

INTERNATIONAL APPLICATION FORM

Email to enquiries@nelson-aviation.co.nz to ensure your registration

This information will be used as a part of the initial application process. This form is not a guarantee of enrolment on a training course.

PERSONAL DETAILS

Title:		Mr.	Mrs.	Miss.	Ms.
Family Name:					
Given Name(s):					
Date of Birth	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	Weight (kgs) <input style="width: 50px;" type="text"/>	
	<small>day</small>	<small>month</small>	<small>year</small>	Male <input type="checkbox"/>	Female <input type="checkbox"/>
Postal Address					
Contact Details	Home:		Business:		Mobile:
	Fax:		E-mail:		

NZ DIPLOMA QUALIFICATIONS

(please tick only one module)	<input type="checkbox"/> General Aviation Strand <input type="checkbox"/> Flight Instructor Strand <input type="checkbox"/> Airline Preparation Strand
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COURSES

Training course required [please tick each module]	<input type="checkbox"/> Private Pilot Licence - Theory	<input type="checkbox"/> Instrument Rating - Theory
	<input type="checkbox"/> Private Pilot Licence - Flight Training	<input type="checkbox"/> Instrument Rating - Flight Training
	<input type="checkbox"/> Commercial Pilot Licence - Theory	<input type="checkbox"/> Basic Gas Turbine (BGT) - Theory
	<input type="checkbox"/> Commercial Pilot Licence - Flight Training	<input type="checkbox"/> Flight Instructor Rating
	<input type="checkbox"/> ATPL - Theory	
The start date for your chosen course(s)		<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
	<small>day</small>	<small>month</small>
		<small>year</small>

CITIZENSHIP

It is a requirement that you MUST provide a copy of your passport to verify your status as an international student.

Passport No:	Issuing Country:	Expiry:
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Do you have any learning difficulties that we should be aware of, in order to assist you with your learning?

Y / N
(please circle)

PREVIOUS FLYING EXPERIENCE (IF APPLICABLE)

	Total Flight time		Cross country		Night		Instrument	
	Fixed wing	Rotary	Fixed wing	Rotary	Fixed wing	Rotary	Fixed wing	Rotary
Dual								
Pilot in Command								

I hold a PPL / CPL / ATPL ISSUED IN _____ with _____ ratings.

ETHNICITY

You may tick up to three boxes which apply to you.

NZ European/Pakeha	<input type="checkbox"/>	Greek	<input type="checkbox"/>	Chinese	<input type="checkbox"/>
New Zealand Maori	<input type="checkbox"/>	Polish	<input type="checkbox"/>	Indian	<input type="checkbox"/>
Samoaan	<input type="checkbox"/>	South Slav	<input type="checkbox"/>	Sri Lankan	<input type="checkbox"/>
Cook Island Maori	<input type="checkbox"/>	Italian	<input type="checkbox"/>	Japanese	<input type="checkbox"/>
Tongan	<input type="checkbox"/>	German	<input type="checkbox"/>	Korean	<input type="checkbox"/>
Niue	<input type="checkbox"/>	Australian	<input type="checkbox"/>	Other Asian	<input type="checkbox"/>
Tokelauan	<input type="checkbox"/>	Other European	<input type="checkbox"/>	Middle Eastern	<input type="checkbox"/>
Fijian	<input type="checkbox"/>	Filipino	<input type="checkbox"/>	Latin American	<input type="checkbox"/>
Other Pacific Peoples	<input type="checkbox"/>	Cambodian	<input type="checkbox"/>	African	<input type="checkbox"/>
British/Irish	<input type="checkbox"/>	Vietnamese	<input type="checkbox"/>	Other	<input type="checkbox"/>
Dutch	<input type="checkbox"/>	Other Southeast Asian	<input type="checkbox"/>		

STATISTICAL INFORMATION

What was your MAIN activity or occupation at 1 October last year?

Secondary School student	<input type="checkbox"/>	University Student	<input type="checkbox"/>	Overseas (irrespective of occupation)	<input type="checkbox"/>
Not Employed or Beneficiary	<input type="checkbox"/>	Polytechnic Student	<input type="checkbox"/>	Private training establishment	<input type="checkbox"/>
Wage or salaried worker	<input type="checkbox"/>	College of Education Student	<input type="checkbox"/>	Wananga Student	<input type="checkbox"/>
Self-employed	<input type="checkbox"/>	House-person or Retired	<input type="checkbox"/>		<input type="checkbox"/>

What was the last Secondary school you attend?

