

Enrolment Form 2025

98 Kerrs Road, Wiri, Auckland 2104
PO Box 97049, Manukau City, Auckland 2241

0800 200 345
info@ignitecolleges.ac.nz

Welcome to Ignite Colleges. Please read the instructions below carefully before you complete this enrolment form.

INSTRUCTIONS

The purpose of this enrolment form is to obtain from you the information we need to enrol you into a qualification or course at our organisation. We also need to collect information from you which is required by government agencies for statistical and registration reasons. Please fill in the form properly by:

- Completing all sections of the form.
- Printing your answers clearly in pen, or by ticking the box that applies for multi-choice questions.
- Signing the form.
- Attaching to the form additional documentation that is required for government funding purposes. A description of the required documentation is provided on page 6 of the form.

A QUALIFICATION

Qualification Name:	New Zealand Certificate in Health and Wellbeing Level 2	Office Use
Qualification Start Date:		
Qualification End Date:		
Have you studied at Ignite Colleges before?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Do you intend to study:	Part time <input checked="" type="checkbox"/>	Full time <input type="checkbox"/>

B PERSONAL DETAILS

Print your full legal name:					
Family Name:					
Given Name(s):					
Preferred first name:					
Previous name(s) known by:					
If you have previously enrolled at this organisation under another name, what was that name?					
Preferred title:	Ms <input type="checkbox"/>	Miss <input type="checkbox"/>	Mrs <input type="checkbox"/>	Mr <input type="checkbox"/>	Other (Specify): SMS: «Client Title»
Date of birth:	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
	day	month	year		
	SMS: «Client DOB»				
Gender:	Male <input type="checkbox"/>	Female <input type="checkbox"/>	Another Gender <input type="checkbox"/>		
	SMS: «Client Gender»				
National Student Number:	<input type="text"/>				
If you know your NSN (National Student Number), please write it here. If you answered Yes to question 2, you MUST fill in this section.	SMS: «Client NSN»				
IRD Number:	<input type="text"/>				
	SMS: «Client IRD Number»				

