ADDITIONAL INFORMATION

Wintec
WAIKATO INSTITUTE OF TECHNOLOGY
Te Kuratini o Waikato

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

1 When were you born? d d m m y y

Wintec Student ID Number

2 What is your full legal name?

First Name(s) *Ingoa tuatahi*

Family Name *Ingoa Whānau*

EMPLOYMENT AND OTHER RELEVANT EXPERIENCE: E.G. VOLUNTARY WORK

3 List your employment history (if any) since leaving school, or for the last three years (including your current employment details).

EMPLOYER	DATES	POSITION	NATURE OF WORK	P/TIME	F/TIME

OTHER QUALIFICATIONS

4 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 (IF REQUIRED)

5 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	FORMAL TRAINING/EXPERIENCE	DATES		QUALIFICATION (FORMAL OR INFORMAL)	DETAILS
			TO	FROM		
1						
2						
3						
4						
5						

Additional comment(s), clarification, experiences, additional skills, values, qualities etc.

APPLICATION STATEMENT

6 The school you are applying to may require additional information about you to make a selection if (a) there are more applicants than places or (b) you don't meet the entry requirements for the programme, but may be eligable for provisional entry or special admission. Please outline your work and/or life experiences that have equipped you for this programme. Explain why you want to undertake the programme and believe you are likely to complete it successfully. You may attach separate pages if necessary.

REFEREES/REFERENCES (IF REQUIRED)

7 Do you wish to have a whānau interview? ☐ Yes ☐ No

REFEREE 1:

Name: Organisation:

Flat/house no: Street address/box/bag: Suburb: City: Postcode:

Relationship: Telephone:

REFEREE 2:

Name: Organisation:

Flat/house no: Street address/box/bag: Suburb: City: Postcode:

Relationship: Telephone:

REFEREE 3:

Name: Organisation:

Flat/house no: Street address/box/bag: Suburb: City: Postcode:

Relationship: Telephone:

STUDENT DECLARATION

8 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