

Auckland South

IMMIGRATION CONSULTANTS

1. Name

2. Gender

Male

Female

3. City & country of birth

4. Passport(s) / Citizenship(s) held:

- a. _____
- b. _____
- c. _____
- d. _____

5. Date of birth _____

6. Partnership status

Single

Separated

Partner

Divorced

Married / In Civil Union

Engaged

Widowed

7. Contact details

a. Current residential address (including country and post code)

b. Most recent overseas address (if currently in New Zealand)

Mobile _____

Landline (home) _____

Email _____

Landline (work) _____

8. Please provide details of all applicants you wish to include in this application:-

Name	Date of Birth	Relationship to You	City & Country of Birth	Citizenship(s)	Partnership Status

9. What is your purpose of visit to New Zealand?

- Tourist
- Employment
- Visiting family & friends
- Residence
- Study

10. How long do you intend to visit New Zealand for?

- Days _____
- Months _____
- Years _____

11. If you wish to undertake any study while in New Zealand, please choose one of the following and provide details:

- Programme/course details _____
- University _____
- Polytechnic _____
- Private Institute _____
- Business School _____
- Secondary/High School _____

12. Are you and/or your partner currently employed? Please provide details.

13. Do you have an offer of employment in New Zealand? If yes, please provide details of the same.

14. Do you have a recognised qualification that you think does not need assessment from the NZQA? Please provide details of qualifications gained in New Zealand if any.

Qualification	University / Institute (including city & country)	Qualification Level (e.g. Bachelor's, Master's, etc.)	Specialisation (if any)	Graduation Date	NZQA Assessment Required

15. Please provide your work experience history. Please include details of self-employment too if applicable.

Name of Company (including city & country)	Industry	Position	Time Period

16. Does your partner have an offer of employment in New Zealand? If yes, please provide details of the same.

17. Does your partner have a recognised qualification that you think does not need assessment from the NZQA? Please provide details of qualifications gained in New Zealand if any.

Qualification	University / Institute (including city & country)	Qualification Level (e.g. Bachelor's, Master's, etc.)	Specialisation (if any)	Graduation Date	NZQA Assessment Required

18. Please provide your partner's work experience history (anywhere). Please include details of self-employment too if applicable.

Name of Company (including city & country)	Industry	Position	Brief Profile	Period

19. Do you and/or your partner have any close family member(s) (parents and/or siblings only) who are citizens/residents of New Zealand?

Name	Date of Birth	Relationship to You / Your Partner	Status in New Zealand (i.e. Citizen, Resident, Permanent Resident)	Contact Details

20. Do you and your partner have the required English proficiency to qualify as applicants for residence? What evidence can you provide to prove the same? Please provide details.

21. Are you pregnant?

- Yes
 No
 Not applicable

22. Do you have any of the following medical conditions?

- Tuberculosis (TB)
 Renal dialysis
 Hospital care
 Residential care
 Other

If you choose any of the above, please provide details.

Email to atesh.narayan@asic.co.nz