

School Form – National Qualifications Framework (NQF) Fees

Return this form to:

Attention: Accounts Receivable

Email: accountsreceivable@nzqa.govt.nz

Facsimile: 04 802 3409

School Name		
Contact Person		Phone:
School MoE Code		
NZQA Debtor Number		
Amount paid	\$ 	Cheque Direct Credit <small>(Please circle one)</small>
<p>For DC: BNZ 02-0536-0370579-00</p> <p>Please include your NZQA debtor number and your MoE Code as references when making payment by Direct Credit.</p>		
Principal's Nominee Signature		
Date	 ____/____/____ 	

For NZQA use only	
Receipt number: _____	Receipt date: ____/____/____
Payment processed by: _____	Processed date: ____/____/____