New Zealand Diploma in Business

NZQA
NEW ZEALAND QUALIFICATIONS AUTHORITY
MANA TOHU MĀTAURANGA O AOTEAROA

Application for the New Zealand Diploma in Business

PLEASE NOTE: Please hand the completed form in at your teaching institute or send directly to the New Zealand Qualifications Authority .

DO NOT use for ***National Certificates and Diplomas, School Certificate, Sixth Form Certificate, University Entrance, University Bursaries and/or Higher School Certificate)***

All sections of this form must be completed.
PLEASE USE BLOCK LETTERS

1. Surname (family name)

2. First Names (given names). Enter all names in full

NSN (National Student Number)

Date of Birth

Day Month 19 Year

Tick appropriate box

(for statistical purposes only) Female Male

Address

Teaching Institution

Qualification Title:
New Zealand Diploma in Business

Version Number:

Completion Date:

I declare that the particulars given above are correct and authorise the New Zealand Qualifications Authority to collect information from and/or exchange information with any Teaching Institute, Industry Training Organisation or Government Agency with which I am enrolled, or have requested enrolment or funding.

Declaration from Student:

Signed: Date:

Verification from Provider:

Signed: Date:

Please complete and return to:

Tertiary Records
New Zealand Qualifications Authority
PO Box 160
WELLINGTON 6140

Fax: 04 463 3107