

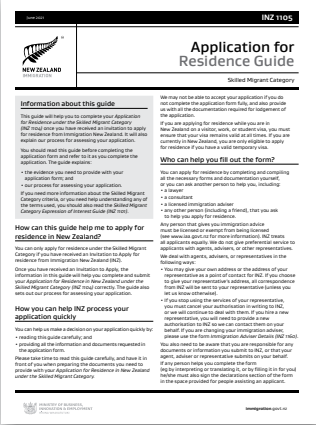
July 2021

INZ 1115



Skilled Migrant Category Application for Residence

for residence in New Zealand



Use the guide to help you complete the application form

You must complete all the questions in this application form, unless the form specifically directs you straight to another question or section further on. **Print clearly in English using CAPITAL LETTERS.** If a question does not apply to you, mark it N/A or Not Applicable. If you fail to answer any questions or to clearly mark them as ‘N/A’ or ‘Not Applicable’, we may send the form back to you for completion.

Detailed explanations to assist you to fill out this form can be found in the *Application for Residence Guide (INZ 1105)*. The guide also contains information about the documentation you must provide with your application.

If you need to review the criteria and process for the Skilled Migrant Category, refer to our website (www.immigration.govt.nz) and the *Skilled Migrant Category Expression of Interest Guide (INZ 1101)*.

If you are found to have provided false information or to have omitted any relevant information in your application for residence, your application may be declined and you will lose the right to appeal any decision to decline your application.

Immigration Advisers Licensing Act 2007

Under the Immigration Advisers Licensing Act 2007 it is an offence to provide immigration advice without being licensed or exempt. If your immigration adviser is not licensed when they should be, Immigration New Zealand will return your application.

For more information and to view the register of licensed advisers, go to the Immigration Advisers Authority website www.iaa.govt.nz, email info@iaa.govt.nz, or write to them at PO Box 6222, Wellesley Street, Auckland 1141, New Zealand.

Lawyers provide immigration advice and are exempt from licensing under the Immigration Advisers Licensing Act 2007. For more information and to view the register of immigration lawyers, go to the New Zealand Law Society website www.lawsociety.org.nz.

Section A

Principal applicant’s identity

Provide the following information about yourself.

A1Family/last name

A2Given/first name(s)

A3Provide all other names you are/or have ever been known by

A4Preferred title
☐ Mr
☐ Mrs
☐ Ms
☐ Miss
☐ Dr
☐ Other (specify)

A5 Gender ☐ Male ☐ Female

A6 Date of birth | D | D | M | M | Y | Y | Y | Y |

A7 Country of birth |

A8 Provide your birth certificate number and the name of the issuing authority

Birth certificate number |

Name of issuing authority |

A9 State your main country of citizenship/nationality.

|

A10 Provide details of all passports currently held.

Passport number |

Country |

Family name |

Given name(s) |

Date of issue | D | D | M | M | Y | Y | Y | Y | Date of expiry | D | D | M | M | Y | Y | Y | Y |

Place of issue |

Passport number |

Country |

Family name |

Given name(s) |

Date of issue | D | D | M | M | Y | Y | Y | Y | Date of expiry | D | D | M | M | Y | Y | Y | Y |

Place of issue |

Passport number |

Country |

Family name |

Given name(s) |

Date of issue | D | D | M | M | Y | Y | Y | Y | Date of expiry | D | D | M | M | Y | Y | Y | Y |

Place of issue |

A11 List any other citizenships currently held

|

|

A12 Provide a national ID number, or other unique identifier issued to you by any government.

National ID number |

Country |

Points

Claimed

A13 List all countries, including all countries of citizenship, you have lived in for a total of 12 months or more in the last 10 years. Include all countries where your stay was broken by any departures.

From		To		Country	
From		To		Country	
From		To		Country	
From		To		Country	
From		To		Country	
From		To		Country	
From		To		Country	
From		To		Country	
From		To		Country	

A14 Provide your residential address and contact details. This will be considered your permanent place of residence for tax purposes.

