

APPLICATION FORM

Experience NMIT Activities

Student for a Day / STAR Courses / STAR+ / Gateway



322 Hardy Street, Private Bag 19, NELSON (7042)

Contact: (03) 546 9174 or youth@nmit.ac.nz

Personal Details	Surname:	Date of Birth:
	First Names:	
	Preferred Name:	
	Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female	NSN number:
	Home Address:	
	Email:	
	Phone:	Mobile:
	Emergency Contact Name:	
	Phone:	Relationship:
	Resident Status: <input type="checkbox"/> NZ Citizen <input type="checkbox"/> Permanent Resident	
Ethnicity:		

Programme/Activity	Programme interested in:	
	(e.g. Fitness / Hairdressing)	
	Activity Requested:	<input type="checkbox"/> STAR Course <input type="checkbox"/> STAR+ <input type="checkbox"/> Student for a Day <input type="checkbox"/> Gateway
	(Please tick one)	
	Dates Preferred:	
	Your present secondary school:	
Your current study level (e.g. Year 13):		

Permission	Parent/Guardian Name:	
	Permission Signature:	
	Date:	/ / 2017
	Careers Advisor Name:	

Declaration	I apply for registration for an Experience NMIT activity at Nelson Marlborough Institute of Technology and agree to comply with the rules of the Institute. I agree to provide the information requested in this form and I understand this information may be used by NMIT from time to time in respect of future studies. I authorise Nelson Marlborough Institute of Technology to pass on such information to third parties as may be necessary in relation to my studies.	
	Signature:	Date: