

Please read this form carefully and complete all relevant sections. This application form provides us with the information we need to enrol you onto courses delivered by Aspire2International (A2I) schools, which include National Institute of Education (NIE), Concordia Institute of Business (CIB) and Foundation English Limited (FEL). Please keep a copy of this application form for your reference. Please tick ✓ where applicable.

**Personal Details (as shown on passport)**

Family Name  First Name/s   
 Preferred Name   
 Date of Birth    DD/MM/YYYY Gender Male  Female   
 Citizenship  Country of Birth   
 Passport Number  Issue Date  Expiry Date   
 Disability  
 The following information will help us improve services for students with disabilities. The information you supply is confidential. Yes  No   
 Do you live with the effects of significant injury, long term mental/physical illness or disability?  
 If "yes" please describe this disability

**Applicant's Contact Details Agency Contact (for approved agent, if applicable)**

Address	<input type="text"/>	Address	<input type="text"/>
	<input type="text"/>	Manager Name	<input type="text"/>
Mobile	<input type="text"/>	Mobile	<input type="text"/>
Email	<input type="text"/>	Email	<input type="text"/>

**Parents Contact Details or Emergency Contact (home Country) Emergency contact in New Zealand (if any)**

Name	<input type="text"/>	Name	<input type="text"/>
Relationship to you	<input type="text"/>	Relationship to you	<input type="text"/>
Address	<input type="text"/>	Address	<input type="text"/>
	<input type="text"/>		<input type="text"/>
Mobile	<input type="text"/>	Mobile	<input type="text"/>
Email	<input type="text"/>	Email	<input type="text"/>

Programme Title	NZQA Level	Duration	Campus	Proposed Start Date
			AKL / TRG / CHC	

Please tick the box if you are applying for any recognition of prior learning. Attach all academic transcripts and documents along with your application.

**What are your career intentions and goals? How will pursuing this programme of study assist you in achieving those goals?**

**What are your immediate plans after you have completed this programme of study?**

**Arrival, Accommodation and Insurance**

Airport Pick-up: Do you want to be met at the airport? (Airport pick-up is free - conditions apply) Yes  No

Accommodation: Do you require accommodation to be arranged for you on arrival?

Free shared (4-6 per room) hostel accommodation provided to most diploma students for the first 2 weeks after arrival. There will be separate rooms for male and female students. This benefit, if applicable to you, will be specified in your Offer of Place. Alternative paid accommodation and pick-up can be arranged if the benefit is not specified in your Offer of Place. Please email [study@aspire2international.ac.nz](mailto:study@aspire2international.ac.nz) if you wish to have alternative accommodation and pick-up arranged. Yes  No

If you have ticked Yes for either of the above please email us your flight itinerary once your visa is approved, at [study@aspire2international.ac.nz](mailto:study@aspire2international.ac.nz)

Medical and Travel Insurance: Do you wish to purchase our medical and travel insurance? Yes  No

Medical and travel insurance is compulsory for International students in New Zealand. (See further details in our prospectus and on our website). We arrange medical and travel insurance via Orbit Protect and the cost will be stated on your Offer of Place / Invoice. Alternatively, students can arrange their own insurance, and they must provide proof of suitable insurance at the time of enrolment.

**Applicable only for U-18 : If you wish to opt out of homestay (accommodation arranged by A2I), please advise your designated caregiver details.**

Name of designated caregiver

Relationship to you

NZ Address

Mobile

Email

**Education Background / Details**

Secondary Studies (high school / secondary school)

Highest qualification gained	Institution	Country	Date completed

Tertiary Studies (college, university, polytechnic)

Qualification	Institution	Country	Date completed

Please attach certified copies of school / college/ university certificates

**Work background experience**

Company Name	Title	Position	Employment Date From/To)

**English Language Proficiency ( Please complete this section if English is not your first language)**

IELTS  TOEFL  PTE  Internal test  Other (Please give details)

I am applying to study English

If you do not meet the English requirement for the academic programme you are applying for we will advise you and may provide a conditional offer.

New Zealand Privacy Act: The collection, use, storage and update of personal information will be in accordance with the New Zealand Privacy Act 1993. Within the schools, relevant personal information will be available to staff responsible for enrolment, for establishing and maintaining records, providing tuition, programmes and academic support, providing student services, and for maintaining discipline and order. When required by statute, we will release information to agencies such as the Ministry of Education, New Zealand Qualifications Authority, Industry Training Organizations, Immigration New Zealand, New Zealand Police, Department of Justice, Inland Revenue and the Accident Compensation Corporation. Students have the right to access and correct any information held about them.

**Declaration by student (and parent if student is under 18)**

- I confirm that all of the information contained in the application and in any attachments is true and correct.
- I have read and understood the information contained in the prospectus (also available on the website), and agree to comply with the attendance and behavior requirements and all applicable policies and rules.
- I have read and understood the Student Fee Protection, Student Withdrawals and Fee Refunds Policy, which is summarised in the prospectus and is on the website in full.
- I acknowledge that the provision of false information or the withholding of relevant information may result in termination of enrolment.
- I will inform the school if there are any changes to the details on this application.
- I acknowledge that I have read the information about the course I have enrolled in.
- I give permission for the school to contact my parents in the event of an emergency or where there are concerns for my wellbeing.

	Date	<input type="text"/>	DD	<input type="text"/>	MM	<input type="text"/>	YYYY
Student Name	<input type="text"/>	To be signed if student is under 18	Parents Name	<input type="text"/>			
Signature	<input type="text"/>		Signature	<input type="text"/>			

**How did you find out about Aspire2 International and our courses (you may tick more than 1 box if appropriate)**

Friends/Relatives
  Agent
  Exhibition
  Education seminar
  Other social media
  Facebook
  Instagram
  Internet