



# WHITECLIFFE

## COLLEGE OF ARTS & DESIGN

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TE WHARE TAKIURA O WIKIRIWHI

**APPLICATION FORM**

**INTERNATIONAL STUDENTS**

**UNDERGRADUATE PROGRAMMES**

**2010 / 2011**

**PARNELL // AUCKLAND // NEW ZEALAND**

**Please read the following instructions carefully before you complete this application form.**

## INSTRUCTIONS

The purpose of this application form is to obtain from you the information we need to enrol you into a programme at our Institution. We also need to collect information from you required by the Ministry of Education and other Government agencies for statistical and registration reasons. Please complete the form properly by:

- Completing all applicable sections of the form.
- Printing your answers clearly in pen, or ticking the box that applies for multi-choice questions and signing the form.
- Attaching to the form additional documentation that is required for Ministry of Education funding purposes. A description of the required documentation is provided on page eight of this form.
- Attaching the appropriate Application Fee: \$225.00 for International Student Applicants (non-refundable).

If you have any questions concerning this application form please contact Whitecliffe's Admissions Office (contact details are on the cover sheet).

**IMPORTANT:** Information detailing tuition fees are on Page 6 of this application form.

## PERSONAL DETAILS

1. Have you studied at Whitecliffe before?  Yes  No Whitecliffe Student ID
2. Legal Family Name
3. Legal First Names
4. Previous Name
5. Gender: Male  Female
6. Date of Birth:
7. Preferred Name
8. Preferred Title:  Ms  Miss  Mrs  Mr Other (Specify):

**Note: You must attach a certified copy of your birth certificate or passport.**

**Office Use: BC sighted.**

### NSI Number

National Student Index number (NSN), please write it here:

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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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 please see <http://www.nsi.govt.nz/ima>

**10a. Certificate of Arts & Design (Foundation) with English Language Assistance – February intake only**

February 2010                       February 2011

I would like to complete my English Language tuition at:     Fern English Academy     AIS ST Helens

**10b. Certificate of Arts & Design (Foundation) - July Intake only**

July 2010 (20 weeks)                       July 2011 (20 weeks)

**11. Bachelor of Fine Arts Degree Programme**

I am applying for admission to the following intake:

Year One, February 2010                       Year One, February 2011

**Note:** At the end of each successfully completed year within the BFA students gain a qualification with a Certificate of Arts and Design for Year One; Diploma of Arts and Design for Year Two; and Diploma of Arts and Design (Professional) after Year Three; before completing a Bachelor of Fine Arts degree after Year Four.

**12. Bachelor of Fine Arts Degree – Advanced Standing**

I wish to apply for advanced standing into the BFA programme based on my prior study.     Yes

Please tick the year level you are applying for:     Year Two     Year Three     Year Four

12a. Which major or specialist area are you interested in? Please tick your area/s of interest.

Fine Arts     Photography     Fashion Design     Video/Film     Graphic Design     Undecided

**Transfer of Credit**

12b. Do you wish to apply for credit for courses completed at another tertiary institution?     Yes     No    If yes, list below.

**(Please attach a copy of Academic Record/Transcript)**

Year	Educational Institution	Qualification, course or NZQA unit

## ADDRESSES

**Note: Please advise Whitecliffe of all changes to your contact details as they occur.**

**International students: Please write your full overseas address and contact details clearly in English.**

13. **A. Permanent Home Address**

Post Code (compulsory):

**B. Address during Term**

Post Code (compulsory):

**Note: Please be aware that if a postal code is not included in your address, you will not receive your transcripts.**

Telephone

Telephone

Cellphone

Email Address

To which address do you wish correspondence to be sent ?

**A**

**B**

**C. In an emergency, whom do you want us to contact?**

Name of Person

Relationship

Contact Number

## CITIZENSHIP

14. Please tick the box that best describes your citizenship or permanent residency.

New Zealand Citizen  
(Includes Niuean, Cook Island and Tokelauan  
Citizens)

International Student studying on a Visa\*  
Expiry date of student visa /  
permit: \_\_\_\_\_  
(NB: You must apply for a renewal of Visa one month out from  
expiry)

New Zealand Permanent Resident

Other (please specify below)

Australian Citizen

\_\_\_\_\_

Please specify the country of the passport used to enter New Zealand

\*If you are represented by an agent please have your agent complete the International Agents section on page 5.

