

APPLICATION FOR TRAINING

Please save this form to your computer and complete it electronically. If you have any questions, please consult the website (www.eastwest.ac.nz) or contact us by email (office@eastwest.ac.nz) or phone (in NZ: 0800 896 477; outside NZ: +64 7 824 3417)

Please complete all sections of the form

1. Personal Details

Title (Mr/Ms/Miss/Mrs/Other specify)	
Family Name (as shown in passport)	
Given Name(s) (as shown in passport)	
Other Name(s) Known by	
Preferred First Name	
Previous Name(s) known by	
Postal Address (including postcode)	
Telephone (including STD code)	
Mobile	
Email	
Home Address (if different from above)	
Date of Birth (dd/mm/yyyy)	
Gender	□ Male □ Female
Marital Status	☐ Married ☐ Never married ☐ Widowed ☐ Divorced ☐ Separated
Wedding Date, if married (dd/mm/yyyy)	

2. Programme Details	
Proposed Intake Year (yyyy)	
Duran and Judalia Couradan	February July
Proposed Intake Semester	
studies with English as the language of instruction. able to demonstrate English language competency	only apply to international students who have not completed NZ residents whom English is not their first language must be to the level of study.)
□ Diploma in Intercultural Studies (Le	
IELTS Academic 5.5 (no score less than 5	5.0), or NZCEL Level 4 or equivalen
☐ Diploma in Intercultural Studies (Le	evel 6)
IELTS Academic 6.0 (no score less than 5 <u>and</u> NZ Diploma in Christian Studies Leve	5.5) or NZCEL Level 4(Academic) or equivalent
Type of Training (All international students must Residential Non-Residential	be residential.)
Mode of Study (If you intend to study part-time, with the academic advisor.)	the courses to be studied must be agreed in advance
☐ Full-Time ☐ Part-Time ☐ Ac	companying Spouse
Have you studied in New Zealand before?	
□ Yes □ No	
Your National Student Number (NSN), if know	n (xxx-xxx-xxxx)
Your IRD number, if known	
Would you accept the tuition scholarship offer	ed
□ Yes □ No	
l les livo	
3. Nationality	
<u>-</u>	a van hald a magnart)
Nationality (Please indicate all countries for which	1 you note a passport.)
Country of Citizenship (For students with dual cit	cizenship, specify the country of citizenship of the
passport used to enter New Zealand.)	
Passport Number	
Place where your passport was issued	
Residency	□ NZ Resident/Permanent resident
•	☐ Australian Permanent Resident
Date of Residency (dd/mm/yyyy)	

Fee/Assistance Status

 □ Domestic Student (NZ citizen or resident, NZ permanent resident, AUS citizen or permanent resident residing in NZ during the time studying for this qualification) □ International Fee-Paying Student □ Refugee or protected person whose application for residence is being processed OR a 			
person who has	made a clair	m to be recognised	as a refugee or protected person and
holds a valid ter		_	as a relagee of proceeded person and
noids a valid tel	iiporary visa		
1. Ethnicity			
What ethnic group(s) (You may write up to th	do you belor	ng to?	
(Tou may write up to th	ree groups wi	nen appry to you.)	
NZ European/Pakeha	\square 111	South Slav	□ Filipino □ 411
New Zealand Māori	\square 211	Italian	\square Cambodian \square 412
Samoan	□ 311	German	\square 127 Vietnamese \square 413
Cook Island Māori	□ 321	Australian	\square 128 Other Southeast Asian * \square 414
Tongan	□ 331	125Chinese	□ 421
Niue	□ 341	126Indian	□ 431
Tokelauen	□ 351		
Fijian	□ 361	Japanese	□ 442
Other Pacific Peoples *	□ <i>371</i>	Korean	□ 443
British/Irish	\square 121	Other Asian *	□ 444
Dutch	\square 122	Middle Eastern	□ 511
Greek	□ <i>123</i>	Latin American	□ 521
Polish	□ <i>124</i>	African	□ 531
	Other *	□ 611	
	_		
Other European *	□ 129		
			", "Other Southeast Asian",
"Other Asian" or "Oth	ner", please s	specify	
If "New Zealand Māori", specify iwi and rohe (If you identified as New Zealand Māori in the ethnic group question, what is the name of your iwi (tribe) and rohe (iwi home area)? You may enter more than one iwi and corresponding rohe. If you do not know your iwi, please enter "Don't Know".)			
Language(s) spoken			

