**International Student Registration Form 2022**

**Franklin Institute of Agri-Technology**

For Office use only

760 Glenbrook Road

RD 4, Pukekohe 2679

Auckland, New Zealand

Phone: +64 9 236 3738

*Please read the form and student declaration carefully before you sign the application form.*

*If you apply through an approved* ***FIAT*** *Agent, all correspondence regarding your application will be forwarded to that agent****.***

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. **PERSONAL DETAILS (As in passport)**

|  |  |
| --- | --- |
| Last Name/Family Name: | |
| First Name/Given Name(s): | |
| Preferred Name: | |
| Title: **🞏** Mr. **🞏** Mrs. **🞏** Ms. Other: | Gender: **🞏** Male **🞏** Female |
| Date of Birth: | Age: |

1. **PASSPORT INFORMATION**

|  |  |
| --- | --- |
| Passport Number: | Citizenship: |
| NZ VISA: Yes/ No TYPE: | VALID TILL: |

1. **CONTACT DETAILS**

**Address in New Zealand**

|  |
| --- |
|  |
|  |
|  |
| Mobile: |
| Email: |

**Address in Home Country**

|  |
| --- |
|  |
|  |
|  |
| Mobile: |
| Email: |

1. **QUALIFICATION AND CAMPUS**

**Name of the qualification you wish to study: (Please tick one)**

|  |
| --- |
| NZ Certificate in Horticulture Production L4 (One year) |
| NZ Diploma in Horticulture Production L5 (One year) |
| NZ Diploma in Horticulture Production L5 (Two years) |

**Name of the campus you wish to study at: (Please tick one)**

|  |
| --- |
| Auckland (760 Glenbrook Road, Pukekohe, Auckland 2679) |
| Tauranga (170 Wairoa Road, Wairoa, Tauranga 3171) |

1. **NAME THE INTAKE YOU WISH TO START IN: (Please tick one)**

**JANUARY APRIL JULY OCTOBER**

1. **NAME THE INSURANCE TYPE YOU WISH TO PURCHASE: (Please tick one)**

**STUDENT LITE ($396) STUDENT PRIME ($571)**

1. **ACADEMIC INFORMATION**

**Secondary School/High School/Foundation**

|  |  |
| --- | --- |
| Name of the Secondary/High School: |  |
| Place/Country |  |
| Qualification Gained: |  |
| Year qualification obtained |  |

|  |  |
| --- | --- |
| Name of the Secondary/High School: |  |
| Place/Country |  |
| Qualification Gained: |  |
| Last year at Secondary/High School: |  |

**Tertiary Study (University, Technical College, Other)**

|  |  |
| --- | --- |
| Name of the University/Institute: |  |
| Place/Country: |  |
| Qualification Gained: |  |
| Years at the Institute: |  |

|  |  |
| --- | --- |
| Name of the University/Institute: |  |
| Place/Country: |  |
| Qualification Gained: |  |
| Years at the Institute: |  |

1. **CAREER BACKGROUND**

Do you have any work experience relevant to the program you are applying for?

Yes No

If yes, please attach relevant references and/or job/experience letters for each position listed below:

|  |  |  |
| --- | --- | --- |
| **Position Held** | **Name of the Employer** | **Period of Employment** |
|  |  |  |
|  |  |  |
|  |  |  |

1. **ENGLISH PROFICIENCY**

|  |  |  |
| --- | --- | --- |
| What is your first language? |  | |
| TYPE: IELTS/ PTE / ITC | Score:  Date Obtained | VALID: Yes/No  Till: |
| Other (Please specify) | Score:  Date Obtained: | VALID: Yes/No  Till: |

* I have booked English test on: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (Type)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* I am applying without an English Language test and would like my previous education to be considered as evidence of my English language ability.
* I have NZCEL level \_\_\_\_\_\_\_\_\_\_\_\_. Academic: Yes / No Applied: Yes /No

OTHER:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. **ASSISTANCE:** If you have a disability and/or medical condition (including allergies) that may require **FIAT** to provide assistance, please outline your needs below.

**(NOTE: This information will remain confidential and should not affect your application).**

|  |
| --- |
|  |

1. **MEDICAL INSURANCE (Travel/Medical insurance is compulsory for international students in New Zealand.) : FIAT** will buy on your behalf your medical insurance from Orbit Insurance, unless you can provide evidence of existing insurance for the period of your student visa duration. It does not automatically cover pre-existing conditions and properties.
2. DO YOU GIVE CONSENT TO **FIAT** TO VIEW YOUR VISA STATUS ON THE   
   **VISA VERIFICATION SERVICE?** Yes No
3. **AIRPORT PICK-UP**

Do you want **FIAT** to pick you up from airport? Yes No

If ‘Yes’, you must let **FIAT**know your flight details at least two weeks before your arrival date and pay for the airport pickup fees with your tuition fees.

