

New Zealand Certificate in Medical Transcription and Editing Level 4

Enrolment Form 2019



Sue's Unlimited Ltd trading as Sue's Computer Training Company
Mailing Address:
112 Osprey Drive, Welcome Bay
Tauranga

Phone 07 544 3172

Email info@computertraining.co.nz

Welcome to Sue's Computer Training Co. Please read the instructions below carefully before you complete this application form.

INSTRUCTIONS

The purpose of this enrolment form is to obtain from you the information we need to enrol you into a qualification at our organisation. We also need to collect information from you which is required by the Ministry of Education and other Government agencies for statistical and registration reasons. Please remember to:

- Complete all sections of the form.
- Print your answers clearly in pen, or tick the box that applies for multi-choice questions.
- Sign this form.
- Attach to the form additional documentation that is required for Ministry of Education funding purposes. **A description of the required documentation is provided on page 6 of the form.**

PERSONAL DETAILS						
1	Print your full legal Name:	<i>Family Name</i>				
		<i>Given Name(s)</i>				
2	Preferred first name:			Previous name(s) known by:		
3	Have you studied at Sue's Computer Training before? If yes, what was your ID number? If you have previously enrolled at Sue's under another name, what was that name?			Yes <input type="checkbox"/>	No <input type="checkbox"/>	Student ID
4	Preferred Title:	Ms <input type="checkbox"/>	Miss <input type="checkbox"/>	Mrs. <input type="checkbox"/>	Mr. <input type="checkbox"/>	Other (specify)
5	Date of Birth	/ /		Gender:	Male <input type="checkbox"/>	
		<i>day</i>	<i>month</i>		<i>year</i>	Female <input type="checkbox"/>
6	Address and contact details:		<i>Home Street Address:</i>		<i>Postal Address (if different from home address):</i>	
	<i>Home Phone:</i>					
	<i>Work Phone</i>					
	<i>Mobile:</i>		<i>Email:</i>			
<i>Preferred contact method: home phone / mobile phone / text / email / skype</i>						
7	Address While Studying: (if different from home address) <i>Phone:</i> <i>Mobile:</i> <i>Email:</i>					
8	Next of Kin: <i>Name:</i> <i>Phone:</i>					
9	If you know your NSN (National Student Number), please write it here.					

