



Enrolment Application Form 2012

*returning students should complete the Re-Enrolment Application Form 2012

Semester 1 / Semester 2 (cross out that which does not apply)

P O Box 11 311 Ellerslie Auckland 1542

ph 09 579 4997 fax 09 579 4977 email: enquiries@spcnt.ac.nz

INSTRUCTIONS: PLEASE NOTE. *APPLICATIONS CLOSE 6 JANUARY 2012

The purpose of this enrolment form is to obtain from you the information we need to enrol you into a qualification at our College. We also need to collect information from you which is required by the Ministry of Education and other Government agencies for statistical and registration reasons. Please fill in the form properly by:

- Completing all sections of the form.
- Printing your answers clearly in pen, or by ticking the box that applies for multi-choice questions.
- Signing the form.
- Attaching to the form additional documentation that is required for Ministry of Education funding purposes. A description of the required documentation is provided on page 4 of the form.
- Refer Fee Schedule on P6 of this form. Registration Fee will be payable on acceptance of application. EFTPOS available. Sorry, no CC facilities.

A QUALIFICATION						
1	Please tick the name of the qualification you wish to enrol in: *refer to page 6 for information about qualifications	*Bachelor of Natural Medicine <input type="checkbox"/>	<input type="checkbox"/>	Office Use		
		*Dip in Traditional Pasefika Healing <input type="checkbox"/>				
	Qualification Start Date:					
	Qualification End Date (if known):					
2	Have you studied at this Institution before?	Yes <input type="checkbox"/>	No <input type="checkbox"/>			
	If you answered "yes", what was your ID number?					
3	Do you intend to study:	Part time <input type="checkbox"/>	Full time <input type="checkbox"/>	By Distance (D) <input type="checkbox"/>		
4	Please enter the names(s) and costs of the courses you wish to enrol in for Sem 1/Sem 2 2012. Insert D for distance.					
		\$		\$		
		\$		\$		
		\$		\$		
		\$		\$		
B PERSONAL DETAILS						
5	Print your full legal name					
	Family Name:					
	Given Name(s):					
6	Preferred first name:					
	Previous name(s) known by:					
7	If you have previously enrolled at this institution under another name, what was that name?					
8	Preferred title:	Ms <input type="checkbox"/>	Miss <input type="checkbox"/>	Mrs <input type="checkbox"/>	Mr <input type="checkbox"/>	Other (Specify):

