

Tipu Ora PTE Enrolment Form 2019

1272 Fenton Street
P.O Box 807
ROTORUA

Phone (07) 3482400

Email admin.pte@tipuora.org.nz

**Welcome to Tipu Ora PTE. Please read the instructions below carefully before you complete this enrolment form.
Once complete please either email or post to one of the above addresses.**

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 administrative 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 question
- Signing the form
- **Attaching formal Identification to this enrolment form is a requirement : NZ Birth certificate or Passport**

1	Please tick the qualification you wish to enrol in for 2019:	<input type="checkbox"/> NZ Certificate in Whānau Ora	<i>Office Use Only</i> (Please date) BC/PP sighted:			
		<input type="checkbox"/> NZ Diploma in Whānau Ora (must have done Certificate or equivalent as pre-requisite)				
	Location you wish to attend wānanga:		<i>Enrolment from signed:</i>			
	Organisation you work for:		<i>Enrolled:</i>			
2	Have you studied with Tipu Ora before?	Yes <input type="checkbox"/>	No <input type="checkbox"/>			
3	Legal Surname: (please attach NZ Birth Certificate or Passport to support)					
	Legal Given Name(s):					
4	Preferred name: (If different from above)					
	Previous name(s) known by:					
5	If you have previously enrolled with us under another name, what was that name?					
6	Preferred title:	Ms <input type="checkbox"/>	Miss <input type="checkbox"/>	Mrs <input type="checkbox"/>	Mr <input type="checkbox"/>	Other (Specify):

7	Date of birth: <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <i>Day month year</i>	8	Gender: <i>Male</i> <input type="checkbox"/> <i>Female</i> <input type="checkbox"/> <i>Diverse</i> <input type="checkbox"/>
8	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"/>
9	Home Address and contact details:	Street Address:	(if different from home address) Postal Address:
		Suburb:	Suburb:
		Town/City:	Town/City:
	Post Code:	Post Code:	
	Phone: ()	Mobile: ()	
	Email:		
10	Employment Status:	What is your current labour force status?:	
		<i>Full time employee</i> <input type="checkbox"/> <i>Part time employee</i> <input type="checkbox"/> 02 <i>Self Employed – not employing others</i> <input type="checkbox"/> <i>Employed (unpaid in family business)</i> <input type="checkbox"/> 04 <i>Employer</i> <input type="checkbox"/> <i>Unemployed seeking full time work</i> <input type="checkbox"/> 06 <i>Unemployed seeking part time work</i> <input type="checkbox"/> <i>Not employed, not seeking employment</i> <input type="checkbox"/> 09	
11	Funding Status	Please tick one of the following:	
		I will be applying for Health Workforce NZ (HWF) funding via my DHB <input type="checkbox"/>	
		I do not qualify for HWF funding and require TEC funding via Tipu Ora <input type="checkbox"/>	
12	Main Activity Prior to Study	<i>Secondary School Student</i> <input type="checkbox"/> <i>Non-employed of Beneficiary (excl retired)</i> <input type="checkbox"/> <i>Wage of Salary Worker</i> <input type="checkbox"/> <i>Self Employed</i> <input type="checkbox"/> <i>University Student</i> <input type="checkbox"/> <i>Polytechnic Student</i> <input type="checkbox"/> <i>College of Education Student</i> <input type="checkbox"/> <i>House person or Retired</i> <input type="checkbox"/> <i>Overseas</i> <input type="checkbox"/> <i>Private Training Establishment Student</i> <input type="checkbox"/> <i>Wānanga Student</i> <input type="checkbox"/>	