<p>10</p>	<p>Citizenship and Residency</p> <p>You may need to supply evidence of residence or citizenship</p>	<p>Tick the box which best describes your citizenship.</p> <p><i>New Zealand Citizen</i> <input type="checkbox"/>NZL go to 12b <i>Australian Citizen</i> <input type="checkbox"/>AUS go to 12b</p> <p><i>Other</i> <input type="checkbox"/></p> <p>If “other” please specify country of citizenship (For students with dual citizenship, specify the country of citizenship of the passport used to enter New Zealand.)</p> <p>_____</p> <p>Tick the box if you have New Zealand or Australian Permanent Residency.</p> <p><i>New Zealand Permanent Resident</i> <input type="checkbox"/>NZP <i>Australian Permanent Resident</i> <input type="checkbox"/>AUSP</p> <p>Please also specify your fee/assistance status.</p> <p>Domestic Student <input type="checkbox"/>00 NZ Aid Student <input type="checkbox"/>01 Full Fee Paying International Student <input type="checkbox"/>03 Student on recognized exchange scheme <input type="checkbox"/>04 Foreign Research Based Post-Graduate <input type="checkbox"/>06 Military Personnel, Diplomatic Staff or Family, or Persons Associated with Antarctic programme <input type="checkbox"/>08 On-Shore International PhD student <input type="checkbox"/>09 International ITO Off-job Training <input type="checkbox"/>12 Refugee or protected person whose application for residence is being processed OR a person who has made a claim to be recognised as a refugee or protected person and holds a valid temporary visa <input type="checkbox"/>13</p> <p><i>Note:*</i> Always use 00 for New Zealand Citizen; use 00 for New Zealand resident visa holder and Australian Citizen or Australian Permanent Resident residing in New Zealand during the time studying this qualification.</p>																																																																				
<p>10b</p>		<p>During your time studying this qualification will you be resident in New Zealand or overseas?</p> <p><i>In New Zealand</i> <input type="checkbox"/> <i>Overseas</i> <input type="checkbox"/></p>																																																																				
<p>11</p>	<p>Ethnicity: What ethnic group(s) do you belong to?</p> <p>You may tick up to three boxes which apply to you.</p>	<table border="0"> <tr> <td><i>NZ European/Pakeha</i></td> <td><input type="checkbox"/>111</td> <td><i>Other European</i></td> <td><input type="checkbox"/>129</td> </tr> <tr> <td><i>New Zealand Maori</i></td> <td><input type="checkbox"/>211</td> <td><i>Filipino</i></td> <td><input type="checkbox"/>411</td> </tr> <tr> <td><i>Samoan</i></td> <td><input type="checkbox"/>311</td> <td><i>Cambodian</i></td> <td><input type="checkbox"/>412</td> </tr> <tr> <td><i>Cook Island Maori</i></td> <td><input type="checkbox"/>321</td> <td><i>Vietnamese</i></td> <td><input type="checkbox"/>413</td> </tr> <tr> <td><i>Tongan</i></td> <td><input type="checkbox"/>331</td> <td><i>Other Southeast Asian</i></td> <td><input type="checkbox"/>414</td> </tr> <tr> <td><i>Niue</i></td> <td><input type="checkbox"/>341</td> <td><i>Chinese</i></td> <td><input type="checkbox"/>421</td> </tr> <tr> <td><i>Tokelauan</i></td> <td><input type="checkbox"/>351</td> <td><i>Indian</i></td> <td><input type="checkbox"/>431</td> </tr> <tr> <td><i>Fijian</i></td> <td><input type="checkbox"/>361</td> <td><i>Sri Lankan</i></td> <td><input type="checkbox"/>441</td> </tr> <tr> <td><i>Other Pacific Peoples</i></td> <td><input type="checkbox"/>371</td> <td><i>Japanese</i></td> <td><input type="checkbox"/>442</td> </tr> <tr> <td><i>British/Irish</i></td> <td><input type="checkbox"/>121</td> <td><i>Korean</i></td> <td><input type="checkbox"/>443</td> </tr> <tr> <td><i>Dutch</i></td> <td><input type="checkbox"/>122</td> <td><i>Other Asian</i></td> <td><input type="checkbox"/>444</td> </tr> <tr> <td><i>Greek</i></td> <td><input type="checkbox"/>123</td> <td><i>Middle Eastern</i></td> <td><input type="checkbox"/>511</td> </tr> <tr> <td><i>Polish</i></td> <td><input type="checkbox"/>124</td> <td><i>Latin American</i></td> <td><input type="checkbox"/>521</td> </tr> <tr> <td><i>South Slav</i></td> <td><input type="checkbox"/>125</td> <td><i>African</i></td> <td><input type="checkbox"/>531</td> </tr> <tr> <td><i>Italian</i></td> <td><input type="checkbox"/>126</td> <td><i>Other</i></td> <td><input type="checkbox"/>611</td> </tr> <tr> <td><i>German</i></td> <td><input type="checkbox"/>127</td> <td><i>Not Stated</i></td> <td><input type="checkbox"/>999</td> </tr> <tr> <td><i>Australian</i></td> <td><input type="checkbox"/>128</td> <td></td> <td></td> </tr> </table> <p>Please specify if “Other Pacific Peoples”, “Other European”, “Other Southeast Asian”, “Other Asian” or “Other”.</p>	<i>NZ European/Pakeha</i>	<input type="checkbox"/> 111	<i>Other European</i>	<input type="checkbox"/> 129	<i>New Zealand Maori</i>	<input type="checkbox"/> 211	<i>Filipino</i>	<input type="checkbox"/> 411	<i>Samoan</i>	<input type="checkbox"/> 311	<i>Cambodian</i>	<input type="checkbox"/> 412	<i>Cook Island Maori</i>	<input type="checkbox"/> 321	<i>Vietnamese</i>	<input type="checkbox"/> 413	<i>Tongan</i>	<input type="checkbox"/> 331	<i>Other Southeast Asian</i>	<input type="checkbox"/> 414	<i>Niue</i>	<input type="checkbox"/> 341	<i>Chinese</i>	<input type="checkbox"/> 421	<i>Tokelauan</i>	<input type="checkbox"/> 351	<i>Indian</i>	<input type="checkbox"/> 431	<i>Fijian</i>	<input type="checkbox"/> 361	<i>Sri Lankan</i>	<input type="checkbox"/> 441	<i>Other Pacific Peoples</i>	<input type="checkbox"/> 371	<i>Japanese</i>	<input type="checkbox"/> 442	<i>British/Irish</i>	<input type="checkbox"/> 121	<i>Korean</i>	<input type="checkbox"/> 443	<i>Dutch</i>	<input type="checkbox"/> 122	<i>Other Asian</i>	<input type="checkbox"/> 444	<i>Greek</i>	<input type="checkbox"/> 123	<i>Middle Eastern</i>	<input type="checkbox"/> 511	<i>Polish</i>	<input type="checkbox"/> 124	<i>Latin American</i>	<input type="checkbox"/> 521	<i>South Slav</i>	<input type="checkbox"/> 125	<i>African</i>	<input type="checkbox"/> 531	<i>Italian</i>	<input type="checkbox"/> 126	<i>Other</i>	<input type="checkbox"/> 611	<i>German</i>	<input type="checkbox"/> 127	<i>Not Stated</i>	<input type="checkbox"/> 999	<i>Australian</i>	<input type="checkbox"/> 128		
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<p>12</p>	<p>Iwi: If you identified as New Zealand Maori in question 11, what is the name of your Iwi?</p> <p>You may enter more than one Iwi. If you do not know your Iwi, please enter 'Don't Know'.</p>	<p>Iwi: Rohe (Iwi home area): Iwi: Rohe (Iwi home area): Iwi: Rohe (Iwi home area):</p>																																																																				
<p>13</p>	<p>Would you like to involve your wider community in your study programme? What, if any, role would you need Sue's Computer Training Company to play in that involvement? Please note any culturally targeted support you may require during your study.</p>																																																																					