Last Year at school:

What is the highest achievement you hold from secondary school?

<input type="checkbox"/> NCEA Level 3 or Bursary or Scholarship	<input type="checkbox"/> No Formal secondary qualification
<input type="checkbox"/> NCEA Level 2 or Sixth Form Certificate in one or more subjects	<input type="checkbox"/> University Entrance
<input type="checkbox"/> NCEA Level 1 or School Certificate in on or more subjects	<input type="checkbox"/> Overseas
<input type="checkbox"/> 14 or more credits in any level	<input type="checkbox"/> Other _____

INSURANCE

It is compulsory for all International Students to have current and appropriate medical and travel insurance while they are living in New Zealand. This is in accordance with the Code of Practice for the Pastoral Care of International Students set out by the Ministry of Education.

Please note that:

- The insurance company must provide 24-hour, 7-day-per-week emergency cover.
- NAC reserves the right to require students to take out a default policy prior to the start of your course.

If you would like us to arrange your insurance please indicate. (tick ✓) Yes No

CONDITIONS OF ACCEPTANCE

Previous Flight Training Experience

If you have previous flying experience we may require you to make the relevant records available to us and we reserve the right to contact former training provider(s).

Enrolment and Acceptance

Once we receive your application you will be contacted by one of our staff members and you may be required to provide further information. An interview is required for all diploma and professional licence course enrolments. If you meet all the enrolment prerequisites you will be invited to attend our next scheduled course selection interview. Students will be notified of their acceptance within 14 days after the selection interview.

Payment of fees and refunds

In signing this registration form you undertake to pay all fees and charges as they become due. Payments shall be made in accordance with the "Course Payment Schedule". Nelson Aviation College's payment of fees, refunds and withdrawal policies are all outlined in the current Student Handbook.

Discontinuance of training

Important rights and obligations regarding withdrawal and discontinuance are laid out on the website and in the Nelson Aviation College Student Handbook. If at any time a student's performance is considered to be unsatisfactory, the College reserves the right to discontinue their training.

Alcohol and Drug Use

No illegal drug use (as defined by the Misuse of Drugs Act 1975) or alcohol consumption, which will have an adverse effect on flight safety, shall take place while you are a student at Nelson Aviation College (NAC). In the event that NAC reasonably believes that the student is under the influence of either drugs or alcohol, then by signing this declaration the student agrees to undergo testing for alcohol or controlled drugs as defined above, by a registered medical practitioner appointed by NAC.

Fees

In signing this registration form you undertake to pay all fees and charges as they become due. Nelson Aviation College's policy on withdrawal and refund of fees is set out on the website & Student Handbook.

DECLARATION

I understand that withholding information requested in this registration or giving false information may make me ineligible for the admission or may disqualify me from completing my chosen course of training. I confirm that to the best of my knowledge all the information supplied on, and with this registration is true and correct.

I have read and understood the conditions of acceptance and I hereby agree to abide by the conditions described above.

Signature _____

Date:

REGISTRATION CHECKLIST

Please ensure that you have enclosed the following with your registration form. Tick (✓)

- | | |
|--|---|
| <input type="checkbox"/> A certified English translation of academic records and qualifications. | <input type="checkbox"/> ADAPT© Pre-screening Assessment Result |
| <input type="checkbox"/> A certified copy of an IELTS or TOEFL result sheet or other proof of English proficiency. | <input type="checkbox"/> A copy of your passport |

WHERE DID YOU FIND OUT ABOUT NAC?

- | | |
|---|---|
| <input type="checkbox"/> NAC Website | <input type="checkbox"/> Family / Friends |
| <input type="checkbox"/> Magazine | <input type="checkbox"/> NMIT |
| <input type="checkbox"/> Education Exhibition | <input type="checkbox"/> Other (Please Specify) _____ |

EMERGENCY CONTACT

Please identify the person you would like us to contact in an emergency.

Name:	Mobile:
Phone No: (Day) _____ (Night) _____	Address:
Relationship to you:	

Do you require accommodation to be arranged?

[on-campus subject to availability]

NAC provides information regarding off-campus accommodation if requested

Yes

No