Number and street name

Suburb City

County/Province/State PIN/ZIP

Country

Telephone Country code/area code/telephone number – eg +12 3 456 7890

Email

If different from your residential address, please provide your mailing address.

If you are in New Zealand and list a New Zealand address, this will be your New Zealand address for the purpose of the New Zealand Immigration Act.

Number and street name/PO Box

Suburb

City, PIN/ZIP code

Country

A15 What is your current partnership status? (Select **one** only)

☐ Married ☐ Partner/De facto ☐ Civil Union ☐ Separated ☐ Divorced ☐ Widowed ☐ Single

A16 If you have selected Married, Civil Union or Partnership, do you meet the minimum requirements for recognition of partnerships, as defined in the guide? (Please ensure you have read and understood these instructions before selecting yes.) Refer to Completing Section H: Partner's identity in the Application for Residence Guide

☐ Yes ☐ No

A17 Will your partner be included in your residence application? ☐ Yes ☐ No

If no, please explain why your partner is not being included in your residence application?

A18 If you have a representative acting on your behalf, or someone assisting you to complete this application for residence, provide the following details for this person. If no one helped you to complete this application go to question **A21** Refer to the **Application for Residence Guide (INZ 1105)** to see who can help you fill out your application for residence.

Name

Number and street name/PO Box

Suburb and city

Country

Phone/day Country code/area code/telephone number – eg +12 3 456 7890

Phone/night Country code/area code/telephone number – eg +12 3 456 7890

Phone/cellular Country code/area code/telephone number – eg +12 3 456 7890

Email

A19 Do you authorise the person listed in question **A18** to act on your behalf in relation to this application for residence?

☐ Yes

☐ No

A20 Indicate who you prefer Immigration New Zealand to communicate directly with. (Select **one** only)

☐ You

☐ You and a copy to the person listed in question **A18** where communication is made by way of email or a letter

☐ The person listed in question **A18** only.

Please note: Immigration New Zealand reserves the right to contact the principal applicant directly on any matter relating to this application for residence.

A21 What is your preferred means of communication in relation to this application for residence?

☐ Email

☐ Letter

A22 Have you previously submitted an Expression of Interest (EOI) for residence under the Skilled Migrant Category?

☐ Yes ☐ No

If you have previously submitted an EOI, please provide the EOI number here, if known

You must provide your full birth certificate, or certificate of identity and, if available, your passport (these can be original documents or certified copies).

Section B Principal applicant's character

You must complete this section.

- B1** Have you ever been sentenced to imprisonment for a term of five years or more (including any suspended sentences or any expunged criminal records)? ☐ Yes ☐ No
- B2** Have you been sentenced to imprisonment for a term of 12 months or more within the last 10 years (including any suspended sentences or expunged criminal records)? ☐ Yes ☐ No
- B3** Are you subject to a period of prohibition under the Immigration Act 2009? ☐ Yes ☐ No
- B4** Have you ever been:
excluded ☐ Yes ☐ No
removed or deported ☐ Yes ☐ No
from any country, excluding New Zealand?
- B5** Have you been involved in any terrorist activities or supported similar violent activities? ☐ Yes ☐ No
- B6** Have you ever been a member of, or adhered to, any terrorist organisation? ☐ Yes ☐ No
- B7** Have you been involved in any drug trading or trafficking? ☐ Yes ☐ No
- B8** Have you been a member of, or belonged to, any group with criminal objectives? ☐ Yes ☐ No
- B9** Have you been a member of, or belonged to, any group that has engaged in or supported criminal activities?
☐ Yes ☐ No
- B10** Are you currently:
under investigation ☐ Yes ☐ No
wanted for questioning ☐ Yes ☐ No
facing charges ☐ Yes ☐ No
for any offence in any country?
- B11** Have you been convicted at any time of any offence, including any driving offence? *Please note that this includes any conviction(s) outside of New Zealand subsequently cleared or wiped by 'clean slate' legislation.* ☐ Yes ☐ No
- B12** Have you ever been refused entry to any country, excluding New Zealand? ☐ Yes ☐ No
- B13** Have you been (or are you currently) a member of an organisation or group which had/has objectives or principles based on hostility against people or groups on the basis of colour, race or ethnic/national origins; or an assumption that persons of a particular race or colour are inherently inferior or superior to other races or colours? ☐ Yes ☐ No
- B14** Have you at any time in a public speech or public comments, or public broadcast, or in publicly distributing or publishing a document, argued that one race or colour is inherently inferior or superior to another race or colour; or used language intended to encourage hostility or ill will against any person or group of persons on the basis of colour, race, or ethnic or national origins of that person or group? ☐ Yes ☐ No
- B15** Have you had (or do you currently have) an association with, membership of, or involvement with, any government, regime, group or agency that has advocated or committed war crimes, crimes against humanity and/or other gross human rights abuses? ☐ Yes ☐ No