14	Prior activity	What was your MAIN activity or occupation in New Zealand at 1 October 2015? Tick only one box. <i>Secondary school student</i> <input type="checkbox"/> 01 <i>Non-employed or beneficiary (excluding retired)</i> <input type="checkbox"/> 02 <i>Wage or salary worker</i> <input type="checkbox"/> 03 <i>Self-employed</i> <input type="checkbox"/> 04 <i>University Student</i> <input type="checkbox"/> 05 <i>Polytechnic student</i> <input type="checkbox"/> 06 <i>House-person or retired</i> <input type="checkbox"/> 08 <i>Overseas (irrespective of occupation)</i> <input type="checkbox"/> 09 <i>Private training establishment student</i> <input type="checkbox"/> 11 <i>Wananga Student</i> <input type="checkbox"/> 12
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15	Disability:	Do you live with the effects of significant injury, long term illness, or disability? The information you supply is confidential. Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, how would you describe your impairment, disability or long term medical condition: _____ _____
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IRD NUMBER COLLECTION FOR STUDENT LOAN INTEREST WRITE-OFF

16	Do you currently have or will you have a Student Loan this year?	<input type="checkbox"/> - No – please go to next section <input type="checkbox"/> - Yes – please insert your IRD number (see notes for more information on interest write-off)									
	IRD Number	<table border="1" style="margin: auto;"> <tr> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px; background-color: black;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px; background-color: black;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> </tr> </table>									
	Interest Free Student Loans and other Interest Write-offs	Completing your IRD number is voluntary. This is requested so the Ministry of Education can share information with MSD (Studylink) regarding student enrolments. If you choose to provide your IRD number on the enrolment form this will be included with your enrolment details and will be reported to the Ministry of Education.									