5. Education

Activity in New Zealand (What was your MAIN activity or occupation in New Zealand at 1 October last year? Select "overseas" if you weren't in New Zealand.)
 □ Secondary school student □ Wage or salary worker □ Self-employed □ University student □ Polytechnic student □ House-person or retired □ Overseas (irrespective of occupation) □ Private training establishment student □ Wananga student
Highest Secondary School Achievement (What is the highest level of achievement you hold from a secondary (high) school?)
If "Overseas Qualification" or "Other", specify (If you selected "Overseas Qualification" or "Other" in the previous question, please specify qualification.)
Secondary School Name (What was the name of the last secondary (high) school you attended? State "overseas" if outside New Zealand.)
Last Secondary School Year (What was your last year at secondary (high) school?(yyyy)
Tertiary Education (Is this the first time you are enrolling in a University, Subsidiaries of Te Pūkenga (<i>Institutes of Technology or Polytechnic</i>), 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.
☐ Yes ☐ No
Tertiary Institution Name (If you answered "No" to the question above, please enter the name of the first institution you studied at.)
Tertiary Institution Enrolment Year (If you entered an institution in the question above, please state the FIRST year of your enrolment there.) (<i>yyyy</i>)
5. Academic/Professional Qualifications
Please give details of your qualifications obtained—one per field. (If you need additional space, use the <i>Additional Information</i> field in Section 18.) Use the following format:
Qualification; Institution; Month and Year Obtained

7. Work Experience

List below your previous and present occupations. (If you have had more than seven occupations, only list seven, e.g., the most recent or most relevant ones.) Use the following format:
Dates (mm/yyyy to mm/yyyy); Position Held; Organisation; Full-/Part-Time
8. Local Church
When were you converted to follow the Lord Jesus Christ?
Name the church fellowship which you attend regularly.
Are you a member there?
Does the leadership approve of your application?
9. Ministry
In what Christian work have you served?
Have you helped lead others to Christ?
Do you currently have a call to cross-cultural missionary service?
If not, are you open for a call to cross-cultural missionary work?
Do you intend to apply to, or have you applied to, any Christian organisation? If so, please give the name of the organisation.

10. Spiritual Life How much of the Bible have you read?			
List three Christian books you have read recent	tly.		
What particular spiritual or physical gifts do you	u have? Please give det	ails.	
Approximately how many minutes do you spen	d in prayer and Bible st	tudy daily?	
Have you been involved in cults, the occult, and with your parents, as it could be when you wer		You may need to check	
11. Female Applicants Only For the purposes of planning accommodation, please indicate, if you are comfortable to do			
so, whether you are pregnant and when your baby is due.			
Again, for accommodation planning, please indicate, if you are comfortable to do so, if you are planning to have a baby during the course of your studies.			
12. Family Details			
For residential students, a separate application form is	s necessary for non-study	ring spouses.)	
Spouse's Full Name			
Spouse's Date of Birth (dd/mm/yyyy)			
Children (Use the Additional Information field in Section 18 for additional children.) Full Name Gender Date of Birth			
	□ M □ F		
	□ M □ F		
	□ M □ F		
	□ M □ F		

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13. Health

(If you are in doubt about information in this section, consult your doctor.)

Do you have recurring problems in any of the following?

Headaches	☐ Yes ☐ No		
Eye Strain	□ Yes □ No		
Sinus Truble	□ Yes □ No		
Skin Condition	□ Yes □ No		
Sore Throats	□ Yes □ No		
Asthma	☐ Yes ☐ No		
Hay Fever	Fever		
Other Allergies	☐ Yes ☐ No		
Back Problems	☐ Yes ☐ No		
Repetitive Strain Injury	□ Yes □ No		
Are there any foods or drinks you are not able to take?		□ Yes □ No	
Do you live with the effects of significant injury, long-term illness, or disability?			
Do you have a social/communication impairment, such syndrome/other autistic spectrum disorder?	□ Yes □ No		
Do you have a mental health condition, such as depres schizophrenia or anxiety disorder?	□ Yes □ No		
Do you have a specific learning difficulty, such as dyslexia or AD(H)D?			
Are there any other factors relating to health or well- impact your ability to study, to engage in physical ac accommodation or live in community?	□ Yes □ No		
If you answered "Yes" to any of the above, please give more details of any specific support or resources you require in order to facilitate your learning.			
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If you carry medications for allergies, please give details below.			
www.eastwest.ac.nz office@eastwest.ac.nz 0800.85	96 477 (in N7) 64 7	824 3417 (outside N7)	

er Eastwest College?			
ır ongoing support such that it	: may have	an	
st College as displayed on	□ Yes	□ No	
please comment. rmation field in Section 18.)			
ent			
15. English Language Requirement Is English your first language?			
If "No", please state the results of your most recent English proficiency test (IELTS or			
	□ Yes	□ No	
Did you receive help in completing this form? ☐ Yes ☐ No			
	st College as displayed on please comment. rmation field in Section 18.)	st College as displayed on Yes Please comment. Immation field in Section 18.) Pent Pent Pent Pent Pent Pent Pent Pes Pent Pent	

17. Referees

Please provide **3 references**. They should be willing to answer enquiries about you, and have known you for at least 1 year. They should have a knowledge of your life and work for Christ. One should be your pastor or senior church elder. **No references are accepted from family members.**

