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| **2024 유학생 입학원서**   |  |  | | --- | --- | | Return to: The Registrar  PO Box 12747 Penrose  Auckland 1642  New Zealand | Phone: +64 9 580 1500  Fax: +64 9 579 5150 Email: info@acnz.ac.nz  Web: [www.acnz.ac.nz](http://www.acnz.ac.nz)  Physical address: 60 Rockfield Road, Penrose, Auckland 1061, New Zealand | | **알파크루시스에 오신 것을 환영합니다! 이 지원서를 기록하시기 전에 아래 지침을 주의깊에 읽어주십시오!** | | | | | | | | | | | | | | | | | | | | | |
| **지침 (INSTRUCTIONS)** | | | | | | | | | | | | | | | | | | | |
| The purpose of this enrolment form is to obtain from you the information we need to enrol you into a qualification or course at our organisation. We also need to collect information from you which is required by 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. (amend as necessary for digital enrolment process) * Signing the form. * Attaching to the form additional documentation that is required for government funding purposes. A description of the required documentation is provided on page 6 of the form. | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | |
| **A 자격 (QUALIFICATION)** | | | | | | | | | | | | | | | | | | | |
| **1** | What qualification do you intend to enrol in (please tick one)? | | | | | | | | | |  | | | | | | | *Office Use* | |
|  | *Diploma in Theological Studies (Level 5)*  *현대 목회학 Bachelor of Contemporary Ministry (Level 7)* | | | | | | | | | |  | | | | | | |  | |
|  | **What semester do you wish to begin your study?**  *2024년 1학기Semester 1 2024*  *2024년 2 학기Semester 2 2024* | | | | | | | | | |  | | | | | | |  | |
| **2** | 저희 학교에서 공부한 적이 있습니까?  Have you studied at this college before? | | | | | | | | | | *Yes  No* | | | | | | | | |
| **3** | 어떤 형태로 학업을 원하십니까Do you intend to study:  *파트타임Part time*  *풀타임 Full time*  *캠퍼스에서 On Campus  다른지역에서 Distance* | | | | | | | | | | **기본적인 컴퓨터 사용이 가능하십니까**  **Do you have basic computer skills and access to a computer?**  **아래 주어진 학업량에 따라 맞추실수 있습니까?**  **Can you devote the recommended hours below towards each subject/paper per week?**  15 credits paper (8 - 10 hours p/w)  30 credits paper (18 – 20 hours p/w) | | | | | | | | |
| **4** | 어덯게 알파크루시스 컬리지에 대해 들으셨나요?  How did you hear about the College? | | | | | | | | | | AC Website AC Student  AC Staff Church  Word of mouth Direct Mail  Conference Advertising  Email Radio  Newspaper Magazine  Other | | | | | | | | |
| **B 개인정보 (PERSONAL DETAILS) (all fields compulsory)** | | | | | | | | | | | | | | | | | | | |
| **5** | **Print your full legal name:**  *성 Family Name:* | | | | | | | |  | | | | | | | | | | |
|  | *이름 Given Name(s):* | | | | | | | |  | | | | | | | | | | |
| **6** | 선호하는 이름 Preferred first name: | | | | | | | |  | | | | | | | | | | |
|  | 전에 알려진 다름 이름  Previous name(s) known by: | | | | | | | |  | | | | | | | | | | |
| **7** | 우리학교에 다른 이름으로 등록하신적이 있으시다면 어떤 이름을 사용하셨나요?  If you have previously enrolled at this organisation under another name, what was that name? | | | | | | | |  | | | | | | | | | | |
| **8** | 타이틀  Preferred title: | *Ms* | | |  | | *Miss* |  | *Mrs* |  | *Mr* |  | | *Other (Specify):* |  | | | | |
| **9** | **생년월일**  **Date of birth:** | *day month year* | | | | | | | | **10** | 성별  Gender | | | *남 Male*  *여 Female*  *Another Gender* | | | | | |
| **10** | 뉴질랜드 학생번호 (NSN)가 있으시다면 기재해주십쇼  If you know your NSN (National Student Number), please write it here. | | | | | | | | | | *--* | | | | | | | | |
| **11** | **시민권과 영주권:**  **Citizenship and Residency:**  You may need to supply evidence of residence or citizenship | | | | | Tick the box which best describes your citizenship:  *뉴질랜드 시민권자New Zealand Citizen*  NZL , go to 12a  *호주 시민권자 Australian Citizen*  AUS, go to 12a  *다른 Other*  만약 다른이시라면 If “*Other*”,  Please specify your Country of Citizenship (For students with dual citizenship, specify the country of citizenship of the passport used to enter New Zealand.):  어느나라의 시민권을 소요하고 계신지 적어주세요  Country of Citizenship: **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  뉴질랜드 영주권 혹은 호주 영구 영주자 이실 경우 아래 체크해주세요  Tick the box if you have New Zealand or Australian Permanent Resident Status:  뉴질랜드 영주권자New Zealand Resident Visa Holder  호주 영구 영주권자Australian Permanent Resident | | | | | | | | | | | | | |
