

Postgraduate and Masters Programmes Required Information

We collect and store information provided on this form so we can carry out our functions as a tertiary provider. As part of your application we ask you to provide information about yourself. If you have any questions about completing this form please contact the Student Enrolment and Information Centre on 0800 2 Wintec (0800 2 946 832) from within New Zealand.

PERSONAL DETAILS

What is your full legal name?

First Name(s) (Ingoa Tuatahi):

Family Name (Ingoa Whānau):

Date of Birth:

Wintec Student ID (if known):

PROGRAMME CHOICE(S)

Postgraduate Diploma in Nursing

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Postgraduate Certificate in Professional Supervision

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Master of Nursing

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Postgraduate Certificate in Midwifery

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Postgraduate Certificate in Health and Social Practice

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Postgrad. Dip. in Health and Social Practice (Midwifery)

☐

Postgraduate Diploma in Health and Social Practice

☐

Master of Professional Practice

☐

EMPLOYMENT AND OTHER EXPERIENCE E.G. VOLUNTARY WORK

List your employment history, including your current employment details, for at least the last 5 years (or since leaving school).

Employer	Dates	Position	Nature of Work	Full or Part Time

OTHER QUALIFICATIONS

Complete this section if you have other qualifications or training relevant to the programme you are applying for.

Year	Qualification/Training	Provider

RELEVANT INDUSTRY EXPERIENCE

Please record your industry experience/qualifications directly relevant to the requirements of your chosen programme of study: i.e. nursing registration, annual practising certificate number (APC), year first registered etc.

Organisation	Training/Experience	Dates	Qualification (Formal or Informal)	Details

Additional comment(s), clarification, experiences, additional skills, values, qualities, etc. (attach separate page if needed):

If you belong to a professional membership/licensing/registration body please name below:

APPLICATION STATEMENT

This image shows a single sheet of white paper with horizontal blue or grey ruling lines. The lines are evenly spaced and run across the width of the page. There are approximately 20 lines visible. The paper has a slight shadow on its right side, suggesting it's resting on a surface.

You must supply **TWO** referee names; preferably from a person who is well positioned to speak on your behalf. Please do not use a family member or friend as a referee, i.e. manager or recent employers. You must supply an email address for each of your referees.

Name: _____ Relationship to you: _____

Email: _____ Telephone: _____

Name:	Relationship to you:
Email:	Telephone:

I confirm that the information contained on this form is true and accurate. I have not withheld any information which could have a material bearing on my enrolment. I acknowledge that I am bound by the statutes, regulations and policies of Wintec (copies available from the Student Enrolment and Information Centre). I consent to Wintec seeking verbal or written information , if necessary, in relation to the documents I have submitted.

Signature: _____ Date: _____