KIA ORA! Thank you for choosing to study with Nelson Marlborough Institute of Technology (NMIT)

International Application/Enrolment Form

Please complete ALL sections, in English, by printing in CAPITAL LETTERS. Scan and email the application form and certified copies of all required documents to: international@nmit.ac.nz or mail to the address at the end of this form.

| Personal detai | ls | | | | |
|---|--|-----------------|------------------|--|--|
| Surname | | Title | Mr Mrs Miss Ms | | |
| First Name | Other title, please state below | | | | |
| Middle Names | | | | | |
| Preferred Name | | Gender | M F | | |
| Previous Surname if different | | Date of Birth | | | |
| Passport Number | | Issuing Country | | | |
| Passport Expiry Date | | NSI Number | N/A | | |
| Home Address Results will be sent to your home address, unless otherwise advised | | Postcode | | | |
| Mobile Telephone Number | | Telephone Numb | er | | |
| Email (please write in caps) | | | | | |
| WHO SHOULD WE CONTACT | N CASE OF EMERGENCY? | | | | |
| Emergency Contact Person | | Relationship | | | |
| Emergency Contact Number | | Email | | | |
| Agent Details (| (if applicable) Kunal Anshuman | Agent Stamp | | | |
| Company Name | Springdale India | | | | |
| Address | 529, Mastermind 4, Royal Palms, Aarey Colony, Goregaon E, Mumbai, India Postcode 400 065 | | SPRINGDALE INDIA | | |
| Mobile Telephone Number | +91 - 98927 25375 | Telephone Numb | er | | |
| Fmail | kunal.anshuman@springdaleindia.com | | | | |



| Visa histo | NEV/ | | | | | |
|---|-------------------------|---|-----------------------------|--------------------------------|---------------|--------------------|
| | • | onero en la la co | J | . 0 | | |
| Have you ever bee | n refused a visa/per | mit to visit, work, sti | udy or reside in any coun | ry (| | |
| | No | | | | | |
| If yes, please attac | h documentation. | | | | | |
| Have you ever bee | n deported from, or | overstayed a visa in | any country? | | | |
| Yes | No | | | | | |
| If yes, please attac | h documentation. | | | | | |
| | | | | | | |
| Programi | me of stud | ly | | | | |
| | following qualification | • | | | | |
| Programme Name | | | | | | |
| Start Date | Month | | | 'ear | | |
| Venue | Nelson | Marlborough 📗 | Woodbourne | | | |
| If applying for Engl | ish Language select i | ntake date (please | refer to nmit.ac.nz for Eng | lish Language | intake dates) | : |
| Intake Date | | | 1 | lumber of wee | ks of study | |
| | | | | | | |
| | | | d tertiary academic trans | cripts and you Level Country | | |
| ENGLISH LANGUA | GE PROFICIENCY | | | | | |
| Please include cert | ified copies of your E | inglish Language Tes | st Results and/or English I | anguage qual | ifications. | 7 |
| IELTS | | Overall Score | | | | Date of Assessment |
| TOEFL | | Overall Score | | | | Date of Assessment |
| PTE | | Overall Score | | | | Date of Assessment |
| OET | | Overall Score | | | | Date of Assessment |
| Study Support The following inform Do you live with the | nation is confidential | the following supports Accessibility and is used for stati | ort staff? | us to provide ent? Ye | | uired |
| | | | | | | |

Medical and travel insurance

The New Zealand Ministry of Education, through the Code of Practice for the Pastoral Care of International Students, requires that all International Students must have appropriate medical and travel insurance for the duration of their planned study in New Zealand. For more information please visit minedu.govt.nz.

NMIT will automatically arrange insurance coverage for all students. Students can choose their own insurance company, however it must comply with the minimum standards required by the Code of Practice for the Pastoral Care of International students. If you arrange your own insurance cover, you must supply your Certificate of Insurance and Schedule of Cover, in English, to the Information and Enrolment Centre. Once the insurance policy is evaluated and confirmed as meeting the minimum standards required by the Code of Practice for Pastoral Care the policy taken out by NMIT on behalf of the student will be cancelled with the fees refunded to the student. Please be aware that if you do not provide a satisfactory insurance policy, you will be required to take out a default policy prior to commencing the study programme.