| **12a** |  | | | | | 학업을 하시는 동안 어디에서 지내실건지 체크 해주십쇼  During your time studying in this qualification will you be resident in New Zealand or overseas?  *In New Zealand  Overseas* | | | | | | | | | | | | | |
| **12b** |  | | | | | 어떤 신분으로 공부하시는지 체크해주십쇼:  Please also specify your fee/assistance status.   * *영주권 학생Domestic Student\**  00 * *NZAID Student*  01 * *유학생International Fee-Paying Student*   *(including people on current work visa)*  03   * *Student on a recognised exchange scheme*  04 * *Foreign Research Based Post-Graduate\*\**  06 * *Diplomatic staff or family, or persons*  08   *associated with Antarctic Programme*   * *International On-Shore PhD student*  09 * *International student doing ITO off-job training*  12 * *Refugee or protected person, yet to be granted a resident visa;*  13   *the immediate family [[[1]](#footnote-1)], also without a resident visa, of a person with refugee or protected person status; and those who have made a claim to be recognised as a refugee or protected person*   * *2021 Resident Visa pathway, children aged 25 years or under*  14   *on 1 January 2022 and residing in New Zealand, of a person on an eligible work visa for the 2021 Resident Visa [[[2]](#footnote-2)]*  ***Note****: \* Always use 00 for New Zealand Citizen; use 00 for New Zealand resident visa holder and Australian Citizen or Australian Permanent Resident residing in New Zealand during the time studying this qualification.*  *\*\* Use 06 for a student enrolled in a programme of study that is:*   * *A PhD (level 10 on the NZQF); and* * *Wholly research (for example, 120-point thesis)*   *Use 03 for an international student enrolled in a programme of study that is a Masters (Level 9 on the NZQF) or a Doctoral Programme, excluding PhDs (Level 10 on the NZQF).* | | | | | | | | | | | | | |
| **13** | **인종Ethnicity:**  어느 인종에 속하십니까?  What ethnic group(s) do you belong to?  해당되신다면 세개의 칸까지 표시가 가능하십니다.  You may tick up to three boxes, which apply to you. | | | | | *New Zealand European* *111 Filipino**411*  *Māori**211 Cambodian* *412*  *Samoan* *311 Vietnamese* *413*  *Cook Islands Maori* *321 Other Southeast Asian* *414*  *Tongan* *331 Chinese* *421*  *Niuean* *341 Indian* *431*  *Tokelauan* *351 Sri Lankan* *441*  *Fijian**361 Japanese**442*  *Other Pacific Peoples*  *371 한국인Korean**443*  *British and Irish* *121 Other Asian**444*  *Dutch**122 Middle Eastern* *511*  *Greek**123 Latin American* *521*  *Polish* *124 African* *531*  *South Slav* *125 Other Ethnicity* *611*  *Italian* *126 Not Stated* *999*  *German* *127*  *Australian* *128*  *Other European*  *129*  If *“Other Pacific Peoples”, “Other European”, “Other Southeast Asian”, "Other Asian"* or *"Other” please specify what specific ethnicity below.* | | | | | | | | | | | | | |
| **14** | **Iwi:**  If you identified as Māori in question 13, 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'.  Note: please use the iwi codes published in SDR Manual appendices. | | | | | | | | *Iwi:*  *Rohe (Iwi home area):*  *Iwi:*  *Rohe (Iwi home area):*  *Iwi:*  *Rohe (Iwi home area):* | | | | | | | | | | |
| **15** | **Prior activity:**  **과거활동:**  **(2023년 10월 이후로 하셧던 활동을 적어주십쇼)** | | | What was your MAIN activity or occupation in New Zealand on 1 October 2022 – that is before you began your study. You may tick only one box.  Secondary school student 01 Non-employed or beneficiary (excluding retired)  02  Wage or salary worker 03 Self-employed 04  University student 05 Polytechnic student 06  House-person or retired08 Overseas (irrespective of occupation) 09  Private Training Establishment student11 Wānanga student12 | | | | | | | | | | | | | | | |
| **16** | **장애 Disability:**  귀하는 심각한 부상이나 장기적인 병 혹은 장애를 가지고 계십니까?   * 제공하신 정보는 유츌되지 않습니다.   Do you live with the effects of significant injury, long term illness, or disability?  The information you supply may be used to offer individual disability support.  만약 “예” 라고 하셧다면 짧게 확인란 아래 단어로 적어주시면 감사하겠습니다. | | | | | | | | | | | | *Yes* | | | *No* | | | |