BANK ACCOUNT

Please provide details of your bank account for the deposit of items such as Travel Allowances.			
<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
<i>Bank</i>	<i>Branch</i>	<i>Account Number</i>	<i>Suffix</i>

Name of Bank:

Name of Branch:	Town/City:
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ACADEMIC INFORMATION														
17	Secondary School:	<p>What was the name of the last Secondary School you attended? State “overseas”, if applicable.</p> <p>What was your last year at Secondary School? _____</p> <p>What was the highest level of achievement you hold from a secondary school? Your highest achievement may be a “traditional” award such as School Certificate, or you may have achieved several credits or a National Certificate at a certain level on the National Qualifications Framework. Your NZQA Record of Learning shows you how many credits you have. Tick only one box.</p> <p>No formal secondary qualifications <input type="checkbox"/> 00</p> <p>14 or more credits at any level <input type="checkbox"/> 11</p> <p>NCEA Level 1 or School Certificate <input type="checkbox"/> 12</p> <p>NCEA Level 2 or 6th Form Certificate <input type="checkbox"/> 13</p> <p>University Entrance <input type="checkbox"/> 14</p> <p>NCEA Level 3 or Bursary or Scholarship <input type="checkbox"/> 15</p> <p>Overseas Qualification (includes International Baccalaureate & Cambridge Exams) <input type="checkbox"/> 09</p> <p>Other <input type="checkbox"/> 98</p> <p>Not known <input type="checkbox"/> 99</p> <p>Please specify if “Overseas qualification” or “Other”. _____</p>												
		<p>18</p> <p>Tertiary Study:</p> <p>Will this be the first time you have ever enrolled in a University, Institute of Technology Polytechnic, Institute of Technology College of Education, Industry Training Organisation, Government Training Establishment, Private Training Establishment or Wānanga either in New Zealand or overseas since leaving school? Do not include enrolments in community classes.</p> <p>No <input type="checkbox"/> Yes <input type="checkbox"/></p> <p>If you answered “No”, please enter the name of the organisation you studied at and the year of your first enrolment:</p> <p>Name: _____</p> <p>Year: <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/></p> <p>What year do you expect to complete the academic requirements of your course/s in order to graduate with your qualification?</p> <p>Year: <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/></p>												
18b	Prior Achievement	<p>Please list all of the tertiary qualifications you hold, the month and year you completed each and the tertiary education organisation that it was completed at. Alternatively attach your academic transcript from the tertiary education organisation and/or a copy of your NZQA record of achievement.</p> <table border="1"> <thead> <tr> <th>Tertiary Education Organisation</th> <th>Qualification</th> <th>Month and Year of Completion</th> </tr> </thead> <tbody> <tr> <td> </td> <td> </td> <td> </td> </tr> <tr> <td> </td> <td> </td> <td> </td> </tr> <tr> <td> </td> <td> </td> <td> </td> </tr> </tbody> </table>	Tertiary Education Organisation	Qualification	Month and Year of Completion									
Tertiary Education Organisation	Qualification	Month and Year of Completion												

