

2011 Professional Development Domestic Student Application Form

- Please send all application forms to Auckland Administration Centre, **PO Box 9865 Newmarket, Auckland 1149**
- Please note – MoE require us to collect **ALL information and documentation** for **ALL** students each year
- Please answer every question under each section (SECTIONS A - E)

A. Personal Details

Surname/Family name

First name/s

Preferred name

Gender Male Female

Date of Birth Day/Month/Year / /

Postal Address

NZCM number *Office use only*

NSI number *if known*

IRD number *for Student Loan
Interest Write Off*

Post Code

Phone Work Mobile

Home Email

Emergency contact Name Phone

Citizenship New Zealand Citizen NZ Permanent Resident Australian Citizen Other

Ethnicity

<input type="checkbox"/> African	<input type="checkbox"/> British/Irish	<input type="checkbox"/> Tongan	<input type="checkbox"/> Latin American	<input type="checkbox"/> Other Pacific Peoples
<input type="checkbox"/> Chinese	<input type="checkbox"/> Korean	<input type="checkbox"/> German	<input type="checkbox"/> Tokelauen	<input type="checkbox"/> Middle Eastern
<input type="checkbox"/> Samoan	<input type="checkbox"/> Dutch	<input type="checkbox"/> Australian	<input type="checkbox"/> South Slav	<input type="checkbox"/> Other Southeast Asian
<input type="checkbox"/> Niuean	<input type="checkbox"/> Greek	<input type="checkbox"/> Filipino	<input type="checkbox"/> Other Asian	<input type="checkbox"/> Other European
<input type="checkbox"/> Indian	<input type="checkbox"/> Polish	<input type="checkbox"/> Cambodian	<input type="checkbox"/> Japanese	<input type="checkbox"/> Other _____
<input type="checkbox"/> Fijian	<input type="checkbox"/> Italian	<input type="checkbox"/> Vietnamese	<input type="checkbox"/> Sri Lankan	<input type="checkbox"/> Cook Island Māori
				<input type="checkbox"/> NZ European/Pakeha
				<input type="checkbox"/> NZ Māori - please specify Iwi _____

Please note that your name, date of birth and residency as entered on this enrolment 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 www.nsi.govt.nz/ima

B. Academic and Vocational Information

Main activity as at October 1, 2010

- | | | |
|--|---|--|
| <input type="checkbox"/> Secondary School Student | <input type="checkbox"/> Wananga Student | <input type="checkbox"/> Wage or Salary work |
| <input type="checkbox"/> Self-employed | <input type="checkbox"/> University student | <input type="checkbox"/> Polytechnic Student |
| <input type="checkbox"/> College of Education Student | <input type="checkbox"/> House person or retired | <input type="checkbox"/> Overseas (irrespective of occupation) |
| <input type="checkbox"/> Non-employed or Beneficiary (excl. retired) | <input type="checkbox"/> Private Training Establishment Student | |

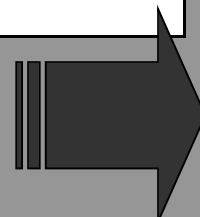
How did you hear about this cou

- | | | |
|---|---|----------------------------------|
| <input type="checkbox"/> NZCM Staff/student | <input type="checkbox"/> Family/Friends | <input type="checkbox"/> Website |
| <input type="checkbox"/> Newsletter | <input type="checkbox"/> Email | <input type="checkbox"/> Other |