| **C 학업 정보 (ACADEMIC INFORMATION)** | | | | | | | | | | | | | | | | | | | |
| **17** | **고등학교:**  **Secondary School:** | | What was the name of the last secondary school you attended? State “overseas”, if applicable. | | | | | | | | | | | | | | *Office Use* | | |
|  |  | | 고등학교 졸언년도What was your last year at secondary school? | | | | | | | | | | | | | | | | |
|  |  | | 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 Achievement shows you the standards, credits and qualifications you have achieved. Tick only one box. | | | | | | | | | | | | | | | | |
|  |  | | *No formal secondary qualifications* | | | | | | | | | | | | | | | | *00* |
|  |  | | *14 or more credits at any level* | | | | | | | | | | | | | | | | *11* |
|  |  | | *NCEA Level 1* ***or*** *School Certificate* | | | | | | | | | | | | | | | | *12* |
|  |  | | *NCEA Level 2* ***or*** *6th Form Certificate* | | | | | | | | | | | | | | | | *13* |
|  |  | | *University Entrance* | | | | | | | | | | | | | | | | *14* |
|  |  | | *NCEA Level 3* ***or*** *Bursary* ***or*** *Scholarship* | | | | | | | | | | | | | | | | *15* |
|  |  | | *Overseas qualification (includes International Baccalaureate & Cambridge Exams)* | | | | | | | | | | | | | | | | *09* |
|  |  | | *Other* | | | | | | | | | | | | | | | | *98* |
|  |  | | *Not Known* | | | | | | | | | | | | | | | | *99* |
|  |  | | Please specify if “*Overseas qualification*” or “*Other*”. | | | | | | | | | | | | | | | | |
|  |  | |  | | | | | | | | | | | | | | | | |
| **18** | **대학교**  **Tertiary Study:** | | 시작하시려고 하시는 이 학업이 대학교육을 받으시는 첫번쨰 교육이시라면 아래 확인란에 체크 해주시면 감사하겠습니다.  Will this be the first time you have ever enrolled in a University, Subsidiaries of Te Pūkenga (*Institutes of Technology or* *Polytechnic*), College of Education, Industry Training Organisation, Government Training Establishment, Private Training Establishment or Wānanga either in New Zealand or overseas **since** leaving school? Do not include enrolments in community classes.  *No*  *Yes*  만약 첫번쨰 대학교육이 아니시라면 공부하셨던 대학교에 이름을 기재해주십시요.  If you answered “*No*”, please enter the name of the organisation you studied at and the year of your first enrolment:  대학교 이름Name:  졸업년도Year: | | | | | | | | | | | | | | | | |
|  |  | | 지금 시작하시려고 하시는 이 학업을 마치시려고 하는 년도는 언제 이신가요?  (본 과정은 3년 과정입니다.)  What year do you expect to complete the academic requirements of your course/s in order to graduate with your qualification?  Year: | | | | | | | | | | | | | | | | |
| **19** | **과거 학업 성취:**  **Prior Achievement:** | | Please list all of the tertiary qualifications you hold, the month and year you completed each and the tertiary education organisation that it was completed at. Alternatively attach your academic transcript from the tertiary education organisation and/or a copy of your NZQA record of achievement.   |  |  |  | | --- | --- | --- | | 대학교이름  Tertiary education organisation | 자격증  Qualification | 졸업날짜 (월 / 년)  Month and year of completion | |  |  |  | |  |  |  | |  |  |  | |  |  |  | |  |  |  | |  |  |  | |  |  |  | | | | | | | | | | | | | | | | | |

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| **D 서류 (DOCUMENTATION)** | | | | | |
|  | | To be treated as a **domestic student**, and so be entitled to the Government tuition subsidy, you must be:   * a citizen of New Zealand (including students from the Cook Islands, Tokelau, or Niue who have New Zealand citizenship) **or** * a permanent resident of New Zealand **or** * a citizen or permanent resident of Australia residing in New Zealand **or** * a citizen of New Zealand (including students from the Cook Islands, Tokelau, or Niue who have New Zealand citizenship).   If you are studying overseas full-time and face-to-face at a campus or delivery site of a New Zealand tertiary education organisation (TEO), you may also qualify as a domestic student if   * you are a permanent resident of New Zealand or a citizen or permanent resident of Australia **and** * you are studying in an approved country **and** * the overseas study is Level 7 or above on the New Zealand Qualification Framework.   