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| **2023 APPLICATION FOR ADMISSION – INTERNATIONAL STUDENTS**   |  |  | | --- | --- | | Return to: The Registrar  PO Box 12747 Penrose  Auckland 1642  New Zealand | Phone: +64 9 580 1500  Fax: +64 9 579 5150 Email: info@acnz.ac.nz  Web: [www.acnz.ac.nz](http://www.acnz.ac.nz)  Physical address: 60 Rockfield Road, Penrose, Auckland 1061, New Zealand | | **Welcome to Alphacrucis!  Please read the instructions below carefully before you complete this application form.** | | | | | | | | | | | | | | | | | | | | | | | |
| **INSTRUCTIONS** | | | | | | | | | | | | | | | | | | | | | |
| The purpose of this enrolment form is to obtain from you the information we need to enrol you into a qualification or course at our organisation. We also need to collect information from you which is required by 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. (amend as necessary for digital enrolment process) * Signing the form. * Attaching to the form additional documentation that is required for government funding purposes. A description of the required documentation is provided on page 6 of the form. | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | |
| **A QUALIFICATION** | | | | | | | | | | | | | | | | | | | | | |
| **1** | What qualification do you intend to enrol in (please tick one)? | | | | | | | | | | | |  | | | | | | | *Office Use* | |
|  | *Diploma in Theological Studies (Level 5)*  *Bachelor of Contemporary Ministry (Level 7)* | | | | | | | | | | | |  | | | | | | |  | |
|  | **What semester do you wish to begin your study?**  *Semester 1 2023*  *Semester 2 2023* | | | | | | | | | | | |  | | | | | | |  | |
| **2** | Have you studied at this college before? | | | | | | | | | | | | *Yes  No* | | | | | | | | |
| **3** | Do you intend to study:  *Part time*  *Full time*  *On Campus  Distance* | | | | | | | | | | | | **Do you have basic computer skills and access to a computer?**  **Can you devote the recommended hours below towards each subject/paper per week?**  15 credits paper (8 - 10 hours p/w)  30 credits paper (18 – 20 hours p/w) | | | | | | | | |
| **4** | How did you hear about the College? | | | | | | | | | | | | AC Website AC Student  AC Staff Church  Word of mouth Direct Mail  Conference Advertising  Email Radio  Newspaper Magazine  Other | | | | | | | | |
| **B PERSONAL DETAILS (all fields compulsory)** | | | | | | | | | | | | | | | | | | | | | |
| **5** | | **Print your full legal name:**  *Family Name:* | | | | | | | |  | | | | | | | | | | | |
|  | | *Given Name(s):* | | | | | | | |  | | | | | | | | | | | |
| **6** | | Preferred first name: | | | | | | | |  | | | | | | | | | | | |
|  | | Previous name(s) known by: | | | | | | | |  | | | | | | | | | | | |
| **7** | | If you have previously enrolled at this organisation under another name, what was that name? | | | | | | | |  | | | | | | | | | | | |
| **8** | | Preferred title: | *Ms* | | |  | | *Miss* |  | *Mrs* |  | *Mr* | |  | | *Other (Specify):* |  | | | | |
| **9** | | **Date of birth:** | *day month year* | | | | | | | | **10** | Gender | | | | *Male*  *Female*  *Another Gender* | | | | | |
| **10** | | If you know your NSN (National Student Number), please write it here. | | | | | | | | | | | *--* | | | | | | | | |
| **11** | | **Citizenship and Residency:**  You may need to supply evidence of residence or citizenship | | | | | Tick the box which best describes your citizenship:  *New Zealand Citizen*  NZL , go to 12a  *Australian Citizen*  AUS, go to 12a  *Other*  If “*Other*”,  Please specify your Country of Citizenship (For students with dual citizenship, specify the country of citizenship of the passport used to enter New Zealand.):  Country of Citizenship: **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  Tick the box if you have New Zealand or Australian Permanent Resident Status:  New Zealand Resident Visa Holder  Australian Permanent Resident | | | | | | | | | | | | | | |
| **12a** | |  | | | | | During your time studying in this qualification will you be resident in New Zealand or overseas?  *In New Zealand  Overseas* | | | | | | | | | | | | | | |
| **12b** | |  | | | | | Please also specify your fee/assistance status.   * *Domestic Student\**  00 * *NZAID Student*  01 * *International Fee-Paying Student*   *(including people on current work visa)*  03   * *Student on a recognised exchange scheme*  04 * *Foreign Research Based Post-Graduate\*\**  06 * *Diplomatic staff or family, or persons*  08   *associated with Antarctic Programme*   * *International On-Shore PhD student*  09 * *International student doing ITO off-job training*  12 * *Refugee or protected person, yet to be granted a resident visa;*  13   *the immediate family [[[1]](#footnote-1)], also without a resident visa, of a person with refugee or protected person status; and those who have made a claim to be recognised as a refugee or protected person*   * *2021 Resident Visa pathway, children aged 25 years or under*  14   *on 1 January 2022 and residing in New Zealand, of a person on an eligible work visa for the 2021 Resident Visa [[[2]](#footnote-2)]*  ***Note****: \* Always use 00 for New Zealand Citizen; use 00 for New Zealand resident visa holder and Australian Citizen or Australian Permanent Resident residing in New Zealand during the time studying this qualification.*  *\*\* Use 06 for a student enrolled in a programme of study that is:*   * *A PhD (level 10 on the NZQF); and* * *Wholly research (for example, 120-point thesis)*   *Use 03 for an international student enrolled in a programme of study that is a Masters (Level 9 on the NZQF) or a Doctoral Programme, excluding PhDs (Level 10 on the NZQF).* | | | | | | | | | | | | | | |