Referee 1: Name			
Relationship to Applicant	☐ Pastor	□ Elder	☐ Church Leader
Occupation			
Referee 2: Name			
Relationship to Applicant			
Occupation			
Referee 3: Name			
Relationship to Applicant			
Occupation			
L9. Submission and Attach After completing the Testimony and Declara	tion sections (below),		Admissions Office
Alternatively, for online privacy reasons, you address on the right.			Eastwest College 21 College Drive RD1 Taupiri 3791 New Zealand
Please attach the following:			
\square A copy of your passport or birth certific	cate		
\square Official results of your IELTS equivalen	t test, academic/qualifica	tion transcript	ts (if any)
☐ International Student Pastoral Care Fo	rm (International stude	ents only)	
20. Declaration			
declare that to the best of my knowledge a rue and complete. I have read the <i>Applicatio</i> y the conditions described there, and I cons ection. Checking "Agree" below counts as sig	on Process Terms and Process to the disclosure of p	ocedures sect	ion below. I agree to abid
	Date (de	d/mm/yyyy)	
□ Agree			

21. Testimony
Please give your testimony (approximately one page).
Your conversion • Growth • Beliefs regarding the Great Commission (Matthew 28:19, 20)
Details of guidance about applying to the College.

22. Application Process Terms and Procedures

Eastwest College of Intercultural Studies, a department of WEC Aotearoa New Zealand (registered charity CC27877), is registered as a private training establishment by the New Zealand Qualifications Authority under the provisions of the Education and Training Act 2020 and its subsequent amendments.

Proof of Identity

To enrol in a New Zealand tertiary education organisation, you must prove evidence of citizenship and/or permanent residency.

International students must produce their passport and a visa that is valid for undertaking study in New Zealand. On arrival at Eastwest College, they must bring their documentation with them to orientation day to be photocopied and verified for academic records.

Domestic students must provide **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 statement of whakapapa, including date of birth, countersigned by a kaumatua
- · Certificate of citizenship of New Zealand or Australia
- Proof of New Zealand or Australian Permanent Residency

You can bring the original documentation to the reception desk. Alternatively, please provide a certified copy. A certified copy is a photocopy of your original document, signed as being a true and accurate copy by a Justice of the Peace (JP), Barrister or Solicitor, Notary Public, Court Resister/Deputy Register, or Member of Parliament. When a student 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.

Important Information

a. Education Code of Practice

Eastwest College of Intercultural Studies is a signatory to the Education (Pastoral Care of Tertiary and International Learners) Code of Practice 2021, and is committed to providing a healthy learning environment for the welfare, safety, and wellbeing of learners.

b. Immigration

Full details of visa and permit requirements, advice on rights to employment in New Zealand while studying, and reporting requirements are available through Immigration New Zealand, and can be viewed on their website.

c. Eligibility for Health Service

Most international students are not entitled to publicly funded health services while in New Zealand. If you receive medical treatment during your visit, you may be liable for the full costs of that treatment. Full details on entitlements to publicly-funded health services are available through the Ministry of Health, and can be viewed on their website.

d. Accident Insurance

The Accident Compensation Corporation provides accident partial insurance for all New Zealand citizens and residents, as well as for temporary visitors to New Zealand, but you may still be liable for all other medical and related costs. Further information can be viewed on the ACC website.

e. Medical and Travel Insurance

All international students must have appropriate and current medical and travel insurance while studying in NewZealand. Please contact finance@eastwest.ac.nz for assistance to arrange appropriate insurance.

f. Recognition of Prior Learning

If you have completed Bible College or Seminary courses for which you seek credits transfer, please contact office@eastwest.ac.nz for an application for cross credits of prior learning.

Declaration

a. Privacy – Eastwest College of Intercultural Studies collects and stores information from this form to comply with the requirements of the Education and Training Act 2020 and other legislation relating to the maintenance of records and supply of information to the Ministry of Education, Education New Zealand, New Zealand Qualifications Authority, Tertiary Education Commission, Ministry of Social Development, Inland Revenue Department, Immigration New Zealand, and agencies who support particular students through scholarships and prizes, payment of fees, or other awards (if you are a recipient of one of these awards). The information is also used to manage administrative processes, for statistical analysis research and reporting. Information about students may be supplied to other educational institutions, for the purpose of verifying academic records.

When required by law, Eastwest College releases information to Government agencies such as the New Zealand Police, Department of Justice, Ministry of Social Development, and the Accident Compensation Corporation (ACC).

Your personal details (name, date of birth, and residency) as entered on this application 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.

In signing this application form, you authorise such disclosure on the understanding that Eastwest College will observe the general conditions governing the release of information, as set out in the Privacy Act 2020, the Education and Training Act 2020, Statistics Act 1975, and other relevant legislation. You may see any information held about you and amend any errors in that information. To do so, contact the Faculty Officer.

- **b. 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. Eastwest College's policy on withdrawal and refund of fees may be obtained from the College office or on the College website.
- **c. Rules** In signing this application form, you undertake to comply with the published rules and policies of Eastwest College of Intercultural Studies with regard to attendance, academic integrity and progress, behaviour, and use of information systems.