NMIT has arrangements with Marsh Ltd (in association with Vero) a New Zealand based provider who has specific policies for International Students. The policy is called Studentsafe. More information about Studentsafe can be found by following this link on the NMIT website at nmit.ac.nz/international/helpfuladvice. Once we receive payment of the insurance fee, your insurance will be arranged. The commencement date of your policy will be set to the date you depart for New Zealand.

| date you depart for New Zealand. |
|---|
| I would like NMIT's insurance cover Yes No Option: Single Couple Family |
| Declaration |
| The Nelson Marlborough Institute of Technology (NMIT) has agreed to observe and be bound by the Code of Practice for the Pastoral Care of International Students published by the New Zealand Ministry of Education. Copies of the code are available by request from NMIT or from the New Zealand Ministry of Education website at minedu.govt.nz. |
| I agree that if the International Student Advisor has concerns regarding my welfare, safety or behaviour, after discussing them with me they can contact my parents, guardians or educational agent to discuss appropriate courses of action. |
| I agree to abide by the conditions described above, and I consent to the disclosure of personal information as described above. |
| I understand that if I have supplied false information or do not comply with the rules and regulations of NMIT, my Offer of Place may be cancelled |
| I have read and understood the International Student Fees, Charges and Refunds conditions in the International Prospectus. |
| I have read and understood the above and I confirm that to the best of my knowledge all the information supplied on, and with, this application form is true and correct. |
| (print name) confirm I have read and completed this form mysel |
| |
| Signature Date |
| Parent or guardian's signature if applicant is under 18 years of age: |
| Signature Date |

Application checklist Your application will be processed ONLY when we have received all required documentation. PLEASE use this checklist to ensure you have included certified copies of all items. Thank you. Please ensure you have completed all the required sections of this form. (Please do not send original documents - send certified copies only). Have you included: Photocopy of your passport Certified English translations of your academic records, including your academic transcripts for both secondary and tertiary study and a copy of your final award for your diploma or degree, and other qualifications (as applicable) Certified copy of an IELTS, TOEFL, PTE or OET result sheet, or other proof of English proficiency References, portfolio or any other additional information if required, for specific programme entry Signed the Declaration?

Application submission

Email your scanned and completed application form including scanned copies of all required documentation to: international@nmit.ac.nz

OR mail it to the postal address below:

Nelson Marlborough Institute of Technology

International Information and Enrolments Private Bag 19, Nelson 7042 New Zealand

Telephone +64 3 546 9175 | **Fax** +64 3 546 3325 | **Email** international@nmit.ac.nz

Thank you We look forward to welcoming you to NMIT soon.

| FOR OFFICE USE ONLY Signature (Enrolments) | |
|--|--|
| Date | |

If you have a query regarding your application, we are happy to help. Please contact us

Phone +64 3 546 9175 Fax +64 3 546 3325

Email international enmit.ac.nz inmit.ac.nz



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International Application/Enrolment Form

Please complete ALL sections, in English, by printing in CAPITAL LETTERS. Scan and email the application form and certified copies of all required documents to: internationalenmit.ac.nz or mail to the address at the end of this form.

| Personal detai | s | | | | |
|---|------------------------------------|--------------------|------------------|--|--|
| Surname | OPUK | Title | Mr Mrs Miss Ms | | |
| First Name | PE | Other title, pleas | e state below | | |
| Middle Names | CHARLES | | | | |
| Preferred Name | PE | Gender | V M F | | |
| Previous Surname if different | | Date of Birth | 4, OCTOBER 1988 | | |
| Passport Number | AD9285832 | Issuing Country | NIGERIA | | |
| Passport Expiry Date | 26, APRIL 2023 | NSI Number | N/A | | |
| Home Address | STREET, AER | LOPLANE DR | PORT-HARCOURT, | | |
| Results will be sent to your home address, unless | NIGERIA. | | | | |
| otherwise advised | | Postcode | 500211 | | |
| Mobile Telephone Number | +2348071485 | | | | |
| Email (please write in caps) | @GMAIL.COM | | | | |
| WHO SHOULD WE CONTACT | IN CASE OF EMERGENCY? | | | | |
| Emergency Contact Person | CHARLES | Relationship | BROTHER | | |
| Emergency Contact Number | +2348034828 | Email | T @ amail com | | |
| Agent Details | (if applicable) | | | | |
| Counsellor Name | Kunal Anshuman | Agent Stamp | | | |
| Company Name | Springdale India | | | | |
| Address | 529, Mastermind 4, | | SPRINGDALE INDIA | | |
| | Royal Palms, Aarey Colony, | | SPRINGDALE INDIA | | |
| | Goregaon E, Mumbai, India | | | | |
| | Postcode 400 065 | | | | |
| Mobile Telephone Number | +91 - 98927 25375 | Telephone Num | ber | | |
| Email | kunal.anshuman@springdaleindia.com | | | | |



