



THE CATHOLIC INSTITUTE
OF AOTEAROA NEW ZEALAND
Te Pūtahi Katorika ki Aotearoa

Application and Enrolment Form 2018

Archdiocese of Wellington

Return this form to:

The Registrar
The Catholic Institute
PO Box 12243
Wellington 6144

Phone: 04 819 8381
Email: a.king@tci.ac.nz

Web: www.tci.ac.nz

The Catholic Institute of Aotearoa New Zealand Te Pūtahi Katorika ki Aotearoa (TCI) is registered as a Private Training Establishment by the New Zealand Qualifications Authority under the provisions of the Education Act 1989 and its subsequent amendments.

Please make sure you:

Complete **all** sections of the form, attach any additional documentation and **sign the back page**

A PERSONAL AND CONTACT DETAILS Please print your full legal Name

Given Name(s)	Family Name
Preferred first name	Previous name(s)
Preferred title Ms <input type="checkbox"/> Miss <input type="checkbox"/> Mrs <input type="checkbox"/> Mr <input type="checkbox"/> Other (specify)	
Date of Birth ___/___/_____	Gender Male <input type="checkbox"/> Female <input type="checkbox"/>
National Student Number (if known)	_____ - _____ - _____
Permanent/Home Address	Invoice Address - If your fees (excluding any scholarships) are being paid by a school or parish, etc, please enter their name and address. If this section is not filled in, you will be responsible for the invoice.
Post Code	Post Code
Phone Mobile Email	Postal Address (if different from either above addresses) Post Code

If you have previously studied at TCI (formerly Wellington Catholic Education Centre or Catholic Institute of Theology in Auckland), please state the year(s) _____

B CITIZENSHIP AND RESIDENCY You MUST supply evidence of residency status or citizenship

Tick which box describes your citizenship: New Zealand Citizen Australian Citizen Other

If "Other" please specify your country of citizenship _____

Do you have New Zealand Permanent Residency Status or Australian Permanent Residency Status ?

During your enrolment in this qualification you must be resident in New Zealand.

Ethnicity: What ethnic group(s) do you belong to? You may tick up to three boxes which apply to you

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

If you identified as New Zealand Māori, what is the name of your iwi and rohe (iwi home area)? You may enter more than one iwi.

Iwi 1
Iwi 2
Iwi 3

Rohe 1
Rohe 2
Rohe 3

C ACADEMIC INFORMATION

Secondary School: What was the name of the last **Secondary School** you attended? State "overseas" if applicable. *Secondary School Name* _____

City/Region _____ What was your last year at secondary school?

What is the highest level of achievement you hold from a secondary school? Tick only one box.

<i>No formal secondary qualifications</i>	<input type="checkbox"/> 00	<i>NCEA Level 3 or Bursary or Scholarship</i>	<input type="checkbox"/> 15
<i>14 or more credits at any level</i>	<input type="checkbox"/> 11	<i>Overseas qualification (includes International Baccalaureate & Cambridge Exams) *</i>	<input type="checkbox"/> 09
<i>NCEA Level 1 or School Certificate</i>	<input type="checkbox"/> 12	<i>Other *</i>	<input type="checkbox"/> 98
<i>NCEA Level 2 or 6th Form Certificate</i>	<input type="checkbox"/> 13	<i>Not known</i>	<input type="checkbox"/> 99
<i>University Entrance</i>	<input type="checkbox"/> 14		

Please specify if "Overseas qualification" or "Other" _____

Tertiary Study: Will this be the **first** year you have ever enrolled in a University, Polytechnic, College of Education, Private Training Establishment or Wānanga, either in New Zealand or overseas since leaving school? Do not include enrolments in STAR, community or hobby classes. Yes No

If you answered "No", please enter the year of your **first** enrolment _____

What is the highest level of study you have completed since leaving school?

Name of qualification: _____

At which institution did you study the qualification: _____

What year did you finish studying for the qualification: _____

Prior Activity: What was your MAIN activity or occupation in New Zealand at 1 October 2017? You may tick only **one** box.

<i>Secondary school student</i>	<input type="checkbox"/> 01	<i>Polytechnic student</i>	<input type="checkbox"/> 06
<i>Non-employed or beneficiary (excluding retired)</i>	<input type="checkbox"/> 02	<i>House-person or retired</i>	<input type="checkbox"/> 08
<i>Wage or salary worker</i>	<input type="checkbox"/> 03	<i>Overseas (irrespective of occupation)</i>	<input type="checkbox"/> 09
<i>Self-employed</i>	<input type="checkbox"/> 04	<i>Private training establishment student</i>	<input type="checkbox"/> 11
<i>University student</i>	<input type="checkbox"/> 05	<i>Wānanga student</i>	<input type="checkbox"/> 12

Disability: Do you live with the effects of significant injury, long-term illness, or disability? If "Yes", how would you describe your impairment, disability, or long-term medical condition? The information you supply is confidential. Yes No

Emergency Contact phone no.

