

# Vet Nurse Plus

## Application/Enrolment Form



PO Box 217 106, Botany Junction, Auckland 2164

0800 VET NURSE or 09 273 9652 | info@vetnurseplus.co.nz | www.vetnurseplus.co.nz

### Kia Ora and Welcome to Vet Nurse Plus.

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 any additional documentation required.

#### Programmes and location

I would like to apply for the:

- **New Zealand Certificate in Animal Technology (Veterinary Nursing Assistant)**  
Level 5 one year full-time programme.

Albany  Botany

- **New Zealand Diploma in Veterinary Nursing**  
Level 6 one year full-time programme. Applicants must hold the New Zealand Certificate in Animal Technology (Veterinary Nursing Assistant), or equivalent, qualification.

Albany  Botany

If applying for the New Zealand Certificate in Animal Technology (Veterinary Nursing Assistant) please tick the below box if applicable:

- I intend to do the New Zealand Diploma in Veterinary Nursing following completion of the Certificate.

#### Transport

Due to compulsory veterinary clinic placements during the programme it is important you have access to transport.

- I have access to my own private transport       I am reliant on public transport or others for transport

#### A Personal details

1 Print your full legal name:

Family Name:

Given Name(s):

2 Preferred first name:

Previous name(s) known by:

3 Preferred title: Ms  Miss  Mrs  Mr  Other (Specify):

4 Date of birth:     Gender: Male  Female   
*day month year*

5 If you know your NSN (National Student Number), please write it here.

6 The language of instruction on this course is English. If English is not your first language please tick here:

7 **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  
 Australian Citizen  AUS  
 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 Residency Status:

- New Zealand Resident/Permanent Resident  NZL  
 Australian Permanent Resident  AUS

8 **Ethnicity:**

What ethnic group(s) do you belong to?

You may tick up to three boxes, which apply to you.

- |                       |                              |                       |                              |
|-----------------------|------------------------------|-----------------------|------------------------------|
| NZ European/Pakeha    | <input type="checkbox"/> 111 | Filipino              | <input type="checkbox"/> 411 |
| New Zealand Māori     | <input type="checkbox"/> 211 | Cambodian             | <input type="checkbox"/> 412 |
| Samoan                | <input type="checkbox"/> 311 | Vietnamese            | <input type="checkbox"/> 413 |
| Cook Island Māori     | <input type="checkbox"/> 321 | Other Southeast Asian | <input type="checkbox"/> 414 |
| Tongan                | <input type="checkbox"/> 331 | Chinese               | <input type="checkbox"/> 421 |
| Niue                  | <input type="checkbox"/> 341 | Indian                | <input type="checkbox"/> 431 |
| Tokelauen             | <input type="checkbox"/> 351 | Sri Lankan            | <input type="checkbox"/> 441 |
| Fijian                | <input type="checkbox"/> 361 | Japanese              | <input type="checkbox"/> 442 |
| Other Pacific Peoples | <input type="checkbox"/> 371 | Korean                | <input type="checkbox"/> 443 |
| British/Irish         | <input type="checkbox"/> 121 | Other Asian           | <input type="checkbox"/> 444 |
| Dutch                 | <input type="checkbox"/> 122 | Middle Eastern        | <input type="checkbox"/> 511 |
| Greek                 | <input type="checkbox"/> 123 | Latin American        | <input type="checkbox"/> 521 |
| Polish                | <input type="checkbox"/> 124 | African               | <input type="checkbox"/> 531 |
| South Slav            | <input type="checkbox"/> 125 | Other                 | <input type="checkbox"/> 611 |
| Italian               | <input type="checkbox"/> 126 | Not Stated            | <input type="checkbox"/> 999 |
| German                | <input type="checkbox"/> 127 |                       |                              |
| Australian            | <input type="checkbox"/> 128 |                       |                              |
| Other European        | <input type="checkbox"/> 129 |                       |                              |

Please specify if "Other Pacific Peoples", "Other European", "Other Southeast Asian", "Other Asian" or "Other".

9 **Iwi:**

If you identified as New Zealand Māori in question 8, 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'.

Iwi:

Rohe (Iwi home area):

Iwi:

Rohe (Iwi home area):

Iwi:

Rohe (Iwi home area):

10 **Prior activity:**

What was your MAIN activity or occupation in New Zealand in the year before starting this programme? You may tick only one box.

- |                          |                             |   |                             |
|--------------------------|-----------------------------|---|-----------------------------|
| Secondary school student | <input type="checkbox"/> 01 | Non-employed or beneficiary (excluding retired) | <input type="checkbox"/> 02 |
| Wage or salary worker    | <input type="checkbox"/> 03 | Self-employed                                   | <input type="checkbox"/> 04 |
| University student       | <input type="checkbox"/> 05 | Polytechnic student                             | <input type="checkbox"/> 06 |
| House-person or retired  | <input type="checkbox"/> 08 | Overseas (irrespective of occupation)           | <input type="checkbox"/> 09 |
| Private Training         | <input type="checkbox"/> 11 | Wānanga student                                 | <input type="checkbox"/> 12 |
| Establishment student    |                             |   |                             |

11 **Disability:<sup>1</sup>**

Do you live with the effects of significant injury, long term illness, or disability? Yes  No

The information you supply is confidential and will not affect your application.