13	Prior Education	<p>Highest Tertiary Qualification achieved:</p> <p><i>Bachelor Degree of Higher Diploma</i> <input type="checkbox"/> <i>Advanced Diploma or Associate Degree</i> <input type="checkbox"/> <i>Miscellaneous Education / Other</i> <input type="checkbox"/> <i>Certificate</i> <input type="checkbox"/></p>
14	Secondary School:	<p>What was the name of the last secondary school you attended? State "overseas", if applicable.</p> <hr/> <p>What was your last year at secondary school? <input type="checkbox"/><input type="checkbox"/><input type="checkbox"/><input type="checkbox"/> (please put approximate year if you are not sure)</p> <p>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.</p> <p><i>No formal secondary qualification</i> <input type="checkbox"/> 00 <i>14 or more credits at any level</i> <input type="checkbox"/> 11 <i>NCEA Level 1 or School Certificate</i> <input type="checkbox"/> 12 <i>NCEA Level 2 or 6th Form Certificate</i> <input type="checkbox"/> 13 <i>University Entrance</i> <input type="checkbox"/> 14 <i>NCEA Level 3 or Bursary or Scholarship</i> <input type="checkbox"/> 15 <i>Overseas qualification (inclInternational Baccalaureate & Cambridge Exams)</i> <input type="checkbox"/> 09 <i>Other</i> <input type="checkbox"/> 98 <i>Not known</i> <input type="checkbox"/> 99</p> <p>Please specify if "Overseas qualification" or "Other".</p> <hr/>

15	Tertiary Study:	<p>Will this be the first time you have ever enrolled in a University, Institute of Technology Polytechnic, Institute of Technology 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.</p> <p>No <input type="checkbox"/> Yes <input type="checkbox"/></p> <p>If you answered “No”, please enter the name of the organisation you studied at and the year of your first enrolment:</p> <p>Organisation Name: <i>ie – Te Wananga o Aotearoa Rotorua Campus</i></p> <hr/> <p>Qualification Name: <i>ie – Certificate in Whānau Ora</i></p> <hr/> <p>Year training commenced: <input type="text"/><input type="text"/><input type="text"/><input type="text"/></p> <p>Year training completed: <input type="text"/><input type="text"/><input type="text"/><input type="text"/></p>
16	Residential / Citizenship Status	<p>Please specify your citizenship / residential status:</p> <p>Domestic Student* <input type="checkbox"/></p> <p>International Student <input type="checkbox"/></p> <p>Refugee or protected person holding valid temporary visa <input type="checkbox"/></p> <p>* Tick if you are a New Zealand Citizen or resident visa holder, Australian Citizen or Australian Permanent Resident residing in New Zealand during the time you are studying this qualification.</p> <p>To qualify as a domestic student, and so be entitled to the Government tuition subsidy, you must be:</p> <ul style="list-style-type: none"> • 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). <p>You must provide evidence of citizenship or permanent residency. To do so you must produce one of the following:</p> <ul style="list-style-type: none"> ▪ 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. <p>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.</p>