Name
Phone No.

Relationship to you

D DOCUMENTATION

To qualify as a **domestic student** 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. **You must provide evidence of citizenship or permanent residency** and, 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 or Australia.
- New Zealand or Australian passport.
- A statement of Whakapapa, including date of birth, countersigned by a kaumatua.
- Certificate of citizenship or letter of confirmation.
- Overseas passport with permanent residency stamp.

You can bring the original documentation to TCI, alternatively please provide a **certified** copy. This means a photocopy of your original document, signed as being a true and accurate copy by a Justice of the Peace, Barrister or Solicitor, Notary Public, Court Registrar 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.

TCI does not currently accept international students.

Please note that your name, date of birth and residency as entered on this enrolment form will be included in the National Student Index.

E ENROLMENT - Contact your site co-ordinator in each diocese for educational pastoral guidance. (Refer Prospectus for contacts).

QUALIFICATION – Indicate which qualification you are applying for:

NZ Certificate in Christian Studies – Religious Education

NZ Certificate in Christian Studies – Christian Ministry

Certificate of Personal Interest

NZ Diploma in Christian Studies - Christian Leadership

NZ Diploma in Christian Studies - Religious Education

NZ Diploma in Christian Studies - Theological Studies

NZ Diploma in Christian Studies - Pastoral Ministry

If you are enrolling in the NZDCS please provide evidence that you have completed a NZQA level 5 qualification in this field, (eg. Certificate in Catechetical Studies, Certificate in Catholic Youth Ministry, etc), which is the pre-requisite for entrance into this diploma.

What year do you expect to complete your current qualification at TCI _____

COURSES FOR 2018

Please enter the individual papers for which you wish to enrol in 2018. State exact start dates and teaching site code (see example below). If you are studying through Distance Education enter 98 as your site code.

Course Code	Course Title	Course Start Date	Teaching Site	TCI Office Use Only
eg SC501	eg Understanding the Old Testament (Example only)	eg 1 st Feb	eg 01	

Site Codes:	Auckland 09	Hamilton 18	Palmerston Nth 14	Wellington 01
	Christchurch 07	Timaru 15	Greymouth 16	Dunedin 06
				Distance Learning 98

If you are enrolling in the NZ Certificate in Christian Studies – Religious Education at TCI while concurrently enrolled at a teacher training programme at a college of education:

What is the final year of teacher training? _____

Which teacher training qualification are you enrolled in? Primary Secondary

Which teacher training establishment are you enrolled at?

Massey University Institute of Education University of Waikato Faculty of Education

University of Canterbury College of Education Victoria University of Wellington Faculty of Education

Eastern Institute of Technology University of Otago College of Education

Other, please state _____

F CHECKLIST - Have you:

- Answered every question on this form
- Selected the course and qualification you wish to enrol in
- Attached certified proof of NZ or Australian citizenship or permanent residency
- Signed the declaration at the end of the form?**

This enrolment cannot be processed until all the questions have been answered.

List all documents you have attached to this form. Staple documents securely to the back of this form. Please ensure that your documents match your current name.

G DECLARATION

Privacy – The Catholic Institute of Aotearoa New Zealand Te Pūhahi Katorika ki Aotearoa (TCI) collects and stores information from this form to:

- Manage the business of TCI (including internal reporting, administrative processes and selection of scholarship and prize winners).
- Comply with the requirements of the Education Act 1989 and other legislation 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 TCI will observe the general 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 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 TCI to collect, hold, handle, use and disclose personal information in accordance with the twelve information privacy principles in the Act. <https://www.privacy.org.nz/the-privacy-act-and-codes/privacy-act-and-codes-introduction/>

Supply of information to government agencies and other organisations

TCI supplies data collected on this form to government agencies, including:

- the Ministry of Education
- the New Zealand Qualifications Authority
- the Tertiary Education Commission
- the Ministry of Social Development (in relation to student loans and allowances)

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.

TCI may add your personal details (name, date of birth and residency) to the National Student Index, which is managed by the Ministry of Education.

The Ministry of Education 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.

When required by law, TCI 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. TCI’s policy on withdrawal and refund of fees is included in the Disclosure of Information to Students and part of the enrolment information.

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

In addition TCI is asking students for their consent to release names and academic information to Catholic diocesan offices for the purposes of using the data to:

- Administer records for the Catholic schools Certification, conduct research/analysis required for planning PD, resources and needs of schools and parishes.

Consent is also requested to survey relevant employers to determine whether our graduate outcomes are fit for purpose.

Declaration

I acknowledge that I have received and read the information entitled **Disclosure of Information to Students 2018** as required by section 234B of the Education Act prior to my enrolment at TCI.

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 _____ **Date** ____/____/____

Office use only	_____ Signature on behalf of TCI	_____ Name	____/____/____ Date
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