## ETHNIC IDENTITY

15. To which of the following ethnic groups do you consider you belong? (You may tick up to three groups).

<input type="checkbox"/>	European/NZ European or Pakeha	<input type="checkbox"/>	Fijian	<input type="checkbox"/>	Italian
<input type="checkbox"/>	Cook Island Māori	<input type="checkbox"/>	Chinese	<input type="checkbox"/>	Brazilian
<input type="checkbox"/>	Tongan	<input type="checkbox"/>	Korean	<input type="checkbox"/>	French
<input type="checkbox"/>	New Zealand Māori	<input type="checkbox"/>	Japanese	<input type="checkbox"/>	British
<input type="checkbox"/>	Samoan	<input type="checkbox"/>	Indian	<input type="checkbox"/>	Other (please specify)
<input type="checkbox"/>	Niuean	<input type="checkbox"/>	African		_____

## SECONDARY SCHOOL

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

17. What was your last year of attendance at secondary school? \_\_\_\_\_

18. What is the highest academic award you hold from a secondary school? (Tick only one box).

<input type="checkbox"/>	No secondary qualification	<input type="checkbox"/>	Entrance Qualification
<input type="checkbox"/>	NCEA Level 1	<input type="checkbox"/>	Higher School Certificate (from Bursary or Scholarship exams)
<input type="checkbox"/>	NCEA Level 2	<input type="checkbox"/>	B Bursary
<input type="checkbox"/>	NCEA Level 3	<input type="checkbox"/>	A Bursary
<input type="checkbox"/>	Overseas Award	<input type="checkbox"/>	Scholarship
<input type="checkbox"/>	School Certificate (one or more subjects)	<input type="checkbox"/>	None of the above
<input type="checkbox"/>	Sixth Form Certificate	<input type="checkbox"/>	University Entrance (prior to 1986)

19. What year did you obtain your highest secondary academic award? \_\_\_\_\_

**FIRST YEAR OF TERTIARY STUDY**

20. 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 (Go to Question 24)       No

If you answered "No", please enter the year of your first enrolment. \_\_\_\_\_

21. If you answered "No", please list Institution/s and year/s of study:

Institution	Course of Study	From	To

22. What tertiary qualification do you hold?

- |                          |  |                          |                                   |
|--------------------------|--|--------------------------|-----------------------------------|
| <input type="checkbox"/> | No tertiary qualification                        | <input type="checkbox"/> | Undergraduate Diploma/Certificate |
| <input type="checkbox"/> | NZ Polytechnic Certificate/Diploma               | <input type="checkbox"/> | Bachelor Degree                   |
| <input type="checkbox"/> | Vocational Qualifications e.g. Trade Certificate | <input type="checkbox"/> | Postgraduate Degree               |
| <input type="checkbox"/> | Diploma, Technicians Certificate                 | <input type="checkbox"/> | Other (please specify) _____      |

Complete this section if you have other qualifications or training relevant to the programme.

Year	Qualification/Training	Provider

**MAIN ACTIVITY OR OCCUPATION**

23. Please indicate below your MAIN activity or occupation in New Zealand as at 1 October 2009 (Please tick one).

- |                          |                              |                          |   |
|--------------------------|------------------------------|--------------------------|---|
| <input type="checkbox"/> | Secondary school student     | <input type="checkbox"/> | Unemployed or beneficiary (e.g. DPB)        |
| <input type="checkbox"/> | Wage or salary worker        | <input type="checkbox"/> | Self employed                               |
| <input type="checkbox"/> | University student           | <input type="checkbox"/> | Institute of Technology/Polytechnic student |
| <input type="checkbox"/> | College of Education student | <input type="checkbox"/> | House person or retired                     |
| <input type="checkbox"/> | Overseas                     | <input type="checkbox"/> | Private Training Establishment student      |
| <input type="checkbox"/> | Wānanga student              | <input type="checkbox"/> | Other (please specify) _____                |

**SUPPORT**

The Ministry of Education requires this data to be collected. The information you supply is confidential and will not affect your application. Extra support is available for students with medical conditions, disabilities and/or learning difficulties.

