

# REAP Enrolment Form

Programme: \_\_\_\_\_

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

Address: \_\_\_\_\_

Cell Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Emergency Contact: \_\_\_\_\_



**Personal Information:** *The following statistical information is a requirement of both the Ministry of Education and the Tertiary Education Commission*

**Date of Birth:** \_\_\_\_\_ **Gender:**  Male  Female  Diverse

**Ethnicity:**  Maori  NZ European  Pacific Islander  Other \_\_\_\_\_

## Education:

- Left school with no formal qualification
- NCEA Level 1, School Certificate or equivalent
- NCEA Level 2, University Entrance or equivalent
- NCEA Level 3 or higher

## Eligibility:

**Residential Status:**

- NZ Citizen
- NZ Resident - Proof of residency or citizenship required if not born in NZ

## Identification required:

REAP require your National Student Number # \_\_\_\_\_ to complete your enrolment.

I give permission for REAP to look up my NSN # **if I don't know it**

## Permission:

YES, I consent to my email address being shared with the class tutor for the purpose of sharing learning resources.

YES, I consent to the use of my photo in publicity material such as Facebook, Newspaper or the Annual Report.

**Declaration:** Privacy- REAP Central Plateau collects and stores information from this form to comply with the requirements of the Ministry of Education and the Tertiary Education Commission. In signing this enrolment form you authorise such disclosure on the understanding that the organisation will observe the general conditions governing the release of information, as set out in the Privacy Act 2020.

Declaration – I declare that to the best of my knowledge all the information supplied on, and with, this enrolment form is true and complete, and I consent to the disclosure of personal information as described above.

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