PROGRAMME			
19	New Zealand Certificate in Medical Transcription and Editing		<input checked="" type="checkbox"/>
	Qualification Start Date: _____	Full-time	<input type="checkbox"/>
	Qualification end Date (if known): _____	Part-time	<input type="checkbox"/>
Office Use Only Course ID NZ2970			
1EE	English Essentials	4DMED	Dermatology
1WB	Medical Word Building	4DMEDTX	Dermatology transcription
1MSW	MS Word	4EMED	Endocrinology
1PQGS	Production, Quality & Goal Setting	4EMEDTX	Endocrinology transcription
1Prof	Professionalism Block 1	4GMED	Geriatrics
		4GMEDTX	Geriatrics transcription
2GD	General Documentation	4PMED	Paediatrics
2PLMED	Pharmacology and Laboratory	4PMEDTX	Paediatrics transcription
2HMED	Haematology	4Prof	Professionalism Block 4
2HMEDTX	Haematology transcription		
2LMED	Lymphatic Systems	5ATXIII	Additional Transcription III
2LMEDTX	Lymphatic Systems transcription	5PMED	Psychiatry
2CMED	Cardiology	5PMEDTX	Psychiatry transcription
2CMEDTX	Cardiology transcription	5OPMED	Oncology / Pathology
2RMED	Respiratory	5OPMEDTX	Oncology / Pathology transcription
2RMEDTX	Respiratory transcription	5GNMED	Genetics
2Prof	Professionalism Block 2	5GNMEDTX	Genetics transcription
		5IMED	Infectious Diseases
3ATXI	Additional Transcription I	5IMEDTX	Infectious Diseases transcription
3NMED	Neurology	5EMMED	Emergency Medicine
3NMEDTX	Neurology transcription	5EMMEDTX	Emergency Medicine transcription
3OBMED	OB/GYN	5Prof	Professionalism Block 5
3OBMEDTX	OB/GYN transcription		
3GUMED	GU/Male Reproductive	6ATXIV	Additional Transcription IV
3GUMEDTX	GU/Male Reproductive transcription	6RNMED	Radiology and Nuclear Medicine
3GMED	Gastrointestinal	6RNMEDTX	Radiology and Nuclear Medicine
3GMEDTX	Gastrointestinal transcription	transcription	
3Prof	Professionalism Block 3	6GSMED	General Surgical Procedures
		6GSMEDTX	General Surgical Procedures transcription
4ATXII	Additional Transcription II	6OMED	Orthopaedics
4OASSMED	Ophthalmology, Audiology and Special Senses	6OMEDTX	Orthopaedics transcription
4OASSMEDTX	Ophthalmology, Audiology and Special Senses transcription	6Prof	Professionalism Block 6
Educational Pre-requisites: Sixth Form Certificate or equivalent Minimum typing speed of 45 wpm.		Copies on file: <input type="checkbox"/> <input type="checkbox"/>	

MISCELLANEOUS			
How did you hear about this course?			
<i>Website search</i>	<input type="checkbox"/>	<i>Word of mouth</i>	<input type="checkbox"/>
<i>FaceBook</i>	<input type="checkbox"/>	<i>Newspaper advert</i>	<input type="checkbox"/>
Please specify if "Other"		_____	

DOCUMENTATION

To qualify as a domestic student, and so be entitled to the Government tuition subsidy, you must be:

- a citizen of New Zealand (including students from the Cook Islands, Tokelau, or Niue who have New Zealand citizenship) or
- a permanent resident of New Zealand or
- a citizen or permanent resident of Australia residing in New Zealand or
- a citizen of New Zealand (including students from the Cook Islands, Tokelau, or Niue who have New Zealand citizenship).

If you are studying overseas full-time and face-to-face at a campus or delivery site of a New Zealand tertiary education organisation (TEO), you may also qualify as a domestic student if

- you are a permanent resident of New Zealand or a citizen or permanent resident of Australia **and**
- you are studying in an approved country **and**
- the overseas study is level 7 or above on the New Zealand Qualification Framework.

The 29 approved countries are in the Asia, Latin America and Middle East regions. A full list is available on the [Education New Zealand website](#).

You must provide evidence of citizenship or permanent residency. To do so you must produce one of the following:

- Birth certificate with place of birth stated as New Zealand, Cook Islands, Tokelau, or Niue.
- New Zealand passport.
- A certificate of identity.
- A statement of Whakapapa, including date of birth, countersigned by a kaumatua.
- A New Zealand certificate of citizenship.
- Overseas passport with residency stamp.