<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</p> <p><i>Australian Citizen</i> <input type="checkbox"/> AUS</p> <p><i>Other</i> <input type="checkbox"/></p> <p>If "Other",</p> <p>Please specify your Country of Citizenship (For students with dual citizenship, specify the country of citizenship of the passport used to enter New Zealand.):</p> <p>Country of Citizenship: _____</p> <p>SMS: «Client Country of Citizenship»</p> <p>Tick the box if you have New Zealand or Australian Permanent Resident Status:</p> <p>New Zealand Resident Visa Holder <input type="checkbox"/></p> <p>Australian Permanent Resident <input type="checkbox"/></p> <p>SMS: «Client Residential Status»</p>																																		
<p>Please also specify your fee/assistance status.</p>	<ul style="list-style-type: none"> • <i>Domestic Student*</i> <input checked="" type="checkbox"/> 00 • <i>Refugee or protected person, yet to be granted a resident visa; the immediate family^[1], also without a resident visa, of a person with refugee or protected person status; and those who have made a claim to be recognised as a refugee or protected person</i> <input type="checkbox"/> 13 <p>Note: * 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>Ethnicity:</p> <p>What ethnic group(s) do you belong to?</p> <p>You may tick up to six boxes, which apply to you.</p>	<table border="0"> <tr> <td><i>New Zealand European</i> <input type="checkbox"/> 111</td> <td><i>Greek</i> <input type="checkbox"/> 123</td> <td><i>Chinese</i> <input type="checkbox"/> 421</td> </tr> <tr> <td><i>Māori</i> <input type="checkbox"/> 211</td> <td><i>Polish</i> <input type="checkbox"/> 124</td> <td><i>Indian</i> <input type="checkbox"/> 431</td> </tr> <tr> <td><i>Samoan</i> <input type="checkbox"/> 311</td> <td><i>South Slav</i> <input type="checkbox"/> 125</td> <td><i>Sri Lankan</i> <input type="checkbox"/> 441</td> </tr> <tr> <td><i>Cook Islands Maori</i> <input type="checkbox"/> 321</td> <td><i>Italian</i> <input type="checkbox"/> 126</td> <td><i>Japanese</i> <input type="checkbox"/> 442</td> </tr> <tr> <td><i>Tongan</i> <input type="checkbox"/> 331</td> <td><i>German</i> <input type="checkbox"/> 127</td> <td><i>Korean</i> <input type="checkbox"/> 443</td> </tr> <tr> <td><i>Niuean</i> <input type="checkbox"/> 341</td> <td><i>Australian</i> <input type="checkbox"/> 128</td> <td><i>Other Asian</i> <input type="checkbox"/> 444</td> </tr> <tr> <td><i>Tokelauan</i> <input type="checkbox"/> 351</td> <td><i>Other European</i> <input type="checkbox"/> 129</td> <td><i>Middle Eastern</i> <input type="checkbox"/> 511</td> </tr> <tr> <td><i>Fijian</i> <input type="checkbox"/> 361</td> <td><i>Filipino</i> <input type="checkbox"/> 411</td> <td><i>Latin American</i> <input type="checkbox"/> 521</td> </tr> <tr> <td><i>Other Pacific Peoples</i> <input type="checkbox"/> 371</td> <td><i>Cambodian</i> <input type="checkbox"/> 412</td> <td><i>African</i> <input type="checkbox"/> 531</td> </tr> <tr> <td><i>British and Irish</i> <input type="checkbox"/> 121</td> <td><i>Vietnamese</i> <input type="checkbox"/> 413</td> <td><i>Other Ethnicity</i> <input type="checkbox"/> 611</td> </tr> <tr> <td><i>Dutch</i> <input type="checkbox"/> 122</td> <td><i>Other Southeast Asian</i> <input type="checkbox"/> 414</td> <td><i>Not Stated</i> <input type="checkbox"/> 999</td> </tr> </table> <p>If "Other Pacific Peoples", "Other European", "Other Southeast Asian", "Other Asian" or "Other" please specify what specific ethnicity below.</p> <hr/> <p>SMS:</p>		<i>New Zealand European</i> <input type="checkbox"/> 111	<i>Greek</i> <input type="checkbox"/> 123	<i>Chinese</i> <input type="checkbox"/> 421	<i>Māori</i> <input type="checkbox"/> 211	<i>Polish</i> <input type="checkbox"/> 124	<i>Indian</i> <input type="checkbox"/> 431	<i>Samoan</i> <input type="checkbox"/> 311	<i>South Slav</i> <input type="checkbox"/> 125	<i>Sri Lankan</i> <input type="checkbox"/> 441	<i>Cook Islands Maori</i> <input type="checkbox"/> 321	<i>Italian</i> <input type="checkbox"/> 126	<i>Japanese</i> <input type="checkbox"/> 442	<i>Tongan</i> <input type="checkbox"/> 331	<i>German</i> <input type="checkbox"/> 127	<i>Korean</i> <input type="checkbox"/> 443	<i>Niuean</i> <input type="checkbox"/> 341	<i>Australian</i> <input type="checkbox"/> 128	<i>Other Asian</i> <input type="checkbox"/> 444	<i>Tokelauan</i> <input type="checkbox"/> 351	<i>Other European</i> <input type="checkbox"/> 129	<i>Middle Eastern</i> <input type="checkbox"/> 511	<i>Fijian</i> <input type="checkbox"/> 361	<i>Filipino</i> <input type="checkbox"/> 411	<i>Latin American</i> <input type="checkbox"/> 521	<i>Other Pacific Peoples</i> <input type="checkbox"/> 371	<i>Cambodian</i> <input type="checkbox"/> 412	<i>African</i> <input type="checkbox"/> 531	<i>British and Irish</i> <input type="checkbox"/> 121	<i>Vietnamese</i> <input type="checkbox"/> 413	<i>Other Ethnicity</i> <input type="checkbox"/> 611	<i>Dutch</i> <input type="checkbox"/> 122	<i>Other Southeast Asian</i> <input type="checkbox"/> 414	<i>Not Stated</i> <input type="checkbox"/> 999
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<p>Iwi:</p> <p>If you identified as Māori in the Ethnicity question, what is the name of your Iwi?</p> <p>You may enter up to six Iwi. If you do not know your Iwi, please enter 'Don't Know'.</p> <p>Note: please use the iwi codes published in SDR Manual appendices.</p>	<p><i>Iwi:</i></p> <p>SMS:</p> <p><i>Iwi:</i></p> <p>SMS:</p> <p><i>Iwi:</i></p> <p>SMS:</p>	<p><i>Iwi:</i></p> <p>SMS:</p> <p><i>Iwi:</i></p> <p>SMS:</p> <p><i>Iwi:</i></p> <p>SMS:</p>																																	

¹ 'Immediate family' is used as defined by the Domestic Tertiary Students Notice (2)(c) as including the partner and any child in New Zealand of a person recognised as a refugee or protected person, or if the person recognised is a dependent child, their parents and any siblings in New Zealand. Refer to www.education.govt.nz/our-work/legislation/definition-of-domestic-student/

C ACADEMIC INFORMATION

Secondary School: What was the name of the last secondary school you attended? State "overseas", if applicable.

