject to the provisions of the Statistics Act 1975. Integrated data is used for the production of official statistics, to inform policy advice to government and for research purposes;

- (c) when required by law, we will disclose information to government agencies such as the New Zealand Police, Department of Justice, Ministry of Social Development, and the Accident Compensation Corporation (ACC);
- (d) agencies which support particular students through scholarships, payment of fees or other awards (if you are a recipient of one of these awards);
- (e) service providers contracted to or engaged by us;
- (f) sharing your information with other educational organisations for the purpose of verifying your academic records;
- (g) employers and internship providers, or work placement providers (only where you apply to take part in or undertake a work placement as part of your programme of study);
- (h) our insurers, professional advisers and auditors.

6. We take all reasonable steps to keep your information safe and secure.

7. We retain your personal information for as long as is necessary to fulfil our purposes and comply with our legal obligations.

8. You are entitled to ask for access to a copy of your personal information that we hold about you and to ask for it to be corrected if you think it is wrong. To do so, please contact our National Administrator at +64 (0)7 8530777

9. You have the right to make a complaint to the Office of the Privacy Commissioner if you think we have breached your privacy. You can contact the Office of the Privacy Commissioner at www.privacy.org.nz.

10. **Where there is any conflict with any of Vision College's other privacy statements, then this privacy statement shall prevail.**

NZ Police Vetting/Ministry of Justice check:

You agree and understand that we may arrange for police checks to be undertaken by us upon completion of the relevant consent forms (ECE and Counselling programmes only). We will hold the result of the police check for your enrolment, and we may send it to a workplace placement provider at their written request.

Note: Vision College Ltd will contact you for further information, if required.

ACKNOWLEDGEMENT:

You agree and acknowledge that:

- a) you have provided all information as required in this form or as subsequently requested by us and that the information is true and correct;
- b) you will provide any further information we may ask for which is reasonably required by us for our enrolment process;
- c) the information you have provided in this form (including any additional information provided by you or collected by us) will be collected, used, stored, and shared by us for our purposes as set out in the Privacy Statement; and
- d) you are 18 years of age or over, or if you are not, that your parent or guardian is authorised by you to sign this form.

Signature	
Date	
Signature of your parent or guardian (if you are under 18 years of age)	
Name of your parent or guardian (if you are under 18 years of age)	