1. **SUBMITTING YOUR APPLICATION**

Where are you currently located? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. **ARE YOU APPLYING THROUGH A REGISTERED AGENT?** Yes No

|  |  |
| --- | --- |
| If ‘Yes’, please provide the following: | |
| Agent Name/Address:  (along with stamp) |  |

**11.WHERE DID YOU HEAR ABOUT FIAT? (Please tick one)**

|  |  |  |
| --- | --- | --- |
| **🞏** Staff | **🞏** Registered Agent | **🞏** Family/Friends |
| **🞏** Internet (please name website) |  | |
| **🞏** Advertisement): Paper/Radio (please specify the name) |  | |
| **🞏** Other (please detail): |  | |

**12.STUDENT CHECKLIST**

Please check that you have completed the following:

**🞏** Answered all sections of the application form

**🞏** A copy of your current passport

**🞏** Verified copies of your original documents and academic transcripts (translated to English)

**🞏** Verified copy of your official English language test results (e.g. IELTS, TOEFL)

**🞏** Relevant references and/or job offer letters

## Terms and Conditions of Enrolment

1. Students must provide all required information relating to enrolment with FIAT and this must be true and accurate, with confirmatory notarization or attestation where required. FIAT may suspend a student’s enrolment if false information has been supplied or required information is not supplied by the due date.
2. Full tuition fees must be paid before attendance at any class. Any attendance while fees are outstanding are strictly at FIAT’s discretion and FIAT will take the necessary steps to recover any outstanding fees.
3. Students must agree to an insurance policy being organized on their behalf by FIAT OR have and submit to FIAT details of their alternative insurance policy before they leave their home country or (in the case of onshore international students) before they officially enrol with FIAT. Any student arriving to enrol or attend classes without submitting insurance policy details will have a policy taken out for them on the same day by FIAT and they will be required to pay for this within two weeks.
4. If FIAT arranges travel/medical insurance for students, the insurance agreement will be held between the student and Orbit Protect. Students are responsible to read the policy document and advise Orbit Protect of any inaccuracies. For any claims, students will deal directly with Orbit Protect.
5. FIAT will collect, use and disclose personal information about the student in accordance with the Privacy Act 1993. Any agency holding the source of any information the students have provided on the application form is authorized to release that information to FIAT upon request.
6. Students must read and accept the FIAT Withdrawal and Refund of Fees policies as documented in the Student Handbook and the FIAT website.
7. Students must make themselves familiar with the requirements and processes with regard to student behaviour as set out in the Student Handbook.
8. Students must read and follow the FIAT Rules as documented in the Student Handbook.
9. Before students use the internet at FIAT. They must read the Rules and Regulations on Computer Use in the Student Handbook and agree to abide by them. Failure to abide by this policy may lead to the termination of access to the internet via FIAT. Students may be required to pay for any internet related costs incurred by their actions which are contrary to the policy or guidelines (as well as reasonable costs for recovering these costs).
10. Any student breaching the rules and regulations of FIAT will be subject to the disciplinary procedures and penalties described in FIAT’s Student Handbook.
11. Students must accept and be bound by the Terms and Conditions of Enrolment for the duration of their period of study with FIAT. The FIAT Terms and Conditions may be modified from time to time. Any changes will apply to new students (unless the change is following changes to New Zealand laws or statutory requirements in which case they will apply to all students).

**DECLARATION BY APPLICANT**

***I have read and understood the Terms and Conditions of Enrolment, including the Withdrawal and Refund Policies and Student Behavior requirements.***

***I declare that the information I have supplied on this form and the attached documentation to be true and complete and nothing has been withheld or conveyed wrongly.***

***I agree to abide by the FIAT Terms and Conditions of Enrolment****.*

Date:

Student Signature:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(*Please read Declaration by applicant before you sign the form*)

*NOTE: Copies of FIAT’s Rules and Regulations are available in the International Student Handbook or at (FIAT’s web link)* PLEASE SEND THE COMPLTETED FORMS TO FIAT ADDRESS OR SEND SCANNED COPIES TO [enquiry@fiat.ac.nz](mailto:enquiry@fiat.ac.nz) OR submit to our agent. OR deliver to 760, Glenbrook Road, RD4, Pukekohe, Auckland 2679

**Statement of Purpose ( SOP)**

As required by the Education (Pastoral Care of International Students) Code of Practice 2016 Franklin Institute of Agri-Technologymust undertakean assessment of each student to ensure that he/she is able to participate effectively in the course, and the course offered meets this prospective student’s proficiencies and career intentions. Please write a statement of purpose to help us with this assessment.

|  |  |
| --- | --- |
| **Registration ID** |  |
| **Student Name** |  |
| **Programme** |  |

**STATEMENT**

|  |  |  |  |
| --- | --- | --- | --- |
| **Personal and Career Intentions**  *(Please write about your plans for your life and career and why this programme will help you achieve these.)* | | | |
| **Signed:** |  | **Date:** |  |