| Visa histo | ory | | | | |
|---|--|---------------------------------------|--|-------------------------|--|
| Have you ever been refused a visa/permit to visit, work, study or reside in any country? | | | | | |
| Yes V | | , | | | |
| If yes, please attac | | | | | |
| Have you ever bee | on deported from, or overstayed a visa in any country? | | | | |
| Yes 🗸 | | | | | |
| If yes, please attac | h documentation. | | | | |
| | | | | | |
| Program | me of study | | | | |
| I wish to study the | following qualification: | | | | |
| Programme Name | MEC 3 | | | | |
| Start Date | Month AUGUST | Year | 20 | 20 | |
| Venue | Nelson Marlborough Woodbourne | | | | |
| If applying for Engl | ish Language select intake date (please refer to nmit.ac.nz fo | r English Lo | anguage into | ake dates): | |
| Intake Date | | Numbe | er of weeks | of study | |
| | | | | | |
| Ad: | lifiti | | | | |
| Academic qualifications | | | | | |
| Please include cert | | transcripts | and your fi | inal award | |
| | tified copies of both your secondary and tertiary academic | | | Charles and Charles and | |
| Highest qualification | ified copies of both your secondary and tertiary academic on gained BE MARINE ENGINEER | ING | Level [| Bact | FELOR ENGINFERMS |
| Highest qualification | tified copies of both your secondary and tertiary academic | ING | | Bact | FELOR ENGINFERMS |
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Medical and travel insurance

Signature

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| date you depart for New Zealana. | | | |
|---|---|---|--|
| I would like NMIT's insurance cover, | Yes No Option: | Single Couple Family | |
| Declaration | | | |
| The Nelson Marlborough Institute of Students published by the New Zeo of Education website at minedu.go | Technology (NMIT) has agreed to observe aland Ministry of Education. Copies of the covt.nz. | and be bound by the Code of Practice fo ode are available by request from NMIT | r the Pastoral Care of International or from the New Zealand Ministry |
| I agree that if the Internation contact my parents, guardia | nal Student Advisor has concerns regarding uns or educational agent to discuss appropr | my welfare, safety or behaviour, after distance courses of action. | scussing them with me they can |
| I agree to abide by the cond | ditions described above, and I consent to th | ne disclosure of personal information as a | lescribed above. |
| I understand that if I have su | pplied false information or do not comply w | with the rules and regulations of NMIT, my | Offer of Place may be cancelled. |
| I have read and understood | the International Student Fees, Charges and | d Refunds conditions in the International | Prospectus. |
| | the above and I confirm that to the best of m | | |
| OPU | CHARLES | (print name) confirm I have rea | ad and completed this form myself. |
| | | | |
| Signature Charles | | | 04-2020 |
| Parent or guardian's | signature if applicant is under 18 years of a | | |
| Signature | water to provide the second second second | Date | |

Application checklist

Your application will be processed ONLY when we have received all required documentation.

PLEASE use this checklist to ensure you have included certified copies of all items. Thank you.

Please ensure you have completed all the required sections of this form. (Please do not send original documents - send certified copies only). Have you included:



Photocopy of your passport

Certified English translations of your academic records, including your academic transcripts for both secondary and tertiary study and a copy of your final award for your diploma or degree, and other qualifications (as applicable)

Certified copy of an IELTS, TOEFL, PTE or OET result sheet, or other proof of English proficiency



New Zealand

References, portfolio or any other additional information if required, for specific programme entry

Signed the Declaration?

Application submission

Email your scanned and completed application form including scanned copies of all required documentation to: internationalenmit.ac.nz

OR mail it to the postal address below:

Nelson Marlborough Institute of Technology International Information and Enrolments Private Bag 19, Nelson 7042

Telephone +64 3 546 9175 | Fax +64 3 546 3325 | Email international enmit.ac.nz

Thank you We look forward to welcoming you to NMIT soon.

| FOR OFFICE USE ONLY Signature (Enrolments) | |
|--|--|
| Date | |

If you have a query regarding your application, we are happy to help. Please contact us

Phone +64 3 546 9175 Fax +64 3 546 3325

Email international enmit.ac.nz | nmit.ac.nz

