

International Student Programme Application Form

For Academic and/or English Language Programmes



If you are applying to study programmes within **Education, Social Services, or Nursing and Certificate of Achievement in Registered Nurse Competency to Practice (CAP)** please contact MIT International to obtain an application form.
Phone +64 9 968 8742 | Email international.application@manukau.ac.nz | Web manukau.ac.nz

If you are a **New Zealand Citizen** (including the Cook Islands, Tokelau or Niue), a **New Zealand Permanent Resident**, or an **Australian Citizen or Permanent Resident**, please contact the Ask Me! Team to obtain an application form.
Phone +64 9 968 8000 | Email enquiries@manukau.ac.nz | Web manukau.ac.nz

Please print clearly in pen using **BLOCK LETTERS**. Please complete all sections of this form.

1

PROGRAMME

Name of Programme 1.

Name of Programme 2.

Expected start date

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PERSONAL DETAILS

Legal family name

Legal given names

 Title Miss Mrs Ms Mr Dr Other (please state):

Date of birth (DD/MM/YYYY)

/ /

Gender (TICK ONE)

 Male Female

Citizenship

First language

Passport number

Permanent/home address

Unit/flat/apartment number

Street number

Street name

Suburb

Town/city

Home phone ()

Postcode

Country

Mobile

Email (personal)

Contact address if different from above (TICK ONE AND FILL IN ALL DETAILS)

 Agent, please give name and branch: Other (relative of friend), please give name:

Unit/flat/apartment number

Street number

Street name

Suburb

Town/city

Home phone ()

Postcode

Country

Mobile

Email

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EDUCATION HISTORY (please include current secondary and tertiary study – if applicable)

SECONDARY SCHOOL, TERTIARY INSTITUTION ATTENDED	FROM – TO (YEAR)	SUBJECTS TAKEN LEVELS	QUALIFICATIONS AND GRADES GAINED (PLEASE ATTACH CERTIFIED COPY)

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STUDENT MEDICAL CONDITIONS OR DISABILITIES

Do you have any disabilities or pre-existing medical conditions which may or may not affect your studies? No Yes
If yes, please indicate what the disability is that applies to you.

MIT is not funded by the New Zealand Government to support international students with disabilities. A student's disability will be assessed against the requirements to successfully complete the programme. Applications may be declined where the disability will impact on the student's ability to succeed in that programme. Any assessment or support required for the disability while studying at Manukau Institute of Technology will have to be arranged and paid for by the student.

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ENGLISH LANGUAGE PROFICIENCY (please complete this section if English is not your first language)

IELTS, score: _____ TOEFL, score: _____ Pearsons, score: _____

Other (please specify: _____)

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ACCOMMODATION (please complete if required)

Homestay Not required

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DOCUMENTS REQUIRED

You need to send **certified copies** of the following documentation to support your application. Do not send original documents.

Tick each completed item.

- Qualifications and grades
- Birth certificate or passport
- English language proficiency results

Have you stated the name of the programme applied for?

(See 1) Tick here

To get certified copies of your documents:

Take two photocopies of your documents along with the originals to one of the following:

- Education Agent
- Ask Me! Team, Manukau Institute of Technology
- Notary Public
- Member of Parliament
- Barrister or solicitor of the High Court
- Registrar or Deputy Registrar of the courts.

The person will stamp and sign the copied document as proof that they have seen the original and that the copy is genuine.

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DECLARATION

I hereby declare that the information and attached documentation provided by me in this application is true and correct. I acknowledge that Manukau Institute of Technology can cancel my application if false or incomplete information has been provided. I understand that the purpose of gathering this information is to allow Manukau Institute of Technology to carry out the functions required of it under the Education and Training Act 2020, and its obligations under other enactments and in accordance with the Privacy Act 2020. I authorise Manukau Institute of Technology to disclose this information to the agencies outlined in Te Pūkenga's Privacy Notice, available at www.tepukenga.ac.nz. I agree to abide by all MIT statutes, regulations and policies as may be amended from time to time. I undertake to pay all fees and charges relating to my enrolment.

Applicant
Signature

DAY / MONTH / YEAR

Note: If you are signing on behalf of the student, you must have the necessary authorisation through legal guardianship or power of attorney.

COMPULSORY

Please ensure you read, sign and date the student declaration.

PLEASE SEND YOUR APPLICATION TO

MIT International
Manukau Institute of Technology
Private Bag 94006
Manukau 2241, Auckland, New Zealand

Note: If you do not receive an acknowledgement of your application, or if you have any queries, please email international.application@manukau.ac.nz

FOR OFFICE USE ONLY

ACKNOWLEDGEMENT SENT

INTERVIEW DATE

ACCEPT

DECLINE

OTHER PROGRAMME RECOMMENDED

SIGNED

DATE