| **13** | | **Ethnicity:**  What ethnic group(s) do you belong to?  You may tick up to three boxes, which apply to you. | | | | | *New Zealand European* *111 Filipino**411*  *Māori**211 Cambodian* *412*  *Samoan* *311 Vietnamese* *413*  *Cook Islands Maori* *321 Other Southeast Asian* *414*  *Tongan* *331 Chinese* *421*  *Niuean* *341 Indian* *431*  *Tokelauan* *351 Sri Lankan* *441*  *Fijian**361 Japanese**442*  *Other Pacific Peoples*  *371 Korean**443*  *British and Irish* *121 Other Asian**444*  *Dutch**122 Middle Eastern* *511*  *Greek**123 Latin American* *521*  *Polish* *124 African* *531*  *South Slav* *125 Other Ethnicity* *611*  *Italian* *126 Not Stated* *999*  *German* *127*  *Australian* *128*  *Other European*  *129*  If *“Other Pacific Peoples”, “Other European”, “Other Southeast Asian”, "Other Asian"* or *"Other” please specify what specific ethnicity below.* | | | | | | | | | | | | | | |
| **14** | | **Iwi:**  If you identified as Māori in question 13, what is the name of your Iwi?  You may enter more than one Iwi. If you do not know your Iwi, please enter 'Don't Know'.  Note: please use the iwi codes published in SDR Manual appendices. | | | | | | | | *Iwi:*  *Rohe (Iwi home area):*  *Iwi:*  *Rohe (Iwi home area):*  *Iwi:*  *Rohe (Iwi home area):* | | | | | | | | | | | |
| **15** | | **Prior activity:** | | | What was your MAIN activity or occupation in New Zealand on 1 October 2022 – that is before you began your study. You may tick only one box.  Secondary school student 01 Non-employed or beneficiary (excluding retired)  02  Wage or salary worker 03 Self-employed 04  University student 05 Polytechnic student 06  House-person or retired08 Overseas (irrespective of occupation) 09  Private Training Establishment student11 Wānanga student12 | | | | | | | | | | | | | | | | |
| **16** | | **Disability:**  Do you live with the effects of significant injury, long term illness, or disability?  The information you supply may be used to offer individual disability support. | | | | | | | | | | | | | *Yes* | | | *No* | | | |
| **C ACADEMIC INFORMATION** | | | | | | | | | | | | | | | | | | | | | |
| **17** | | **Secondary School:** | | What was the name of the last secondary school you attended? State “overseas”, if applicable. | | | | | | | | | | | | | | | *Office Use* | | |
|  | |  | | What was your last year at secondary school? | | | | | | | | | | | | | | | | | |
|  | |  | | What is the highest level of achievement you hold from a secondary school? Your highest achievement may be a “traditional” award such as School Certificate, or you may have achieved a number of credits or a National Certificate at a certain level on the National Qualifications Framework. Your NZQA Record of Achievement shows you the standards, credits and qualifications you have achieved. Tick only one box. | | | | | | | | | | | | | | | | | |
|  | |  | | *No formal secondary qualifications* | | | | | | | | | | | | | | | | | *00* |
|  | |  | | *14 or more credits at any level* | | | | | | | | | | | | | | | | | *11* |
|  | |  | | *NCEA Level 1* ***or*** *School Certificate* | | | | | | | | | | | | | | | | | *12* |
|  | |  | | *NCEA Level 2* ***or*** *6th Form Certificate* | | | | | | | | | | | | | | | | | *13* |
|  | |  | | *University Entrance* | | | | | | | | | | | | | | | | | *14* |
|  | |  | | *NCEA Level 3* ***or*** *Bursary* ***or*** *Scholarship* | | | | | | | | | | | | | | | | | *15* |
|  | |  | | *Overseas qualification (includes International Baccalaureate & Cambridge Exams)* | | | | | | | | | | | | | | | | | *09* |
|  | |  | | *Other* | | | | | | | | | | | | | | | | | *98* |
|  | |  | | *Not Known* | | | | | | | | | | | | | | | | | *99* |
|  | |  | | Please specify if “*Overseas qualification*” or “*Other*”. | | | | | | | | | | | | | | | | | |
|  | |  | |  | | | | | | | | | | | | | | | | | |
| **18** | | **Tertiary Study:** | | Will this be the first time you have ever enrolled in a University, Subsidiaries of Te Pūkenga (*Institutes of Technology or* *Polytechnic*), College of Education, Industry Training Organisation, Government Training Establishment, Private Training Establishment or Wānanga either in New Zealand or overseas **since** leaving school? Do not include enrolments in community classes.  *No*  *Yes*  If you answered “*No*”, please enter the name of the organisation you studied at and the year of your first enrolment:  Name:  Year: | | | | | | | | | | | | | | | | | |
