



SHORT COURSE APPLICATION FORM

OFFICIAL USE ONLY - ID NUMBER

<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"/>							

WHO SHOULD COMPLETE THIS FORM?

- Applicants for Compact Courses
- Applicants for Short Courses (courses that do not have academic credit)
- Applicants for Certificates of Personal Interest

WHO SHOULD NOT COMPLETE THIS FORM?

- Applicants for courses that have academic credit
- Existing AUT students or those that have studied here before. You can apply over the phone - please contact the Student Hub on 0800 AUTUNI (0800 288 864)

SECTION ONE PERSONAL DETAILS

1.1 Title Mr Ms Mrs Miss Other

1.2 Surname or family name
(as appears on your passport, birth certificate or marriage certificate)

1.3 First name(s)

1.4 Preferred first name

1.5 Date of birth

1.6 Gender Male Female Gender Diverse

1.7 Please provide your NSI/NZQA identification number.
If unknown, please leave blank:

SECTION TWO CONTACT DETAILS

2.1 **What is your main contact address?**
Please note: This will be used to post all correspondence to. Please ensure this is kept up-to-date at all times and advise us if it changes.

2.2 Street number and name

2.3 Suburb

2.4 City/Town

2.5 Post code

2.6 Telephone

2.7 Mobile

2.8 Work

2.9 Email

2.10 **What is your alternative contact address?**

2.11 Street number and name

2.12 Suburb

2.13 City/Town Post code

2.14 **Emergency contact**

2.15 Name

2.16 Relationship to you?

2.17 Telephone

SECTION THREE CITIZENSHIP

3.1 Please tick one of the boxes below that applies to you:

New Zealand citizen New Zealand resident

Refugee status International student

Australian citizen or permanent resident Diplomatic staff or family

3.2 If you are a NZ resident, International student, diplomatic staff or family or have refugee status, please give country of citizenship:

SECTION FOUR ETHNICITY

4.1 Please indicate which ethnic group(s) you belong to.
You may tick up to three options:

New Zealand European/Pākehā New Zealand Māori

Samoan Cook Island Māori

Tongan Niuean

Tokolauan Fijian

British/Irish Dutch

Greek Middle Eastern

Polish South Slav

Italian German

Australian Filipino

Cambodian African

Vietnamese Chinese

Other Southeast Asian Indian

Sri Lankan Japanese

Korean Latin American

Not stated Other

Other Pacific Peoples - please state here:

Other Asian - please state here

4.2 If you are of Māori descent, please state the Iwi with which you have the strongest affiliation:

SECTION FIVE COURSE SELECTION

5.1 Please specify which short course you are applying for at AUT in order of preference. Programme and paper codes can be found by visiting our website at: www.aut.ac.nz

COURSE NAME:	<input type="text"/>		
PAPER CODE:	<input type="text"/>	PROGRAMME CODE:	<input type="text"/>
FEE:	<input type="text"/>	START DATE	<input type="text"/>

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FEE:	<input type="text"/>	START DATE	<input type="text"/>

SECTION SIX STATISTICAL INFORMATION

- 6.1 Why did you decide to study at AUT University (please tick one)
- AUT's reputation in your chosen programme(s)
- AUT's reputation as a university
- Information from a secondary school careers advisor
- Information from a family member or friend
- Information from an AUT staff member
- Information from an employer
- Only AUT offers your chosen programme
- AUT is close to your home/location
- AUT offered you study assistance (e.g. fees scholarship)
- Your application to study at another university was unsuccessful
- Other- please state:

SECTION SEVEN DISABLED STUDENTS AND DEAF STUDENTS

- 7.1 Do you have an impairment, disability, medical condition, or are you deaf?

Yes No - **please go to section eight**

- 7.2 If yes, please indicate by ticking the appropriate box below.

- Deaf Hearing impairment
- Blind Vision impairment
- Specific learning disability Medical
- Head injury Mental health
- Mobility/physical Speech impairment
- Temporary impairment

Other - please state:

- 7.3 Does your impairment, disability, medical condition, or being Deaf affect your ability to study?

Yes No - **please go to section eight**

It is important to complete this section. If you tick yes, you will be sent information on the services available to students. The information you supply is confidential.

FOR MORE INFORMATION

If you need help or assistance in filling out this form, please contact the Student Hub. Our friendly staff will be able to assist you through the application process and help answer any queries you may have.

Phone: 0800 AUT UNI (0800 288 864)

Online: www.aut.ac.nz/studenthub

City Campus Student Hub

Level 2 (ground entry), WA Building
55 Wellesley Street East, Auckland Central

North Campus Student Hub

Ground level, AG building and Level 2, AS building
90 Akoranga Drive
Northcote
Auckland

South Campus Student Hub

Level 1, MA Building and Level 1, MB building
640 Great South Road
Manukau Auckland

SECTION EIGHT METHOD OF PAYMENT

Payment of course fees must accompany this form in order for us to process your application.

- 8.1 Please state the total course fees in the box below

Course fee (GST included): \$

- 8.2 How do you intend to pay for your study?

- Cash
- Cheque
- Please invoice my employer*
- Credit card - please fill out table below:

CREDIT CARD PAYMENT

CREDIT CARD TYPE:	<input type="checkbox"/> Visa <input type="checkbox"/> Master Card
CREDIT CARD NUMBER:	<input type="text"/>
CARDHOLDERS NAME:	<input type="text"/>
EXPIRY DATE:	<input type="text"/>
CARDHOLDERS SIGNATURE:	<input type="text"/>

Payment is required in advance of the course start date.

Please do not post cash. Cash payments must be made in person at the Cashiers located at the Student Hub. Cash cannot be accepted after 3pm.

Cheques should be made payable to Auckland University of Technology and posted to University Admissions Office, Private Bag 92006, Auckland 1142.

* Please provide a letter of guarantee or purchase order from your employer for the full amount of the fees specified, including the contact persons name and billing details.

Valid travel and medical insurance is mandatory for international students and can be purchased from AUT. Please contact the Student Hub for more information.

SECTION NINE APPLICANT SIGNATURE

Your signature:

Date:

WHERE TO SEND THIS FORM

Please return this form to: University Admissions Office
AUT
Private Bag 92006
Auckland 1142