24. Do you live with the effects of significant injury, Yes   
 long-term illness or disability or do you identify as deaf? No

20 Hearing       30 Learning       40 Mobility   
 50 Vision       60 Medical       70 Other (please specify)

25. Would you like your Head of Department to be informed? Yes   
No

26. Would you like to be contacted by the Undergraduate Programme Yes   
 Co-ordinator who organises support services? No

27. In the event of an emergency will you need help to evacuate the building? Yes   
No

**MARKETING**

28. How did you come to hear of this programme/course? :

<input type="checkbox"/>	R1 Family Member/Friend	<input type="checkbox"/>	A2 Yellow Pages
<input type="checkbox"/>	R3 Industry Professional	<input type="checkbox"/>	A3 Television Advertisement
<input type="checkbox"/>	R7 Whitecliffe Staff Member	<input type="checkbox"/>	A4 Radio Advertising
<input type="checkbox"/>	O7 Internet	<input type="checkbox"/>	A5 Cinema Advertisement
<input type="checkbox"/>	S1 School Visit	<input type="checkbox"/>	A1 Newspaper/Magazine Advertising
<input type="checkbox"/>	S2 Expo	<input type="checkbox"/>	(Specify publication) _____
<input type="checkbox"/>	P3 School Art Teacher	<input type="checkbox"/>	Other (please specify) _____
<input type="checkbox"/>	P4 School Careers Advisor		

International Agent\* (if you have ticked this box please have your agent complete the below section)

29. What was the most important reason, for you, to enrol on this programme? (Please tick only **ONE** box).

<input type="checkbox"/>	01 Location	<input type="checkbox"/>	06 Student Lifestyle
<input type="checkbox"/>	02 Reputation of Whitecliffe	<input type="checkbox"/>	07 Nearest tertiary arts institution
<input type="checkbox"/>	03 Unique qualification	<input type="checkbox"/>	08 Job/Career prospects
<input type="checkbox"/>	04 Reputation of the programme	<input type="checkbox"/>	09 Cost of the programme
<input type="checkbox"/>	05 Length of programme	<input type="checkbox"/>	10 Other (please specify) _____

**INTERNATIONAL AGENTS (Only to be filled out by those agents who referred the student)**

**Agent Declaration**

I declare that I have personally consulted this student on their application with their approval, and I have sighted and confirmed the accuracy of all attached documentation.

**Agent Signature:** \_\_\_\_\_ **Date:**    /    /

**Applicant Signature:** \_\_\_\_\_ **Date:**    /    /

**Agency Name:** \_\_\_\_\_

\*Agents please note that commission is dependant on holding a current Agency agreement.

**STUDENT LOAN INTEREST 'WIPE-OUT' (optional)**

30. If you will have a 2010 loan and wish to apply for an Interest WIPE-OUT, you must provide your IRD number on this form, or contact Inland Revenue directly.

IRD Number               

**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 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.  
New Zealand passport.

A statement of Whakapapa, including date of birth, countersigned by a kaumatua.  
Certificate of citizenship or letter of confirmation.  
Overseas passport with residency stamps.

**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 (JP) or a solicitor. You can find a list of Justices of the Peace in the yellow pages of the telephone book. Alternatively you can bring the original documentation to the Admissions Office.

**International** students must bring their passport with them when they enrol. The passport must contain a current student permit/visa.