|  | |  | | What year do you expect to complete the academic requirements of your course/s in order to graduate with your qualification?  Year: | | | | | | | | | | | | | | | | | |
| **19** | | **Prior Achievement:** | | Please list all of the tertiary qualifications you hold, the month and year you completed each and the tertiary education organisation that it was completed at. Alternatively attach your academic transcript from the tertiary education organisation and/or a copy of your NZQA record of achievement.   |  |  |  | | --- | --- | --- | | Tertiary education organisation | Qualification | Month and year of completion | |  |  |  | |  |  |  | |  |  |  | |  |  |  | |  |  |  | |  |  |  | |  |  |  | | | | | | | | | | | | | | | | | | |

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| **D 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](https://enz.govt.nz/assets/Uploads/Approved-countries-list3.pdf).  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.  **International** students must bring their passport with them when they enrol.  **Please note that your name, date of birth and residency as entered on this enrolment form will be included in the National Student Index, and will be used in an Authorised Information Matching programmes with official governement information such as the New Zealand Birth Register, to verify the information provided.**  **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:** [National Student Number (NSN): for schools – Education in New Zealand](https://www.education.govt.nz/school/managing-and-supporting-students/national-student-number-nsn-for-schools/) | | | |
| **20** | | | Please list here all documents that you have attached to this enrolment form. Documents should be securely stapled to the back of the form. | |  | |
| **E CONTACT DETAILS** | | | | | |
| **21** | Home Address and contact details: | | *Home Address:*  *Street Address:*  *Suburb:*  *Town/City:*  *Post Code:* | | *Postal Address: (if different from home address)*  *Street Address:*  *Suburb:*  *Town/City:*  *Post Code:* |
| *Phone:* ( ) | | *Mobile:* |
|  | | |
| *Email:* | | |
| **22** | Address While Studying: | | *Address while Studying (if different from home address):*  *Street Address:*  *Suburb:*  *Town/City:*  *Post Code:* | | |
|  | *Phone: ( )* | | *Mobile:* |
|  | | *Email:* |
| Next of Kin: | | *Name:* | | *Phone: ( )* |

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| --- | --- | --- |
| **Consent to use Photos and Videos:**  Do you give consent to Alphacrucis College New Zealand (ACNZ) for the use of photographs, audio/visual recordings and written/oral testimonials of yourself for the purpose of producing promotional/advertising materials and development of the website for the College?  Yes  (Please enter your name and signature below)  No  *(Go to declaration section)*   * I understand that these materials may be published on the internet and/or other media and be distributed to the public. * I understand that ACNZ owns all copyrights to these materials, and I release ACNZ and its employees from any and all claims of any nature whatsoever which now or in the future have in connection with these materials, including but not limited to claims based on defamation, copyright infringement, trademark infringement or infringement on my right of privacy or my right to publicity. * I understand that I will not be entitled to any reimbursement (monetary or otherwise) for the creation of these materials. * I understand that I have the right to request erasure of any part of a recording at the time of its creation or within 3 days thereafter. * I understand that a copy of any recording will be made available to me for viewing on request.   Name of student:  Signature:  Date: | | |
| **USE OF INFORMATION AND PRIVACY STATEMENT**  **Privacy** – Alphacrucis College New Zealand (ACNZ) collects and stores information from this form to:   * manage the business of ACNZ (including internal reporting, administrative processes and selection of scholarship and prize winners) * comply with the requirements of the [Education and Training Act 2020](http://www.legislation.govt.nz/act/public/2020/0038/latest/LMS170676.html?search=qs_act%40bill%40regulation%40deemedreg_Education+and+Training+Act+2020_resel_25_h&p=1&sr=1) and other legislation[[[3]](#footnote-3)] relating to maintenance of records * supply information to government agencies and other organisations as set out below.   In signing this enrolment form you authorise the disclosure of your personal information on the understanding that ACNZ will comply with the legal requirements in relation to the use and disclosure of personal information, as set out in the Privacy Act 2020, the Education and Training Act 2020 and other relevant legislation. You are entitled to see any information that ACNZ holds about you and request to correct any errors in that information. To do so, contact the Registrar.  