The 29 approved countries are in the Asia, Latin America and Middle East regions. A full list is available on the [Education New Zealand website](https://enz.govt.nz/assets/Uploads/Approved-countries-list3.pdf).  You must provide evidence of citizenship or permanent residency. To do so you must produce one of the following:   * Birth certificate with place of birth stated as New Zealand, Cook Islands, Tokelau, or Niue. * New Zealand passport. * A certificate of identity. * A statement of Whakapapa, including date of birth, countersigned by a kaumatua. * A New Zealand certificate of citizenship. * Overseas passport with residency stamp.   You can bring the original documentation to the enrolment desk, alternatively please provide a certified copy. This means a photocopy, photograph or scanned copy of your original document, signed as being a true and accurate copy by a Justice of the Peace (JP), Barrister or Solicitor, Notary Public, Court Register or Deputy Registrar, Member of Parliament, Land Transport New Zealand, Public trust, or local authority employee designated for this purpose. When a learner is in a remote community and unable to access a person listed in the Oaths and Declarations Act, a member of the New Zealand Police, school principal, minister of religion, or general practitioner is acceptable.  **(유학생일시 여권과 비자서류를 제출해주셔야 합니다)**  **International** students must bring their passport with them when they enrol.  **Please note that your name, date of birth and residency as entered on this enrolment form will be included in the National Student Index, and will be used in an Authorised Information Matching programmes with official governement information such as the New Zealand Birth Register, to verify the information provided.**  **On occasion, more than one National Student Number is created for an individual. The Ministry regularly monitors the quality of the National Student Index and, when duplicates or errors are discovered,  it works with providers and government agencies to merge duplicates and correct errors. This may require the documentation you provide at enrolment being shared between agencies authorised to access the National Student Index to make these corrections.**  **For further information please see:** [National Student Number (NSN): for schools – Education in New Zealand](https://www.education.govt.nz/school/managing-and-supporting-students/national-student-number-nsn-for-schools/) | | | |
| **20** | | 입학신청시 입학 신청서와 함께 학교에 제출하셨던 서류들을 기재해주십시요.  Please list here all documents that you have attached to this enrolment form. Documents should be securely stapled to the back of the form. | |  | |
| **E 연락처 (CONTACT DETAILS)** | | | | |
| **21** | 집주소와 연락처:  Home Address and contact details: | *Home Address:*  *Street Address:*  *Suburb:*  *Town/City:*  *Post Code:* | | *Postal Address: (if different from home address)*  *Street Address:*  *Suburb:*  *Town/City:*  *Post Code:* |
| *Phone:* ( ) | | *Mobile:* |
|  | | |
| *Email:* | | |
| **22** | 학업기간동안의 주소와 연락처:  Address While Studying: | *Address while Studying*  *(위에 기재해주신 정보와 다르다면 적어주십시요if different from home address):*  *Street Address:*  *Suburb:*  *Town/City:*  *Post Code:* | | |
|  | *Phone: ( )* | | *Mobile:* |
|  | | *Email:* |
| 친족Next of Kin: | *Name:* | | *Phone: ( )* |

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| --- | --- | --- |
