

5. Fax number

THE UNIVERSITY OF AUCKLAND APPLICATION FOR ADMISSION

Attach colour passport size photo here. Please use paperclip, DO NOT glue or staple.

Please print in CAPITAL LETTERS or mark boxes with a cross eg X, using a **black or dark blue pen.** Please DO NOT fold this form. **DO NOT submit more than one Application for Admission.** Return this form, along with any required documentation, in the prepaid envelope provided, or post to: The University of Auckland, P.O. Box 91346, Auckland. For information on closing dates, Programme and Campus codes, and supporting information refer to the Information Sheet or www.auckland.ac.nz/admission

SECTION A - Personal Data this your first application to study at The University of Auckland?							OFFICE USE ONLY Application Received Keyed Scanned							
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No - please state year			ent and	ID numb	er. Yea	ar ^Y	YY	Y I	D No.					
Proposed year of enrolment	t	20	Υ											
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Preferred name											H			
Previous name (if applicable)														
Pate of birth	D D	MM	YY		Gende	er		Male		Fema	le			
you have been allocated a Natio	nal Stud	lent Numl	per by the	New Zeala	nd Minist	ry of Edu	cation, pl	ease state						
Any University correspond	dence	will be	posted	to your i	mailing	addres	s							
. Mailing address														
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3. Work address (if relevant)														H
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a. ∨	Vhat is the	_						_	ned c	r att	emp									
					y Institu	ution (g	jo to [02)								alific	ation	(eg. Tra	ade Certificate)	
	Degre	e or D	Diplom	a								Ce	ertifi	cate	9					
b. V	Vas this qu	alifica	ition ga	ained o	or atten	npted in	n >	Ne	ew Z	ealar	nd		X C)ver	seas					
	Vhat year c					at a teri	tiary ir	nstitu	ution	(eg.	Univ	ersity	or l	Poly	tech	nic)	as an	underg	graduate?	YYY
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From Year	To Year		ľ	Name	of Insti	tution				C	oun	try					Quali	ficatio	n	Completed (Y/N)
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There are non-refundable application fees for credit assessment and assessment of overseas qualifications. See Section F for details.

X No

Yes

g. Do you wish to apply for credit?

		cation Ir highest qualification is from a seco a language other than English, you r				
		school attended	nast provide setti tile t	ongmar vereien and an e	moiai Erigiic	
	Last year of atte					
	•	nest academic qualification you hold	from a secondary scho	ool? Please mark one bo	ox onlv.	
	No formal scho	ool qualification/ redits at level 1 (go to D3)	NZ University Ent	trance/		r B Bursary/ evel 3
		tificate (one or more subjects)/12 or more 1 or above/NCEA level 1 (go to D3)	NZ Higher Schoo 12 - 39 credits at		NZ Sch	olarship
	12 or more cre	Certificate (one or more subjects)/ dits at level 2 or above / NCEA level 2		lifications from Bursary Exam/ s at level 3 or above	Other -	- please specify below
	Cambridge Inte	ernational Examinations sat in New Zealand				
		fication (includes International Baccalaureate).				
d.	Please list all N.	Z Sixth Form Certificate subjects an	d grades and attach a v	verified copy		
	Year	Subject				Grade
e.	Please list detai	Is of NCEA Level 2 results and attac	ch a verified copy			
•				No. of Cupdite As	ala la casal	Cuada Assa
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You must attach a verified copy of your result. Note: you may be required to take an English Proficiency test.

SECTION E - Statistical Data The University is required by law to collect the following data.

TWE

TOEFL result achieved

1. Citizenship	New Zealand Citizen	Australian Citizen
X New Zealand Permanent Resident	Australian Permanent Resident	International Studen

New Zealand and Australian Citizens must provide a **verified copy** of their Passport, Birth Certificate or Certificate of Citizenship. New Zealand and Australian Permanent Residents must provide a **verified copy** of the front page of their Passport and the appropriate visas/permits. International students must provide a **verified copy** of the front page of their Passport or Birth Certificate. Students who have enrolled at The University of Auckland since 1990 are not required to provide name, date of birth and citizenship evidence unless their name or citizenship status has changed.

Year result obtained

2. Origin If you are a Permanent	Resident or Internatio	nal Stu	ident please state t	he coun	try which issued your passp	oort	
Country							
3. Ethnic Group To which ethnic group(s	s) do you belong? <i>Max</i>	kimum	of three.				
New Zealand Māo	ri			Europe	ean/Pakeha or NZ European	X	Samoan
lwi				Cook I	sland Maori		Chinese
			X	Other	Pacific Island		Tokelauan
		Т	X	Other	Asian		Fijian
		Т	X	Tongai	า		Indian
				Niuear	1		Other
4. Previous Occupat What was your main ac		New Z	Zealand as at 01 Oct	ober in	the year before your intend	ed enrol	ment?
X Secondary School	student	X Po	olytechnic student		X House-pers	on or re	tired
X University student		Vaananga student		X Unemploye	d or oth	er beneficiary	
X College of Education	on student	X	Vage or salary earne	r	Verseas (a	at 01 Oc	tober)
X Private Training Es	tablishment student	X Se	elf-employed				
5. IRD Number If yo	u have a New Zealand	l IRD n	umber, please state				
6. Disabilities Do you live with the eff Do you need some form				X	Yes X	No No	
 Please read this se If your highest quaplease include NZ If your highest quaplest quaplease include NZ 	ection to find out who alification (gained or att \$75 alification (gained or att g for academic credit fo	ether y empted empted r study	you need to pay a down and overseadd) is from an overseadd) is from an overseadd out at another	fee with s second s tertiary er New Z	stralian Citizens & Permanen a this Application for Adm dary school (including Interna- institution please include NZ dealand tertiary institution ple Special Admission categories	tional Ba Z\$125 ase inclu	ccalaureate) de NZ\$75
Payment Details	(These fees are non	-refun	dable.)				
I enclose payment of:	X NZ\$50		NZ\$75		NZ\$125		
in the form of:	X Mastercard		VISA		Cheque (payable to 'The Ui	niversity	of Auckland')
Card number					Expiry date	ММ	YY
Cardholder name							
Receipt required	X Yes		No				
Certified true copy		ised to	sign a Statutory		orsed with the statement ion, such as a Justice of t		
Need help?							
If you have any queries				from	toido Novy Zaalanal)		
Student Hotline: Address:	0800 61 62 63 (or or Student Information				tside New Zealand) ersity of Auckland, 22 Princ	es Stree	t, Auckland
Email:	studentinfo@aucklan				,		

Declaration (All students must sign)

I promise to abide by the Statutes and Regulations, and comply with the reasonable requirements of The University of Auckland as published in the University Calendar. I declare that the information set out in this application form and attached documents is complete and correct and I acknowledge that the University may cancel my enrolment if false information has been supplied or if information required is not supplied by the due date. I have read and understood the outline of how the Privacy Act 1993 will be applied to the information I supply and I authorise The University to collect, use and disclose personal information about me in accordance with that outline and the Privacy Act 1993. I understand that if I apply for a Student Allowance or a Student Loan, the University may disclose relevant personal information to StudyLink for the administration of those schemes. I authorise The University of Auckland to make amendments to my proposed study where such amendments are necessary to comply with degree regulations and requirements. I authorise any agency holding the source of information I have provided on this form to release that information to the University on request.

Signature	Date			M	VI		
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