If you are intending to enrol in your married name you will need to supply a copy of your marriage certificate as well as one of the above documents.

You can bring the original documentation to the enrolment desk, alternatively please provide a certified copy. This means a photocopy, photograph or scanned copy of your original document, signed as being a true and accurate copy by a Justice of the Peace (JP), Barrister or Solicitor, Notary Public, Court Register or Deputy Registrar, Member of Parliament, Land Transport New Zealand, Public trust, or local authority employee designated for this purpose. When a learner is in a remote community and unable to access a person listed in the Oaths and Declarations Act, a member of the New Zealand Police, school principal, minister of religion, or general practitioner is acceptable.

International students must bring their passport with them when they enrol.

Please note that your name, date of birth and residency as entered on this enrolment form 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: <http://nsi.education.govt.nz/home.aspx>

Please list here all documents that you have attached to this enrolment form. Documents should be securely stapled to the back of the form.

DECLARATION

Privacy – Sue’s Computer Training collects and stores information from this form to:

- manage the business of Sue’s Computer Training (including internal reporting, administrative processes and selection of scholarship and prize winners)
- comply with the requirements of the Education Act 1989 and other legislation¹ relating to maintenance of records
- supply information to government agencies and other organisations as set out below.

In signing this enrolment form you authorise such disclosure on the understanding that Sue’s Computer Training will observe the conditions governing the release of information, as set out in the Privacy Act 1993, the Education Act 1989 and other relevant legislation. You may see any information held about you and amend any errors in that information. To do so, contact the Enrolments Officer.

NB: The Privacy Act came into force on 1 July 1993 with the stated aim of protecting the privacy of natural persons. It requires Sue’s Computer Training 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/privacy-act>

Supply of information to government agencies and other organisations

Sue’s Computer Training supplies data collected on this form to government agencies, including:

- the Ministry of Education
- the Education New Zealand
- the New Zealand Qualifications Authority
- the Tertiary Education Commission
- the Ministry of Social Development (in relation to student loans and allowances) and Inland Revenue (student loans)
- Immigration New Zealand and the Ministry of Business, Innovation and Employment (for those who are not New Zealand citizens or permanent residents)
- agencies which support particular students through scholarships, payment of fees or other awards (if you are a recipient of one of these awards).

Those agencies use the data collected from tertiary education organisations to:

- administer the tertiary education system, including allocating funding
- develop policy advice for government
- conduct statistical analysis and research.

Your personal details (name, date of birth and residency) as entered on this form will be included in the National Student Index and may be used in an authorised information matching programme with the New Zealand Birth Register.

The government agencies above may supply data collected on this form to Statistics New Zealand for the purposes of integrating data with data collected by other government agencies, subject to the provisions of the Statistics Act 1975. Integrated data is used for the production of official statistics, to inform policy advice to government and for research purposes.

In handling data supplied by you on this form, the government agencies are required to comply with the provisions of the Privacy Act 1993.

When required by law, Sue’s Computer Training releases information to government agencies such as the New Zealand Police, Department of Justice, Ministry of Social Development, and the Accident Compensation Corporation (ACC).

Information collected on this form may be supplied to other educational organisations for the purpose of verifying academic records.

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. Sue’s Computer Training’s policy on withdrawal and refund of fees may be obtained from the Enrolments Officer.

Rules – In signing this enrolment form you undertake to comply with the published rules and policies of Sue’s Computer Training with regard to attendance, academic integrity and progress, conduct and use of information systems.

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 described above, and I consent to the disclosure of personal information as described above.

Signature (Parent or Guardian if student under 18)

____/____/____
Date

➤ *Please make sure that you sign your enrolment form above* ◀

<i>Documentation</i>	<i>Office Use Only Approved</i>	<i>Entered</i>
_____ ____/____/____	_____ ____/____/____	_____ ____/____/____

¹ This includes legislation governing the maintenance of official records and for accountability for public funding.