| **사진사용 동의**  **Consent to use Photos and Videos:**  Do you give consent to Alphacrucis College New Zealand (ACNZ) for the use of photographs, audio/visual recordings and written/oral testimonials of yourself for the purpose of producing promotional/advertising materials and development of the website for the College?  Yes  (동의 하신다면 체크해주시고 아래 란에 부탁드립니다. Please enter your name and signature below)  No  *(동의하지 않으시다면 “선언”칸으로 넘어가 주셔도 됩니다. Go to declaration section)*   * I understand that these materials may be published on the internet and/or other media and be distributed to the public. * I understand that ACNZ owns all copyrights to these materials, and I release ACNZ and its employees from any and all claims of any nature whatsoever which now or in the future have in connection with these materials, including but not limited to claims based on defamation, copyright infringement, trademark infringement or infringement on my right of privacy or my right to publicity. * I understand that I will not be entitled to any reimbursement (monetary or otherwise) for the creation of these materials. * I understand that I have the right to request erasure of any part of a recording at the time of its creation or within 3 days thereafter. * I understand that a copy of any recording will be made available to me for viewing on request.   학생성명Name of student:  사인 Signature:  날짜 Date: | | |
| **USE OF INFORMATION AND PRIVACY STATEMENT**  **Privacy** – Alphacrucis College New Zealand (ACNZ) collects and stores information from this form to:   * manage the business of ACNZ (including internal reporting, administrative processes and selection of scholarship and prize winners) * comply with the requirements of the [Education and Training Act 2020](http://www.legislation.govt.nz/act/public/2020/0038/latest/LMS170676.html?search=qs_act%40bill%40regulation%40deemedreg_Education+and+Training+Act+2020_resel_25_h&p=1&sr=1) and other legislation[[[3]](#footnote-3)] relating to maintenance of records * supply information to government agencies and other organisations as set out below.   In signing this enrolment form you authorise the disclosure of your personal information on the understanding that ACNZ will comply with the legal requirements in relation to the use and disclosure of personal information, as set out in the Privacy Act 2020, the Education and Training Act 2020 and other relevant legislation. You are entitled to see any information that ACNZ holds about you and request to correct any errors in that information. To do so, contact the Registrar.  NB: The Privacy Act 2020 has the stated aim of protecting the privacy of individuals. It also governs the collection, use, storage, and disclosure of personal information.  The Privacy Act requires ACNZ to collect, hold, handle, use and disclose personal information in accordance with the twelve information privacy principles in the Act.  <https://www.legislation.govt.nz/act/public/2020/0031/latest/LMS23223.html>  *Supply of information to government agencies and other organisations*  ACNZ supplies data collected on this form to government agencies, including:   * the Ministry of Education * Education New Zealand * the New Zealand Qualifications Authority * the Tertiary Education Commission * the Ministry of Social Development (in relation to student loans and allowances) and Inland Revenue (student loans) * Immigration New Zealand (for those who are not New Zealand citizens or permanent residents) and the Ministry of Business, Innovation and Employment * agencies which support particular students through scholarships, payment of fees or other awards (if you are a recipient of one of these awards).   Those agencies use the data collected from ACNZ to:   * administer the tertiary education system, including allocating funding and the administration of the Fees-Free and Fees-Free Trades Training initiatives * develop policy advice for government * conduct statistical analysis and research.   Your personal details (name, date of birth and residency) as entered on this form will be included in the National Student Index and may be used in an authorised information matching programme with the New Zealand Birth Register.  The government agencies above may supply data collected on this form to Statistics New Zealand for the purposes of integrating data with data collected by other government agencies, subject to the provisions of the Statistics Act 1975. Integrated data is used for the production of official statistics, to inform policy advice to government and for research purposes.  