17	<p>Ethnicity: 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"/> 111</td> <td><i>Filipino</i></td> <td><input type="checkbox"/> 411</td> </tr> <tr> <td><i>New Zealand Māori</i></td> <td><input type="checkbox"/> 211</td> <td><i>Cambodian</i></td> <td><input type="checkbox"/> 412</td> </tr> <tr> <td><i>Samoan</i></td> <td><input type="checkbox"/> 311</td> <td><i>Vietnamese</i></td> <td><input type="checkbox"/> 413</td> </tr> <tr> <td><i>Cook Island Māori</i></td> <td><input type="checkbox"/> 321</td> <td><i>Other Southeast Asian</i></td> <td><input type="checkbox"/> 414</td> </tr> <tr> <td><i>Tongan</i></td> <td><input type="checkbox"/> 331</td> <td><i>Chinese</i></td> <td><input type="checkbox"/> 421</td> </tr> <tr> <td><i>Niue</i></td> <td><input type="checkbox"/> 341</td> <td><i>Indian</i></td> <td><input type="checkbox"/> 431</td> </tr> <tr> <td><i>Tokelauen</i></td> <td><input type="checkbox"/> 351</td> <td><i>Sri Lankan</i></td> <td><input type="checkbox"/> 441</td> </tr> <tr> <td><i>Fijian</i></td> <td><input type="checkbox"/> 361</td> <td><i>Japanese</i></td> <td><input type="checkbox"/> 442</td> </tr> <tr> <td><i>Other Pacific Peoples</i></td> <td><input type="checkbox"/> 371</td> <td><i>Korean</i></td> <td><input type="checkbox"/> 443</td> </tr> <tr> <td><i>British/Irish</i></td> <td><input type="checkbox"/> 121</td> <td><i>Other Asian</i></td> <td><input type="checkbox"/> 444</td> </tr> <tr> <td><i>Dutch</i></td> <td><input type="checkbox"/> 122</td> <td><i>Middle Eastern</i></td> <td><input type="checkbox"/> 511</td> </tr> <tr> <td><i>Greek</i></td> <td><input type="checkbox"/> 123</td> <td><i>Latin American</i></td> <td><input type="checkbox"/> 521</td> </tr> <tr> <td><i>Polish</i></td> <td><input type="checkbox"/> 124</td> <td><i>African</i></td> <td><input type="checkbox"/> 531</td> </tr> <tr> <td><i>South Slav</i></td> <td><input type="checkbox"/> 125</td> <td><i>Other</i></td> <td><input type="checkbox"/> 611</td> </tr> <tr> <td><i>Italian</i></td> <td><input type="checkbox"/> 126</td> <td><i>Not Stated</i></td> <td><input type="checkbox"/> 999</td> </tr> <tr> <td><i>German</i></td> <td><input type="checkbox"/> 127</td> <td></td> <td></td> </tr> <tr> <td><i>Australian</i></td> <td><input type="checkbox"/> 128</td> <td></td> <td></td> </tr> <tr> <td><i>Other European</i></td> <td><input type="checkbox"/> 129</td> <td></td> <td></td> </tr> </table> <p>If "Other Pacific Peoples", "Other European", "Other Southeast Asian", "Other Asian" or "Other" please specify what specific ethnicity below.</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>Tokelauen</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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18	<p>Iwi: If you identified as New Zealand Māori in question 13, 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>	<p><i>Hapu:</i></p> <p><i>Hapu:</i></p> <p><i>Hapu:</i></p>																																																																								
19	<p>Disability: Do you live with the effects of significant injury, long term illness, or disability? The information you supply is confidential. <i>If yes, how would you describe your impairment, disability or long term medical condition:</i></p>	Yes <input type="checkbox"/>	No <input type="checkbox"/>																																																																								
20	<p>Do you suffer from any allergies? <i>If yes, please describe:</i></p>	Yes <input type="checkbox"/>	No <input type="checkbox"/>																																																																								

21	<p>Have you ever / or do you currently suffer from any mental health issues that we should be aware of?</p> <p><i>If yes, please describe:</i></p>	Yes <input type="checkbox"/>	No <input type="checkbox"/>
22	<p>Criminal Convictions</p> <p><i>(This information is highly confidential and will not be disclosed to anyone outside of our organisation) If yes to either of the following, please provide brief details in an envelope marked "Confidential" and addressed to the "PTE Manager".</i></p> <p>Have you ever been convicted of an offence for which a jail term was imposed?</p> <p>Do you have any criminal charges pending or under investigation?</p>	Yes <input type="checkbox"/>	No <input type="checkbox"/>
23	Next of Kin / Emergency Contact	Name:	
		Relationship:	
		Phone: ()	
		Mobile: ()	

DECLARATION

Privacy – Tipu Ora Manaaki Ora Trust collects and stores information from this form to:

- manage the business of Tipu Ora Manaaki Ora Trust (including internal reporting, administrative processes and selection of scholarship and prize winners)
- comply with the requirements of the Education Act 1989 and other legislation¹ relating to maintenance of records
- supply information to government agencies and other organisations as set out below.

In signing this enrolment form you authorise such disclosure on the understanding that Tipu Ora Manaaki Ora Trust will observe the conditions governing the release of information, as set out in the Privacy Act 1993, the Education Act 1989 and other relevant legislation. You may see any information held about you and amend any errors in that information. To do so, contact the Enrolments Officer.

NB: The Privacy Act came into force on 1 July 1993 with the stated aim of protecting the privacy of natural persons. It requires Tipu Ora Manaaki Ora Trust 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>

Supply of information to government agencies and other organisations

Tipu Ora Manaaki Ora Trust supplies data collected on this form to government agencies, including:

- the Ministry of Education
- the 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 and the Ministry of Business, Innovation and Employment (for those who are not New Zealand citizens or permanent residents)
- 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 tertiary education organisations to:

- administer the tertiary education system, including allocating funding
- 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 1993.

When required by law, Tipu Ora Manaaki Ora Trust 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.

Rules – In signing this enrolment form you undertake to comply with the published rules and policies of Tipu Ora Manaaki Ora Trust with regard to attendance, academic integrity and progress, conduct and use of information systems.

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