9	Date of birth:	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 19 <input type="text"/> <input type="text"/>	9	Gender:	Male <input type="checkbox"/>	Female <input type="checkbox"/>																																																																																																												
		<i>day month year</i>																																																																																																																
10	If you know your NSN (National Student number), please write it here:		<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"/>																																																																																																															
11	Citizenship and Residency: You do need to supply evidence of residence or citizenship	Tick the box which best describes your citizenship or permanent residency status. <i>New Zealand Citizen</i> <input type="checkbox"/> NZL <i>Australian Citizen</i> <input type="checkbox"/> AUS <i>New Zealand Permanent Resident</i> <input type="checkbox"/> NZP <i>Other</i> <input type="checkbox"/> Please specify if "Other": _____ (For students with dual citizenship, specify the country of citizenship of the passport used to enter New Zealand.) If you ticked "Other", please also specify your fee/assistance status: <i>NZAID Scholarship (incl. Aotearoa, short-term training, and post-graduate)</i> <input type="checkbox"/> 01 <i>Full Fee Paying Foreign Student</i> <input type="checkbox"/> 03 <i>Exchange Scheme approved by Ministry of Education</i> <input type="checkbox"/> 04																																																																																																																
12	Ethnicity: What ethnic group(s) do you belong to? You may tick up to three boxes, which apply to you.	<table style="width: 100%; border: none;"> <tr> <td><i>NZ European/Pakeha</i></td><td><input type="checkbox"/></td><td>111</td><td><i>Filipino</i></td><td><input type="checkbox"/></td><td>411</td></tr> <tr> <td><i>New Zealand Maori</i></td><td><input type="checkbox"/></td><td>211</td><td><i>Cambodian</i></td><td><input type="checkbox"/></td><td>412</td></tr> <tr> <td><i>Samoan</i></td><td><input type="checkbox"/></td><td>311</td><td><i>Vietnamese</i></td><td><input type="checkbox"/></td><td>413</td></tr> <tr> <td><i>Cook Island Maori</i></td><td><input type="checkbox"/></td><td>321</td><td><i>Other Southeast Asian</i></td><td><input type="checkbox"/></td><td>414</td></tr> <tr> <td><i>Tongan</i></td><td><input type="checkbox"/></td><td>331</td><td><i>Chinese</i></td><td><input type="checkbox"/></td><td>421</td></tr> <tr> <td><i>Niue</i></td><td><input type="checkbox"/></td><td>341</td><td><i>Indian</i></td><td><input type="checkbox"/></td><td>431</td></tr> <tr> <td><i>Tokelauen</i></td><td><input type="checkbox"/></td><td>351</td><td><i>Sri Lankan</i></td><td><input type="checkbox"/></td><td>441</td></tr> <tr> <td><i>Fijian</i></td><td><input type="checkbox"/></td><td>361</td><td><i>Japanese</i></td><td><input type="checkbox"/></td><td>442</td></tr> <tr> <td><i>Other Pacific Peoples</i></td><td><input type="checkbox"/></td><td>371</td><td><i>Korean</i></td><td><input type="checkbox"/></td><td>443</td></tr> <tr> <td><i>British/Irish</i></td><td><input type="checkbox"/></td><td>121</td><td><i>Other Asian</i></td><td><input type="checkbox"/></td><td>444</td></tr> <tr> <td><i>Dutch</i></td><td><input type="checkbox"/></td><td>122</td><td><i>Middle Eastern</i></td><td><input type="checkbox"/></td><td>511</td></tr> <tr> <td><i>Greek</i></td><td><input type="checkbox"/></td><td>123</td><td><i>Latin American</i></td><td><input type="checkbox"/></td><td>521</td></tr> <tr> <td><i>Polish</i></td><td><input type="checkbox"/></td><td>124</td><td><i>African</i></td><td><input type="checkbox"/></td><td>531</td></tr> <tr> <td><i>South Slav</i></td><td><input type="checkbox"/></td><td>125</td><td><i>Other</i></td><td><input type="checkbox"/></td><td>611</td></tr> <tr> <td><i>Italian</i></td><td><input type="checkbox"/></td><td>126</td><td><i>Not Stated</i></td><td><input type="checkbox"/></td><td>999</td></tr> <tr> <td><i>German</i></td><td><input type="checkbox"/></td><td>127</td><td></td><td></td><td></td></tr> <tr> <td><i>Australian</i></td><td><input type="checkbox"/></td><td>128</td><td></td><td></td><td></td></tr> <tr> <td><i>Other European</i></td><td><input type="checkbox"/></td><td>129</td><td></td><td></td><td></td></tr> </table> <p>Please specify if "Other Pacific Peoples", "Other European", "Other Southeast Asian", "Other Asian" or "Other".</p>					<i>NZ European/Pakeha</i>	<input type="checkbox"/>	111	<i>Filipino</i>	<input type="checkbox"/>	411	<i>New Zealand Maori</i>	<input type="checkbox"/>	211	<i>Cambodian</i>	<input type="checkbox"/>	412	<i>Samoan</i>	<input type="checkbox"/>	311	<i>Vietnamese</i>	<input type="checkbox"/>	413	<i>Cook Island Maori</i>	<input type="checkbox"/>	321	<i>Other Southeast Asian</i>	<input type="checkbox"/>	414	<i>Tongan</i>	<input type="checkbox"/>	331	<i>Chinese</i>	<input type="checkbox"/>	421	<i>Niue</i>	<input type="checkbox"/>	341	<i>Indian</i>	<input type="checkbox"/>	431	<i>Tokelauen</i>	<input type="checkbox"/>	351	<i>Sri Lankan</i>	<input type="checkbox"/>	441	<i>Fijian</i>	<input type="checkbox"/>	361	<i>Japanese</i>	<input type="checkbox"/>	442	<i>Other Pacific Peoples</i>	<input type="checkbox"/>	371	<i>Korean</i>	<input type="checkbox"/>	443	<i>British/Irish</i>	<input type="checkbox"/>	121	<i>Other Asian</i>	<input type="checkbox"/>	444	<i>Dutch</i>	<input type="checkbox"/>	122	<i>Middle Eastern</i>	<input type="checkbox"/>	511	<i>Greek</i>	<input type="checkbox"/>	123	<i>Latin American</i>	<input type="checkbox"/>	521	<i>Polish</i>	<input type="checkbox"/>	124	<i>African</i>	<input type="checkbox"/>	531	<i>South Slav</i>	<input type="checkbox"/>	125	<i>Other</i>	<input type="checkbox"/>	611	<i>Italian</i>	<input type="checkbox"/>	126	<i>Not Stated</i>	<input type="checkbox"/>	999	<i>German</i>	<input type="checkbox"/>	127				<i>Australian</i>	<input type="checkbox"/>	128				<i>Other European</i>	<input type="checkbox"/>	129			
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13	Iwi: If you identified as New Zealand Maori in question 12, what is the name of your Iwi? You may enter more than one Iwi. If you do not know your Iwi, please enter 'Don't Know'.	Iwi: Rohe (Iwi home area): Iwi: Rohe (Iwi home area): Iwi: Rohe (Iwi home area):																																																																																																																
14	Prior activity:	What was your MAIN activity or occupation in New Zealand at 1 October 2012? You may tick only one box. <table style="width: 100%; border: none;"> <tr> <td><i>Secondary school student</i></td><td><input type="checkbox"/></td><td>01</td><td><i>Non-employed or beneficiary (excluding retired)</i></td><td><input type="checkbox"/></td><td>02</td></tr> <tr> <td><i>Wage or salary worker</i></td><td><input type="checkbox"/></td><td>03</td><td><i>Self-employed</i></td><td><input type="checkbox"/></td><td>04</td></tr> <tr> <td><i>University student</i></td><td><input type="checkbox"/></td><td>05</td><td><i>Polytechnic student</i></td><td><input type="checkbox"/></td><td>06</td></tr> <tr> <td><i>College of Education Student</i></td><td><input type="checkbox"/></td><td>07</td><td><i>House-person or retired</i></td><td><input type="checkbox"/></td><td>08</td></tr> <tr> <td><i>Overseas (irrespective of occupation)</i></td><td><input type="checkbox"/></td><td>09</td><td><i>Private training establishment student</i></td><td><input type="checkbox"/></td><td>11</td></tr> <tr> <td><i>Wananga student</i></td><td><input type="checkbox"/></td><td>12</td><td></td><td></td><td></td></tr> </table>					<i>Secondary school student</i>	<input type="checkbox"/>	01	<i>Non-employed or beneficiary (excluding retired)</i>	<input type="checkbox"/>	02	<i>Wage or salary worker</i>	<input type="checkbox"/>	03	<i>Self-employed</i>	<input type="checkbox"/>	04	<i>University student</i>	<input type="checkbox"/>	05	<i>Polytechnic student</i>	<input type="checkbox"/>	06	<i>College of Education Student</i>	<input type="checkbox"/>	07	<i>House-person or retired</i>	<input type="checkbox"/>	08	<i>Overseas (irrespective of occupation)</i>	<input type="checkbox"/>	09	<i>Private training establishment student</i>	<input type="checkbox"/>	11	<i>Wananga student</i>	<input type="checkbox"/>	12																																																																											
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15	In 2012, will you work while studying?	YES/NO	(Cross out which does not apply)																																																																																																															
	If yes, will you work	Full-time/Part-time	(Cross out which does not apply)																																																																																																															