If yes, how would you describe your impairment, disability or long term medical condition:

1. The completion of this section is not compulsory.

## B Academic information

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**Secondary School:** What was the name of the last secondary school you attended? State "overseas", if applicable.

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 Learning shows you how many credits you have. 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  
 NCEA Level 3 **or** Bursary **or** Scholarship  15  
 University Entrance  14  
 Overseas qualification  09  
 (includes International Baccalaureate & Cambridge Exams)  
 Other  98  
 Not Known  99

Please specify if "Overseas qualification" or "Other".

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**Tertiary Study:**

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.

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:

Will you be applying for cross-credits or Recognised Prior Learning from previous study?

No  Yes

If Yes please provide details:

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**Previous Study:**

**New Zealand School Certificate/NCEA Level 1**

School attended:

Subjects studied	Credits/Mark	Year
<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"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>

If you already have a tertiary qualification, please complete the Tertiary Study section only.

**New Zealand Sixth Form Certificate/NCEA Level 2**

School attended

Subjects studied

Credits/Mark

Year

Subjects studied	Credits/Mark	Year
<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"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>

**Bursary, Scholarship, Seventh Form Assessment/NCEA Level 3**

School attended

Subjects studied

Credits/Mark

Year

Subjects studied	Credits/Mark	Year
<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"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>

**Tertiary Study and/or Professional Qualifications**

Qualification

Institution

Year completed

Qualification	Institution	Year completed
<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"/>

Please provide certified copies of all academic transcripts. Vet Nurse Plus reserves the right to contact any institution holding relevant academic records to confirm information supplied.

**C Career**

Please fill this out if you are in some form of employment at time of application. Previous work experience or former employment may also be relevant to your admission, please include a summary if so.

15 Are you currently employed?  Yes, full-time  Yes, part-time  No

Employer	
Position	Start/end dates / / - / /
Summary	
<input type="text"/>	

Employer	
Position	Start/end dates / / - / /
Summary	
<input type="text"/>	

Applicants need to demonstrate an aptitude for working with the public. Please include a written reference from a teacher or employer. NOT applicable for those applying for the one year NZ Diploma in Veterinary Nursing programme.

- 16 What activities are you involved in (school, community, cultural, church etc) that might help in your career and study focus (you may continue on a separate page if you wish)

- 17 Why have you chosen this programme?

- 18 What could you offer the future of Vet Nursing (you may continue on a separate page if you wish)

## D Fee payment

An invoice will be provided at confirmation of enrolment.  
Full payment of fees is due two weeks prior to course commencement.

- 19 I will pay my fees by:

- Bank Transfer  
 Student Loan

## E Contact details

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Home Address and contact details:

Home Address

Street Address:

Suburb:

Town/City:

Post Code:

Phone:

Mobile:

Email:

Postal Address (if different from home address) :

Street Address:

Suburb:

Town/City:

Post Code:

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Emergency Contact:

Name:

Home Phone:

Relationship:

Mobile:

Address:

  

Email:

## F Documentation

To qualify 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. You must provide evidence of citizenship or permanent residency and 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 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 bring the original documentation to Vet Nurse Plus Administration, 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), 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 enrolment 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. For further information please see: <http://nsi.education.govt.nz/home.aspx>

## G Declaration

**Privacy** – Vet Nurse Plus collects and stores information from this form to:

- manage the business of Vet Nurse Plus (including internal reporting, administrative processes and selection of scholarship and prize winners)
- comply with the requirements of the Education Act 1989 and other legislation 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 Vet Nurse Plus 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 Vet Nurse Plus Administration.

NB: The Privacy Act came into force on 1 July 1993 with the stated aim of protecting the privacy of natural persons. It requires Vet Nurse Plus 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

Vet Nurse Plus supplies data collected on this form to government agencies, including:

- the Ministry of Education
- 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, Vet Nurse Plus 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. The Vet Nurse Plus policy on withdrawal and refund of fees may be obtained from Vet Nurse Plus Administration.

**Rules** – In signing this enrolment form you undertake to comply with the published rules and policies of Vet Nurse Plus 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

① Please make sure that you sign your enrolment form above.

Office use only		
Received	Approved	Entered
_____	_____	_____
_____ / _____ / _____	_____ / _____ / _____	_____ / _____ / _____

## H Checklist

- Completed all relevant sections of this form
- Read and signed the declaration

Attached CERTIFIED proof of citizenship  
(See Box F for certified copy explanation)

- New Zealand Birth Certificate
- Certificate of New Zealand Citizenship
- New Zealand Passport
- Whakapapa
- Cook Islands, Niue or Tokelau Birth Certificate
- Immigration New Zealand document
- Attached CERTIFIED proof of New Zealand residency **if applicable**

Attached CERTIFIED proof of academic qualifications

- NCEA, Bursary or other secondary school results
- Academic transcript from Tertiary institution
- Attached reference from teacher or employer attesting to aptitude for working with the public (New Zealand Certificate in Animal Technology, Veterinary Nursing Assistant, applicants only)

Please return this form to:

**Vet Nurse Plus**  
**PO Box 217106**  
**Botany Junction**  
**Auckland 2164**