Course - where dates are not given check the prospectus or website for details	Module & Fee		Campus	Pre-requisite
Fascial Kinetics Auckland: 12/13 March & 26/27 March Wellington: 16 - 19 April	BT1	\$800	<input type="checkbox"/> Auckland <input type="checkbox"/> Wellington	60 hours Body Therapies training, or equivalent
Fascial Kinetics Auckland: 11/12 June & 2/3 July Wellington: 16 - 19 July	BT2	\$800	<input type="checkbox"/> Auckland <input type="checkbox"/> Wellington	BT1
Fascial Kinetics Auckland: 3/4 September & 24/25 September Wellington: 15 - 18 October	BT3	\$800	<input type="checkbox"/> Auckland <input type="checkbox"/> Wellington	BT2
Kinesiology Auckland only: 29/30 October	1	\$435	<input type="checkbox"/> Auckland	NZCM A&P1 or equiv. or 300 Hours A&P
Kinesiology Auckland only: 29/30 October	2	\$435	<input type="checkbox"/> Auckland	Module 1
Kinesiology Auckland only: 29/30 October	3	\$435	<input type="checkbox"/> Auckland	Module 2
Lymphatic Drainage: Vodder Auckland only: July 18 - 22	Basic	\$1,000	<input type="checkbox"/> Auckland	Medical Doctor, Naturopath, Occupational Therapist, Physiotherapist, Podiatrist, Registered Nurse, Massage Therapist (1800+ hrs)
Lymphatic Drainage: Vodder Auckland only: August 1 - 5	Therapy 1	\$1,000	<input type="checkbox"/> Auckland	
Lymphatic Drainage: Vodder Auckland only: August 6 & 7	Clinics	\$140	<input type="checkbox"/> Auckland	
Oncology Massage Auckland only: March 18, 19, 20	OM1	\$1,000	<input type="checkbox"/> Auckland	1800 hours or equiv. Body therapies training
Oncology Massage Auckland only: April 1, 2, 3	OM1	\$1,000	<input type="checkbox"/> Auckland	1800 hours or equiv. Body therapies training
Oncology Massage Auckland only: TBD	OM2	TBD	<input type="checkbox"/> Auckland	OM2
Oncology Massage Auckland only: TBD	OM3	TBD	<input type="checkbox"/> Auckland	OM2
Oncology Massage Auckland only: TBD	OM4	TBD	<input type="checkbox"/> Auckland	OM3
Pain Management & Dry Needling Auckland: 7/8 May Wellington: 11/12 June	1	\$400	<input type="checkbox"/> Auckland <input type="checkbox"/> Wellington	2400 hours body therapies or equiv. MTs, Osteopaths, Physiotherapists Chiropractics
Pain Management & Dry Needling Auckland: 30/31 July Wellington: 20/21 August	2	\$400	<input type="checkbox"/> Auckland <input type="checkbox"/> Wellington	
Pain Management & Dry Needling Auckland: TBD Wellington: TBD	3	TBD	<input type="checkbox"/> Auckland <input type="checkbox"/> Wellington	
First Aid - see Prospectus	\$233		<input type="checkbox"/> Auckland <input type="checkbox"/> Wellington	
Refresher First Aid	\$117		<input type="checkbox"/> Auckland <input type="checkbox"/> Wellington	

For other interest courses please see prospectus or website and complete an Interest Application form. You may also wish to look at further studies with the Diploma in Massage and Clinical Sports or Bachelor of Health Studies. Please contact for further information and RPL procedures.

PLEASE TURN OVER TO READ, SIGN AND DATE YOUR APPLICATION



Privacy

New Zealand College of Massage collects and stores information from this form to comply with the requirements of the Ministry of Education (student statistical returns), New Zealand Qualifications Authority (Record of Learning registration and Unit Standard outcomes), Tertiary Education Commission (funding returns), Industry Training Organisations (funding and academic outcomes), Ministry of Social Development (confirmation of enrolment and academic outcomes), Inland Revenue Department (student loan interest rebate), Department of Immigration (if you are not a New Zealand citizen or permanent resident) and Agencies who support particular students through scholarships and prizes, payment of fees or other awards (if you are a recipient of one of these awards). The information is also used to select students for qualifications, to manage internal administrative processes, and for internal reporting. Information about students may be supplied to, and sought from, other educational organisations for the purpose of verifying academic records.

In addition, when required by statute, the Institute releases information to Government agencies such as the New Zealand Police, Department of Justice, Ministry of Social Development, and the Accident Compensation Corporation (ACC).

In signing this enrolment form you authorise such disclosure on the understanding that the Organisation will observe the general conditions governing the release of information, as set out in the Privacy Act 1993 and the Post-compulsory Unique Identifier Code of Practice. You may see any information held about you and amend any errors in that information. To do so, contact the Registrar.

NB: The Privacy Act came into force on 1 July 1993 with the stated aim of protecting the privacy of natural persons. It requires the Organisation 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/people/peotop.html>

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. You also agree to abide by the Colleges policy on withdrawals and refunds as set out in the prospectus.

Rules: In signing this enrolment form you undertake to comply with the published rules and policies of the College with regard to attendance, academic progress, standard of dress, health and safety, and behaviour. Please read the general information section of the prospectus for more details.

Academic Requirements:

- Demonstrate competency in all assessment tasks.
- Minimum 95% attendance for all in-class hours. Exceptional circumstances may be negotiated.
- Completion of all assignments and case studies for classes by due date.
- Payment of all tuition and non-tuition fees.

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 as described above and I consent to the disclosure of personal information as described above. I will make myself familiar with the requirements in regard to student behaviour at NZCM. I will obey the Student Code of Conduct and acknowledge that if I breach this Code I will be subject to penalties imposed according to College Disciplinary Procedures.

E. Authorisation for Enrolment**Student signature:** _____**Date:** _____**Office Use Only**

Date application received

All information received, declaration signed and student offered a place in the course

 Yes No

If No, what is required?

College Signature: _____

Date: _____

Designation within College: _____