16	<p>Disability: The completion of this question is not compulsory.</p> <p>Do you live with the effects of significant injury, long term illness, or disability? The information you supply is confidential.</p> <p><i>If yes, how would you describe your impairment, disability or long term medical condition:</i></p>	Yes <input type="checkbox"/>	No <input type="checkbox"/>
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C ACADEMIC INFORMATION Complete this section only if this is your first enrolment at SPCNT

17	Secondary School:	<p>What was the name of the last secondary school you attended? State "overseas", if applicable:</p>	<i>Office Use</i>
		<p>What was your last year at secondary school? <input type="checkbox"/><input type="checkbox"/><input type="checkbox"/><input type="checkbox"/></p> <p>What is the highest level of achievement you hold from a secondary school? Your highest achievement may be a "traditional" award such as School Certificate, or you may have achieved a number of credits or a National Certificate at a certain level on the National Qualifications Framework. Your NZQA Record of Learning shows you how many credits you have. Tick only one box.</p> <p><i>No formal secondary qualifications</i> <input type="checkbox"/> 00</p> <p><i>14 or more credits at any level</i> <input type="checkbox"/> 11</p> <p><i>NCEA Level 1 or School Certificate</i> <input type="checkbox"/> 12</p> <p><i>NCEA Level 2 or 6th Form Certificate</i> <input type="checkbox"/> 13</p> <p><i>University Entrance</i> <input type="checkbox"/> 14</p> <p><i>NCEA Level 3 or Bursary or Scholarship</i> <input type="checkbox"/> 15</p> <p><i>Overseas qualification (includes International Baccalaureate & Cambridge Exams)</i> <input type="checkbox"/> 09</p> <p><i>Other</i> <input type="checkbox"/> 98 <i>Not known</i> <input type="checkbox"/> 99</p> <p>Please specify if "Overseas qualification" or "Other".</p> <hr/>	

