



# Short Course Enrolment

Welcome to Otago Polytechnic. We hope your time with us is enjoyable and you find your study beneficial. If you have any questions about your enrolment please call Customer Services to discuss them or phone us on 0800 762 786.



## 1) Course/s Enrolling Into:

Start Date: \_\_\_\_\_  
Start Date: \_\_\_\_\_

## 2) Personal Details Please print your legal name in full.

Family name \_\_\_\_\_  
Given name(s) \_\_\_\_\_  
If you are not commonly called by your legal given name what do you prefer to be called?  
Preferred given name \_\_\_\_\_  
What is your date of birth? (e.g. 01/07/1975)    /    /  
What is your title?     Miss  Mrs  Ms  Mr  Dr  Other: \_\_\_\_\_  
What is your gender?     Female     Male  
Have you been enrolled previously at Otago Polytechnic?     Yes  No  
Previous family name(s) \_\_\_\_\_  
Previous given name(s) \_\_\_\_\_

## 3) Citizenship and Ethnicity

New Zealand citizen (including Cook Islands, Tokelau, or Niue)     New Zealand permanent resident  
 Australian Citizen or Permanent Resident     Other

## 4) Contact Details

Home Address \_\_\_\_\_ Town/City \_\_\_\_\_  
Telephone (0 ) \_\_\_\_\_ Cellphone \_\_\_\_\_  
Email Address \_\_\_\_\_  
Employer name and address (if applicable)  
Company Name \_\_\_\_\_ Town/City \_\_\_\_\_  
Work Address \_\_\_\_\_ Telephone (0 ) \_\_\_\_\_

## EMERGENCY CONTACT

In an emergency, who do you want us to contact?

Name \_\_\_\_\_ Relationship (e.g. friend, mother, whanau) \_\_\_\_\_  
Home Telephone (0 ) \_\_\_\_\_ Cellphone \_\_\_\_\_

## 5) Payment

Self     Employer

## 6) Student Signature

Date    /    /

## Cancellation

By signing above, I am aware of the Cancellation of Courses and Policy that allows Otago Polytechnic to elect not to run a particular course. Enrolment in this course is conditional upon and subject to sufficient numbers of students enrolling in this course.

With which ethnic group(s) do you identify?  
(you can tick up to 3 boxes)

If you are NZ Māori, state ALL Iwi to which you affiliate.

NZ European/Pakeha  
 NZ Māori  
Iwi - \_\_\_\_\_  
Iwi - \_\_\_\_\_  
Iwi - \_\_\_\_\_  
 British/Irish  
 Dutch  
 Greek  
 Polish  
 South Slav  
 Italian  
 German  
 Australian  
 Other European (please specify)  
\_\_\_\_\_  
 Samoan  
 Cook Island Māori  
 Tongan  
 Niuean  
 Tokelauan  
 Fijian  
 Other Pacific People's (please specify)  
\_\_\_\_\_  
 Filipino  
 Cambodian  
 Vietnamese  
 Other Southeast Asian (please specify)  
\_\_\_\_\_  
 Chinese  
 Indian  
 Sri Lankan  
 Japanese  
 Korean  
 Other Asian (please specify)  
\_\_\_\_\_  
 Middle Eastern  
 Latin American  
 African  
 Other (please specify)  
\_\_\_\_\_

FOR OFFICE USE ONLY

NSN Checked    /    /20

Validation Checked     Active     Partial     No Number

FOR OFFICE USE ONLY

REGISTRATION PROCESSED BY:	ENROLMENT PROCESSED BY:	DATE STAMP
_____ _____ / /	_____ _____ / /	