**TUITION FEES FOR OVERSEAS OR INTERNATIONAL STUDENTS (i.e. not New Zealand citizens or permanent residents)**

**NOTE: Fees shown below are for 2010.**

**Tuition Fees are correct at time of publication but can be subject to change.**

<b>Course</b>	<b>Current Fee</b>
<b>Certificate of Arts &amp; Design (Foundation) Only</b> 60 Credits = 0.5 EFTS <b>Full-time, Part Year</b> (20 weeks) – (July to November 2010)	NZ \$10,500 incl. GST
<b>Certificate of Arts &amp; Design (Foundation) with English Language Assistance</b> Full-time, Full Year – (February to November 2010) 72 Credits = 0.6 EFTS + English Language	NZ \$17,880 incl. GST
<b>Bachelor of Fine Arts Degree (each year)</b> <b>Annual</b> - Full-time, Full Year – (February to November 2010) 120 Credits = 1.0 EFTS	NZ \$21,000 incl. GST

**INTERNATIONAL STUDENTS -**

**For Information on The Code of Practice for the Pastoral Care of International Students and immigration queries, please visit:**

<http://www.minedu.govt.nz/goto/international>

<http://www.immigration.nz/>

**CHECKLIST**

- |                          |   |
|--------------------------|---|
| <input type="checkbox"/> | Passport photo attached   |
| <input type="checkbox"/> | Copy of Passport or Birth Certificate ( <i>including Visa if International Student</i> )    |
| <input type="checkbox"/> | Evidence of prior study attached ( <i>secondary/tertiary transcripts where applicable</i> ) |
| <input type="checkbox"/> | Application Fee   |
| <input type="checkbox"/> | Evidence of IELTS/TOEFL Score attached if applicable  |
| <input type="checkbox"/> | Form signed by applicant and/or guardian  |

Receipt No:

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## DECLARATION

**Privacy** – Whitecliffe collects and stores information from this form to comply with the requirements of the Ministry of Education (student statistical returns), New Zealand Qualifications Authority (Record of Learning registration and Unit Standard outcomes), Tertiary Education Commission (funding returns), Industry Training Organisations (funding and academic outcomes) Ministry of Social Development (confirmation of enrolment and academic outcomes), and Inland revenue Department (student loan interest rebate). The information is also used to select students for programmes, to manage internal administrative processes, and for internal reporting. Information about students may be supplied to, and sought from, other educational institutions for the purpose of verifying academic records.

In addition, when required by statute, Whitecliffe releases information to Government agencies such as the New Zealand Police, Department of Justice, Ministry of Social Development, and the Accident Compensation Corporation (ACC).

In signing this application form you authorise such disclosure on the understanding that the Institute will observe the general conditions governing the release of information, as set out in the Privacy Act 1993. You may see any information held about you and amend any errors in that information. To do so, contact the Admissions Office.

**IRD Number** – Where you have supplied your IRD number for the purposes of a student loan interest write-off, that information is being collected to provide to the Ministry of Education who will forward that information, along with your full-time or part-time study status to Inland Revenue. Inland revenue will use this information to assess your eligibility to a student loan interest write-off. That information will be used solely for this purpose.

**Fees** – In signing this application form you undertake to pay all fees as they become due, and to meet any late fees and collection charges associated with debt recovery. Whitecliffe's policy on withdrawal and refund of fees may be obtained from the Bursar.

**Declaration** – I declare that to the best of my knowledge all the information supplied on, and with this application 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. (If the applicant is under 18 years of age at time of application please have a parent or guardian sign this application).

**Signature:** \_\_\_\_\_ **Date** \_\_\_\_/\_\_\_\_/\_\_\_\_

**Name:** \_\_\_\_\_

### Office Use Only

#### Documentation

\_\_\_\_\_  
-  
\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

#### Approved

\_\_\_\_\_  
-  
\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

#### Entered

\_\_\_\_\_  
-  
\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

PLEASE SEND COMPLETED APPLICATION FORM TO:

ADMISSIONS OFFICE  
WHITECLIFFE COLLEGE OF ARTS & DESIGN  
PO BOX 8192, SYMONDS STREET  
AUCKLAND 1010, NEW ZEALAND

PH: + 64 9 309 5970

EMAIL: [info@whitecliffe.ac.nz](mailto:info@whitecliffe.ac.nz)

FAX: + 64 9 302 2957

WEBSITE: [www.whitecliffe.ac.nz](http://www.whitecliffe.ac.nz)