SMS: «Client Last School Attended»

What was your last year at secondary school?

SMS: «Client Last Year At Scondary School»

What is 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 a number of credits or a New Zealand Certificate at a certain level on the National Qualifications and Credentials Framework. Your NZQA Record of Achievement shows you the standards, credits and qualifications you have achieved. Tick only one box.

No formal secondary qualifications 00

14 or more credits at any level 11

NCEA Level 1 **or** School Certificate 12

NCEA Level 2 **or** 6th Form Certificate 13

University Entrance 14

NCEA Level 3 **or** Bursary **or** Scholarship 15

Overseas qualification (includes International Baccalaureate & Cambridge Exams) 09

Other 98

Not Known 99

SMS: «Client Secondary Qualification»

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

Tertiary Study: Will this be the first time you have ever enrolled in a University, Subsidiaries of Te Pūkenga (*Institutes of Technology or Polytechnic*), 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.

No Yes

If you answered "No", please enter the name of the organisation you studied at and the year of your first enrolment:

TEO Name: _____

Year: **SMS: «Client First Year Formal Education»**

What year do you expect to complete the academic requirements of your course/s in order to graduate with your qualification?

Year: **SMS: «COR End Date»**

Prior Achievement: 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.

Tertiary education organisation	Qualification	Month and year of completion

D DOCUMENTATION

To be treated 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

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 Qualifications and Credentials 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.
- Australian 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.

You can bring the original documentation to one of our sites, where they can be verified by approved employees (please contact the site to confirm this before you visit), or 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 (not to be older than 3 months) 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, an NZ Police Station, 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.

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 programmes with official government information such as the New Zealand Birth Register, to verify the information provided.

On occasion, more than one National Student Number is created for an individual. The Ministry of Education regularly monitors the quality of the National Student Index and, when duplicates or errors are discovered, it works with providers and government agencies to merge duplicates and correct errors. This may require the documentation you provide at enrolment being shared between agencies authorised to access the National Student Index to make these corrections.

For further information please see: [National Student Number \(NSN\): for schools – Education in New Zealand](#)

E BANK ACCOUNT

Only applicable to Youth Guarantee students: Proof of bank account is required

F CONTACT DETAILS		
Home Address and contact details: Please check via NZ Post website https://www.nzpost.co.nz/tools/address-postcode-finder	<u>Home Address</u> Street Address: Suburb: Town/City: Post Code:	<u>Postal Address</u> <i>(if different from home address)</i> Street Address: Suburb: Town/City: Post Code:
	Phone: () SMS: «Client Home Phone»	Mobile: SMS: «Client Mobile»:
	Email: SMS: «CLIENT EMAIL»	
Address While Studying:	Address while Studying <i>(if different from home address)</i> Street Address: Suburb: Town/City: Post Code:	
Next of Kin:	Name: SMS: «Client NoK First Name» «Client NoK Last Name»	Relationship:
	Phone: () SMS: «Client NoK Phone Home»	Mobile: SMS: «Client NoK Mobile»
	Email: SMS: «Client NoK Email»	

DECLARATION

Privacy – Ignite Colleges collects and stores information from this form to:

- manage the business of Ignite Colleges (including internal reporting, administrative processes and selection of scholarship and prize winners)
- comply with the requirements of the [Education and Training Act 2020](#) and other legislation^[2] relating to maintenance of records
- supply information to government agencies and other organisations as set out below.

In signing this enrolment form you authorise the disclosure of your personal information on the understanding that Ignite Colleges will comply with the legal requirements in relation to the use and disclosure of personal information, as set out in the Privacy Act 2020, the Education and Training Act 2020 and other relevant legislation. You are entitled to see any information that Ignite Colleges holds about you and request to correct any errors in that information. To do so, contact the Enrolments Officer.

NB: The Privacy Act 2020 has the stated aim of protecting the privacy of individuals. It also governs the collection, use, storage and disclosure of personal information.

The Privacy Act requires Ignite Colleges to collect, hold, handle, use and disclose personal information in accordance with the twelve information privacy principles in the Act.

<https://www.legislation.govt.nz/act/public/2020/0031/latest/LMS23223.html>

Supply of information to government agencies and other organisations

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

- the Ministry of Education
- 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 (for those who are not New Zealand citizens or permanent residents) and the Ministry of Business, Innovation and Employment
- 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 Ignite Colleges to:

- administer the tertiary education system, including allocating funding and the administration of the Fees-Free initiatives
- 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 2022. 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 2020.