18	Tertiary Study:	<p>Will this be the first year you have ever enrolled in a University, Polytechnic, College of Education, Private Training Establishment, or Wānanga either in New Zealand or overseas since leaving school? Do not include enrolments in STAR, community or hobby classes.</p> <p>No <input type="checkbox"/> Yes <input type="checkbox"/></p> <p>If you answered "No", please enter the name of the institution you studied at, the year of your first enrolment, and what qualification/s you were awarded:</p> <p>Name _____</p> <p>Year: <input type="checkbox"/><input type="checkbox"/><input type="checkbox"/><input type="checkbox"/></p> <p>What qualification/s were you awarded? _____</p> <p>Do you expect to complete the academic requirements of your course/s in order to graduate from your qualification this year?</p> <p>No <input type="checkbox"/> Yes <input type="checkbox"/></p>
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F CONTACT DETAILS			
21	Address and contact details:	Home Address:	Postal Address: (if different from home address)
		Phone:	Mobile:
		Fax:	Email:
	Next of Kin:	Name:	Phone:
		Fax:	Email:

DECLARATION

Privacy – The College collects and stores information from this form to comply with the requirements of the Ministry of Education (student statistical returns), NZQA (Record of Learning registration and Unit Standard outcomes), Tertiary Education Commission (funding returns), Industry Training Organisations (funding and academic outcomes), Ministry of Social Development (confirmation of enrolment and academic outcomes), Inland Revenue Department (student loan interest rebate), Department of Immigration (if you are not a New Zealand citizen or permanent resident) and Agencies who support particular students through scholarships and prizes, payment of fees or other awards (if you are a recipient of one of these awards). The information is also used to manage internal administrative processes, and for internal reporting. Information about students may be supplied to, and sought from, other educational institutions for the purpose of verifying academic records.

In addition, when required by statute, the College releases information to Government agencies such as the New Zealand Police, Department of Justice, Ministry of Social Development, and the Accident Compensation Corporation (ACC).

In signing this enrolment form you authorise such disclosure on the understanding that the College will observe the general conditions governing the release of information, as set out in the Privacy Act 1993 and the Post-compulsory Unique Identifier Code of Practice. You may see any information held about you and amend any errors in that information. To do so, contact the Registrar.

NB: The Privacy Act came into force on 1 July 1993 with the stated aim of protecting the privacy of natural persons. It requires the Institution to collect, hold, handle, use and disclose personal information in accordance with the twelve information privacy principles in the Act.
<http://www.privacy.org.nz/people/privacy-act>.

Fees – In signing this enrolment form you undertake to pay all fees as they become due, and to meet any late fees and collection charges associated with debt recovery. The College’s policy on withdrawal and refund of fees may be obtained from the Registrar.

Rules – In signing this enrolment form you undertake to comply with the published rules and policies of the College with regard to attendance, academic progress, standard of dress, health and safety, and behaviour.

Declaration – I declare that to the best of my knowledge all the information supplied on, and with, this enrolment form is true and complete, I agree to abide by the conditions described above, and I consent to the disclosure of personal information as described above.

_____ / ____ / ____
 Signature Date

➤ Please make sure that you sign your enrolment form above and return to the Registrar ◀

Office Use Only		
Documentation	Approved	Entered
_____	_____	_____
____/____/____	____/____/____	____/____/____

Please attach all documents and payments here ➔

✂.....

<p>Receipt Received from:</p> <p>Acknowledgment of enrolment application for Bachelor of Natural Medicine/Diploma in Traditional Pasefika Healing/Certificate in Herbal Studies programme</p> <p>For enrolment in courses in Sem 1/2 2012at South Pacific College of Natural Therapies Inc</p>

South Pacific College of Natural Therapies Inc COURSES and FEES 2012

Course fees can be paid by cash, cheque, EFTPOS, or direct credit to Kiwibank 38-9009-0140393-00

Fee Schedule for International Students

Note: Fees include a registration fee of \$500 per year which is non-refundable.

- Bachelor of Natural Medicine course fees for the first year full-time \$10,000.00
- Bachelor of Natural Medicine course fees for the second year full-time \$11,000.00.
- Bachelor of Natural Medicine course fees for the third year full-time \$12,000.00.
- Total fees to be paid over the 3 years for the Bachelor of Natural Medicine programme - \$33,000.00
- Diploma in Traditional Pasefika Healing, one year full-time \$6,000.00

All fees are inclusive of GST.

