NEW ZEALAND QUALIFICATIONS AUTHORITY
MANA TOHU MĀTAURANGA O AOTEAROA

NZQA USE ONLY NQF

All sections of this form must be completed. Please print clearly.

National Qualifications Framework Registration Form

Return this form to your teaching institution or your assessor. The Registration fee is $25.00 incl GST.

NSN NUMBER: **(If Known)** | | | | -- | | | | -- | | | | |

Please note that the name entered in this section will appear on your Record of Learning and certificates

Surname (family name)

First names (given names in full)

ADDRESS:

This should be your permanent address, **NOT** a temporary address used while attending a teaching institution.

Date of Birth Day | Month | Year

Local (Providers) Student ID (if applicable)

Tick appropriate box (for statistical purposes only) Male ☐ Female ☐

Tick box(es) next to the ethnic group(s) you feel you belong to (for statistical purposes only)

NZ European/Pakeha ..... ☐
New Zealand Maori ..... ☐
Samoan ..... ☐
Cook Island Maori ..... ☐
Tongan ..... ☐
Niuean ..... ☐
Tokelauan ..... ☐
Fijian ..... ☐
Chinese ..... ☐ Asian ..... ☐ Indian ..... ☐
Other Pacific Island .....
Other .....

Name of Teaching Institution / ITO:

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 Institution, Industry Training Organisation or Government Agency with which I am enrolled, or have requested enrolment or funding.

Signed Date

Teaching Institution or NZQA USE ONLY RC $ Date

New Zealand Qualifications Authority, PO Box 160, Wellington Telephone: 04 802 3000 Fax: 04 802 3107