NB: The Privacy Act 2020 has the stated aim of protecting the privacy of individuals. It also governs the collection, use, storage, and disclosure of personal information.  The Privacy Act requires ACNZ to collect, hold, handle, use and disclose personal information in accordance with the twelve information privacy principles in the Act.  <https://www.legislation.govt.nz/act/public/2020/0031/latest/LMS23223.html>  *Supply of information to government agencies and other organisations*  ACNZ supplies data collected on this form to government agencies, including:   * the Ministry of Education * Education New Zealand * the New Zealand Qualifications Authority * the Tertiary Education Commission * the 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) and the Ministry of Business, Innovation and Employment * agencies which support particular students through scholarships, payment of fees or other awards (if you are a recipient of one of these awards).   Those agencies use the data collected from ACNZ to:   * administer the tertiary education system, including allocating funding and the administration of the Fees-Free and Fees-Free Trades Training initiatives * develop policy advice for government * conduct statistical analysis and research.   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.  In handling data supplied by you on this form, the government agencies are required to comply with the provisions of the Privacy Act 2020.  When required by law, ACNZ releases information to government agencies such as the New Zealand Police, Department of Justice, Ministry of Social Development, and the Accident Compensation Corporation (ACC).  Information collected on this form may be supplied to other educational organisations for the purpose of verifying academic records.  **Fees** – In signing this enrolment form you undertake to pay all fees as they become due, and to meet any late fees and collection charges associated with debt recovery. ACNZ’s policy on withdrawal and refund of fees may be obtained from the Registrar.  **Rules** – In signing this enrolment form you undertake to comply with the published rules and policies of ACNZ regarding attendance, academic integrity and progress, conduct and use of information systems. | | |
| **DECLARATION** | | |
| In signing this Declaration:  1. I undertake to pay all fees as they become due, and to meet any late fees and collection charges associated with debt recovery. ACNZ’s policy on withdrawal and refund of fees may be obtained from the Enrolments Officer. ACNZ has appointed the Public Trust as Trustee of our student fee protection arrangement. This arrangement has been accepted by the New Zealand Qualifications Authority as meeting the requirement of the Education Act 1989 and the Student Fee Protection Rules 2013.)  2. I undertake to comply with the rules, regulations, and policies of ACNZ, in particular with regard to attendance, academic integrity and progress, copyright, standard of dress, health and safety, behaviour and conduct and use of information systems.  **Declaration of Conflict of Interest** - In accordance with NZQA rules, ACNZ requires all directors, Council members and senior staff to make a declaration regarding any conflict of interest they may have due to involvement with other organisations. The declaration is fully detailed on the website a [www.acnz.ac.nz/conflict](http://www.acnz.ac.nz/conflict) of interest. In signing this enrolment form I acknowledge that this information is available to me. | | |
| **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*  If you are under 18 years of age a parent/guardian must complete and sign the section below to acknowledge acceptance of this declaration  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_/\_\_\_\_\_\_\_\_\_\_/\_\_\_\_\_\_\_\_\_\_\_  Parent/Guardian Signature Date  Print Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Address\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Phone\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Mobile\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Email\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | |
| **⮚ *Please make sure that you sign your enrolment form above* ⮘** | | |
| ***Office Use Only*** | | |
| ***Documentation***  *\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*  *\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_* | ***Approved***  *\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*  *\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_* | ***Entered***  *\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*  *\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_* |

1. [↑](#footnote-ref-1)
2. [↑](#footnote-ref-2)
3. This includes legislation governing the maintenance of official records and for accountability for public funding. [↑](#footnote-ref-3)