The tuition costs for overseas students are higher than for New Zealand students. The reason for this is that Government financial assistance is not available to the College for international students. Fees do not include costs for books and materials.

Fee Schedule for Domestic Students

- Note:
1. Some courses have pre-requisites
 2. A registration fee of \$50 per course must be paid each semester, which will be credited toward total fees
 3. Students enrolling for the first time will be required to pay registration fee on acceptance of their enrolment application
 4. Please add \$10 per course for distance learning enrolments.

Bachelor of Natural Medicine

	<i>Course Title</i>	<i>Fee (incl reg fee)</i>
<i>Year 1</i>		
Semester 1	Principals and Practice of Natural Medicine	\$620
	Traditional Practices	\$620
	Anatomy and Physiology 1	\$620
	Foundations of Research	\$620
Semester 2	Anatomy and Physiology 2	\$620
	History, Philosophy & Politics of Western Medicine	\$620
	Herbal Medicine	\$620
	Homeopathy for Acute Conditions OR	\$620
	Therapeutic Massage	\$620

NOTES

The Bachelor of Natural Medicine has four electives which are: Western Herbal Medicine, Homeopathy, Traditional Maori Medicine, Traditional Pasefika Medicine.

If students wish to enrol in the Homeopathy elective of the qualification, please enrol in Homeopathy for Acute Conditions and not in Therapeutic Massage.

Diploma in Traditional Pasefika Healing

A registration fee of \$50 per course must be paid each semester, which will be credited toward total fees. Students enrolling for the first time will be required to pay all fees on acceptance of their enrolment application .

	<i>Course Title</i>	<i>Fee (incl reg fee)</i>
Semester 1	Living Healthily	\$555
	Traditional Practices	\$620
	The Body	\$555
	Common Diseases	\$555
Semester 2	Therapeutic Massage	\$620
	Healing Herbs	\$555
	Healing Observation	\$620
	Practising as a Healer	\$555

- Please remember to complete and return the attached Student Fee Protection Form.

CERTIFICATE IN HERBAL STUDIES

\$1600 (INCL GST)

STUDENT ACKNOWLEDGMENT

Explanatory Note to Student Acknowledgment

1. The purpose of the Student Acknowledgment form below is to make sure that:
 - (a) you understand what happens to any refunds (if there are any) of your student fees if your course closes (your Entitled Student Amount); and
 - (b) you provide the necessary information about yourself and your student fees.
2. By signing the Student Acknowledgment form below you are agreeing that:
 - (a) You understand that if your course closes (a Course Closure Event), it will be the trustee's duty to make sure the correct amounts of any refunds (if there are any), are distributed out in accordance with the Deed and the New Zealand Qualifications Authority Policy. As such, your refunds may need to be paid to another PTE if you enrol in another course (the Alternative Provider), your student loan provider such as Study Link (the Loan Provider), yourself, or anyone else who should be paid you refund (such as any person who may have paid your fees for you) (the Third Party).
 - (b) You understand that your personal information about yourself will be given to your PTE, The New Zealand Qualifications Authority and your trustee.
3. Please read the Student Acknowledgment carefully before signing.

FORM OF STUDENT ACKNOWLEDGMENT

4. By this document, I _____ of _____ declare that I am enrolling as a Student at South Pacific College of Natural Therapies ("PTE").

I understand that after I sign this document I cannot withdraw this authorisation to the Trustee. I acknowledge and agree that:

if a Course Closure Event occurs and I transfer to an Alternative Provider with the approval of the Qualifications Authority, any amount agreed by me, up to the Entitled Student Amount attributable to me will be transferred from the Trust Fund to that Alternative Provider;

if a Course Closure Event occurs and I owe money to a Loan Provider in respect of that Course, the Trustee is authorised to repay the Tuition Fees portion of the Entitled Student Amount attributable to me, less any amount transferred to an Alternate Provider, directly to that Loan Provider to the extent required to settle the amount due to the Loan Provider;

subject to 2(b) above, if a Course Closure Event occurs and the Trustee refunds any amount directly to me, the Trustee will refund the Entitled Student Amount attributable to me by way of direct credit to my bank account or cheque posted to my last known postal address notified to that Trustee;

if another party is entitled to receive any refund of the Entitled Student Amount attributable to me, I will provide the Trustee with the contact details of that party (as required by paragraph 4 below) to which the refund should be sent;

personal information about me and information about my Student Fees may be supplied by the PTE to the Qualifications Authority, Auditor or the Trustee and by the Trustee or Auditor to the Qualification Authority;