In handling data supplied by you on this form, the government agencies are required to comply with the provisions of the Privacy Act 2020.  When required by law, ACNZ releases information to government agencies such as the New Zealand Police, Department of Justice, Ministry of Social Development, and the Accident Compensation Corporation (ACC).  Information collected on this form may be supplied to other educational organisations for the purpose of verifying academic records.  **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. ACNZ’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 ACNZ regarding attendance, academic integrity and progress, conduct and use of information systems. | | |
| **선언 DECLARATION** | | |
| In signing this Declaration:  1. I undertake to pay all fees as they become due, and to meet any late fees and collection charges associated with debt recovery. ACNZ’s policy on withdrawal and refund of fees may be obtained from the Enrolments Officer. ACNZ has appointed the Public Trust as Trustee of our student fee protection arrangement. This arrangement has been accepted by the New Zealand Qualifications Authority as meeting the requirement of the Education Act 1989 and the Student Fee Protection Rules 2013.)  2. I undertake to comply with the rules, regulations, and policies of ACNZ, in particular with regard to attendance, academic integrity and progress, copyright, standard of dress, health and safety, behaviour and conduct and use of information systems.  **Declaration of Conflict of Interest** - In accordance with NZQA rules, ACNZ requires all directors, Council members and senior staff to make a declaration regarding any conflict of interest they may have due to involvement with other organisations. The declaration is fully detailed on the website a [www.acnz.ac.nz/conflict](http://www.acnz.ac.nz/conflict) of interest. In signing this enrolment form I acknowledge that this information is available to me.  이 정보는 자격 취득, 내부 행정 절차 관리 및 내부보고를 위해 학생을 선발하는데도 사용됩니다. 학생들에 관한 정보는 학업 기록을 검증 할 목적으로 다른 교육 기관에 공급되거나 다른 교육 기관에서 찾을 수 있습니다.  **비용** – 이 원서에 서명할 때 귀하는 기간내에 학비를 지불하고 채무 복구와 관련된 연체료 및 징수료를 지불해야 합니다. 알파크루시스 학교의 자퇴 및 환불 정책에 대해서는 등록 담당관에게 문의 하십시오.  **규칙들** – 이 원서에 서명할 때 귀하는 알파크루시스 학교의 출석, 학업 성실성 및 진보, 정보 시스템의 운영 및 사용과 관련하여 게시된 규칙 및 정책을 준수해야 합니다.  **이해관계 상충 선언** – NZQA의 규정에 따라 알파크루시스 학교는 모든 이사,협의회 구성원 및 고위 직원이 다른 조직과의 관계로 인해 발생할 수 있는 이해 상충에 대한 선언을 필요로 합니다. 선언문은 웹싸이트 [www.acnz.an.nz/conflict](http://www.acnz.an.nz/conflict) 에 자세히 설명되어 있습니다. 이 원서에 서명할 때 나는 이 정보가 내게 있음을 인정합니다. | | |
| **선언 – 본인은 본인이 알고 있는 한, 등록양식에 제공된 모든 정보가 사실이며 완전함을 선언하고, 상기 조건을 준수할 것에 동의하며 위에 설명한 개인 정보 공개에 동의합니다.**  **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*  If you are under 18 years of age a parent/guardian must complete and sign the section below to acknowledge acceptance of this declaration  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_/\_\_\_\_\_\_\_\_\_\_/\_\_\_\_\_\_\_\_\_\_\_  Parent/Guardian Signature Date  Print Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Address\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Phone\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Mobile\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Email\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | |
| **⮚ *Please make sure that you sign your enrolment form above* ⮘** | | |
| ***Office Use Only*** | | |
| ***Documentation***  *\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*  *\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_* | ***Approved***  *\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*  *\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_* | ***Entered***  *\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*  *\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_* |

1. [↑](#footnote-ref-1)
2. [↑](#footnote-ref-2)
3. This includes legislation governing the maintenance of official records and for accountability for public funding. [↑](#footnote-ref-3)