Data storage – data collected from tertiary education organisations is now stored in the Cloud. Student enrolment and course and qualification completion data is stored in a Microsoft datastore based in Sydney, Australia.

When required by law, Ignite Colleges 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.

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

Withdrawals – applications for withdrawals from a Programme must be made in writing to Ignite Colleges, by either sending it to your Tutor or emailing info@ignitecolleges.ac.nz

Refunds – if you withdraw from the programme up to 8th day of sign-up, a full refund of the programme fees paid less admin fees will be refunded. After the 8th day, you may be entitled to a partial refund, please refer to Ignite Colleges policy on withdrawals and refund policy which may be obtained from the Enrolments Officer.

You are also giving permission to Ignite Colleges to use your image on photos, brochures and other promotional material. This material may be in electronic or hard format.

Should you object sign here _____

² This includes legislation governing the maintenance of official records and for accountability for public funding.

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 Date

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

Office Use Only

SMS = Student Management System

Information entered in the SMS will merge onto the Enrolment Form & Learner Contract. If there are fields which has been missed, the student will need to fill in the appropriate answers and/or tick the appropriate boxes. Enrolment Officer will then re-enter into the SMS.

Learner Contract 2025

STUDENT NAME:	
QUALIFICATION TITLE:	

All sections pertaining to Ignite Colleges general requirements and my chosen programme have been explained to me. I acknowledge that by signing below, I agree to be bound by the conditions, rules and regulations of Ignite Colleges, as outlined in the Student Handbook.

(INITIAL HERE)

I have read and understood all sections including Resolving Issues, Refund Policy, Student Fee Protection, Rules and Regulations, Disciplinary Process and Ignite Colleges Policy on Cheating

(INITIAL HERE)

Details of course costs have been provided to me.

(INITIAL HERE)

I will not under any circumstances seek to hold Ignite Colleges responsible, accountable and/or liable for any loss, injury or damage (including in each case direct, indirect and/or consequential loss, injury or damage and howsoever arising) whether to myself, to others or to property arising from or related to participation in off-site activities. I will at all times obey the instructions of Ignite Colleges staff and/or the person responsible for the venue and/or activities and will, whether requested to or not, make full disclosure of any medical condition or other information which may be relevant to participation in offsite activities.

(INITIAL HERE)

COMPULSORY: Covid vaccination for students enrolled in Health and Wellbeing or Cookery Programmes
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I have been advised by Ignite Colleges that their workplace partners will only accept vaccinated students to complete placements at their facilities.

I understand that I have to be fully vaccinated by the time I commence the mandatory work placement required for the programme I am enrolled in. I will not gain my qualification award if I do not comply with this requirement.

(INITIAL HERE)

STUDENT NAME	
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STUDENT SIGNATURE	Date _____
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If you are under 18 years of age this form must also be signed by a parent or guardian.

PARENT / GUARDIAN NAME	
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PARENT / GUARDIAN SIGNATURE	Date _____
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Workplace Declaration Form

(The declaration form can be signed by the Site Manager / Supervisor / Team Leader / Regional Nurse)

This declaration confirms that:

- _____ is currently employed on a part-time / full-time contract [please circle correct option]
- this study is supported by the employer as part of their employment.
- during this 20-week programme, a minimum of 80 hours of work will be completed towards this qualification.
- a team leader/supervisor/registered nurse/facility manager/designated person at the workplace will complete the required verification documents provided by Ignite Colleges. These documents verify practical skills competence and will be provided by Ignite Colleges at the appropriate time.

HEALTHCARE FACILITY

Staff Name:			
Staff Signature		Date:	
Designation:			
Organisation:			
Contact number:			
Email:			

STUDENT

Student Name:			
Student Signature:		Date:	

IGNITE COLLEGES

Staff Name:			
Staff Signature:		Date:	

Please note:

In the rare instance where an employer originally authorized this study for an employee who is on a work permit and subsequently withdraws support during the programme, including withdrawing support for verification of the student's practical skills, the student will no longer be able to complete this programme. Any unit standards completed by the student prior to termination will be recorded on the student's NZQA Record of Achievement.

If you are changing employment during the course, please inform us about the change. You would also need the workplace declaration form signed by yourself, new employer and Ignite colleges to verify endorsement of support and authenticity of your practical competency. Failing to do so could result in non-confirmation of your competency for practical tasks and therefore not gaining the qualification.

«TableEnd:NZ_General_Main»