



Youth Guarantee YG <input type="checkbox"/>	NSI (Active/Partial) <input type="checkbox"/>	<b>Office Use</b>	
ILN <input type="checkbox"/>	ROA <input type="checkbox"/>		Eligibility confirmed <input type="checkbox"/> _____
Workplace Literacy <input type="checkbox"/>	Qual Check <input type="checkbox"/>		Assessment Tool Results:
Other / ACE <input type="checkbox"/>	Birth Cert (Required) <input type="checkbox"/>		Lit: _____ Num: _____
Letter of Acceptance sent <input type="checkbox"/>	Assessment Tool <input type="checkbox"/>		

Programme Details

Provider Number 9388

Programme/Qual name \_\_\_\_\_ Programme number \_\_\_\_\_ Start Date \_\_\_\_\_ End Date \_\_\_\_\_

Please enter the name/s of the courses/certificates you wish to enrol for in 2016

1 \_\_\_\_\_ 2 \_\_\_\_\_  
 3 \_\_\_\_\_ 4 \_\_\_\_\_

(Staff please refer to attached Student Transcript from Puk-e-Data following enrolment)

Learner Details

Email Address: \_\_\_\_\_ National Student Number (NSI) \_\_\_\_\_

Learner Name

\_\_\_\_\_  
 (First Name) (Middle Name/s) (Full Legal Family Name/s)  
 \_\_\_\_\_  
 (Preferred Name) (Other Name/s known by)

Street Address \_\_\_\_\_

Suburb \_\_\_\_\_ Town/City \_\_\_\_\_ Postal Code \_\_\_\_\_

Contact phone number \_\_\_\_\_ Other contact number \_\_\_\_\_

Date of Birth \_\_\_\_\_ Gender – FEMALE  MALE

Citizenship and Ethnicity

Please tick only one – New Zealand Citizen  Australian Citizen  NZ Permanent Residency Status  Other

If "Other", please specify your country of citizenship \_\_\_\_\_

What ethnic group/s do you identify with or belong to?

1 NZ European/Pakeha <input type="checkbox"/>	7 Tokelauan <input type="checkbox"/>	13 Polish <input type="checkbox"/>	20 Filipino <input type="checkbox"/>	26 Japanese <input type="checkbox"/>
2 NZ Māori <input type="checkbox"/>	8 Fijian <input type="checkbox"/>	14 South Slav <input type="checkbox"/>	21 Cambodian <input type="checkbox"/>	27 Korean <input type="checkbox"/>
3 Samoan <input type="checkbox"/>	9 Other Pacific Peoples <input type="checkbox"/>	15 Italian <input type="checkbox"/>	22 Vietnamese <input type="checkbox"/>	28 Other Asian <input type="checkbox"/>
4 Cook Island Māori <input type="checkbox"/>	10 British/Irish <input type="checkbox"/>	16 German <input type="checkbox"/>	23 Chinese <input type="checkbox"/>	29 Middle Eastern <input type="checkbox"/>
5 Tongan <input type="checkbox"/>	11 Dutch <input type="checkbox"/>	17 Australian <input type="checkbox"/>	24 Indian <input type="checkbox"/>	30 Latin American <input type="checkbox"/>
6 Niuean <input type="checkbox"/>	12 Greek <input type="checkbox"/>	18 Other European <input type="checkbox"/>	25 Sri Lankan <input type="checkbox"/>	31 African <input type="checkbox"/>
		19 Other Southeast Asian <input type="checkbox"/>		32 Other <input type="checkbox"/>

If "Other – Pacific Peoples/European/Asian", please specify \_\_\_\_\_

Iwi – if you identified as New Zealand Māori, what is the name of your Iwi?

Main tribal affiliation \_\_\_\_\_

Other tribal affiliation \_\_\_\_\_

Prior Activity

What was your MAIN activity or occupation in New Zealand at 1 October 2016? Place a tick in one box only.

1 Secondary school student <input type="checkbox"/>	7 Private Training Establishment student <input type="checkbox"/>
2 Non-employed or beneficiary (excluding retired) <input type="checkbox"/>	8 House-person or retired <input type="checkbox"/>
3 Wage or salary worker <input type="checkbox"/>	9 Overseas (irrespective of occupation) <input type="checkbox"/>
4 Self-employed <input type="checkbox"/>	10 Wānanga student <input type="checkbox"/>
5 University Student <input type="checkbox"/>	
6 Polytechnic student <input type="checkbox"/>	

Disability

Do you live with the effects of significant injury, long term illness, or disability? The information you supply is confidential.

Yes  No

If yes, how would you describe your impairment, disability or long term medical problem?

\_\_\_\_\_  
 \_\_\_\_\_

## Eligibility and Qualifications

\* Learners who are 20 years and over at time of applying are not eligible for Youth Guarantee

Have you studied at YMCA Central before? Yes  No

Do you intend to study Part-time  Full-time

Last year at secondary school \_\_\_\_\_ Name of last secondary school attended \_\_\_\_\_

\*\* If the learner is 15 at time of applying for Youth Guarantee, a MoE certificate of exemption must be provided prior to commencement.

What is the highest level of achievement you hold from a secondary school? Please tick only one

- |   |                                    |                          |   |  |                          |   |                         |                          |
|---|------------------------------------|--------------------------|---|--|--------------------------|---|-------------------------|--------------------------|
| 1 | No school qualifications           | <input type="checkbox"/> | 4 | NCEA Level 2 or 6 <sup>th</sup> Form Certificate | <input type="checkbox"/> | 7 | Other                   | <input type="checkbox"/> |
| 2 | 14 or more credits at any level    | <input type="checkbox"/> | 5 | University Entrance                              | <input type="checkbox"/> | 8 | Overseas qualification‡ | <input type="checkbox"/> |
| 3 | NCEA Level 1 or School Certificate | <input type="checkbox"/> | 6 | NCEA Level 3/Bursary/Scholarship                 | <input type="checkbox"/> | 9 | Not known               | <input type="checkbox"/> |

‡ (includes International Baccalaureate and Cambridge Exams)

If "Overseas Qualification" or "Other", please specify \_\_\_\_\_

## Tertiary Study

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

If no, please enter the name of the organisation you studied at and the year of your first enrolment? \_\_\_\_\_

Year first enrolled \_\_\_\_\_

## Documentation

Please note that your name, date of birth and residency as entered on this enrolment 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 on National Student Index please see:

<http://nsi.education.govt.nz/home.aspx>

## Declaration

**Privacy** – YMCA Central collects and stores information from this form to

- manage the business of YMCA Central (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. (This includes legislation governing the maintenance of official records and for accountability for public funding.)
- 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 YMCA Central 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 YMCA Central 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>

Assessment Tool: TEC is collecting information on learner's literacy and numeracy skill levels, the purpose for collecting literacy data is to help you learn and measure your performance and report on your progress to funders.

**Supply of information to government agencies and other organisations:**

YMCA Central 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) 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 who 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, YMCA Central 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.

**Rules** – In signing this enrolment form you undertake to comply with the published rules and policies of YMCA Central with regard to attendance, academic integrity and progress, conduct and use of information systems.

**Learner 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.

Print Name \_\_\_\_\_ Signature \_\_\_\_\_ Date \_\_\_\_\_

### Office Use Only

#### Documentation

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_

#### Approved

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_

#### Entered

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