If you answered 'yes' to any of the questions B1 to B15, you must provide a full explanation about the surrounding circumstances. This includes full details of any charges, convictions and the sentence or penalty imposed.

Continue on a separate sheet if necessary.

You must attach police certificates from each country/ies you have lived in for 12 months or more in the last 10 years and from your country/ies of citizenship.

Section C Principal applicant's health

Provide the following details about your health.

C1 Have you submitted a *General Medical Certificate (INZ 1007)* and *Chest X-ray Certificate (INZ 1096)*, completed and dated by a medical practitioner within the last 36 months with another Immigration New Zealand application?

☐ Yes ☐ No *You must provide a medical certificate (General Medical Certificate (INZ 1007) and Chest X-ray Certificate (INZ 1096)).*

If you have submitted a medical certificate and chest X-ray certificate in the last 36 months, you do not need to provide further certificates now, unless:

- your health status has deteriorated since your previous medical certificate was issued, or
- you have spent six consecutive months since your last *Chest X-ray Certificate (INZ 1096)* was issued, in a country, area or territory not listed as having a low incidence of TB (see the leaflet *Health Requirements (INZ 1121)* for further information).

Otherwise we will tell you if we need any further medical information.

If you have not submitted medical certificates that were completed and dated by a medical practitioner within the last 36 months, you will have to provide certificates now.

C2 Tick the option(s) below which applies to you:

- ☐ I do not need to provide any medical certificates or chest X-ray certificates
- ☐ I need to provide a *General Medical Certificate (INZ 1007)*
- ☐ I need to provide a *Chest X-ray Certificate (INZ 1096)*
- ☐ A physician is submitting my medical and/or X-ray certificate

C3 Has the physician submitting your medical and/or X-ray certificates supplied you with an eMedical Reference Code (NZER)?

☐ Yes Enter your eMedical Reference Code(s) here:

☐ No Enter the name of the clinic submitting your health information:

If the physician has returned the medical and/or X-ray certificate to you then you will need to submit these with your application.

C4 Do you or are you likely to require dialysis treatment in the immediate future? ☐ Yes ☐ No

C5 Do you have active tuberculosis? ☐ Yes ☐ No

C6 Do you have a mental disorder or intellectual disability that has needed care in a hospital or supervised residence for more than 90 days in the last two years?

☐ Yes ☐ No

C7 Do you have a physical incapacity that requires full-time care? ☐ Yes ☐ No

C8 Have you been exposed to, or diagnosed with, any infectious or communicable disease? ☐ Yes ☐ No

C9 Are you receiving, or have received, any treatment for any psychiatric condition or developmental disorder?

☐ Yes ☐ No

C10 Do you have any condition that is likely to require ongoing treatment or medication? ☐ Yes ☐ No

If you answered Yes to any of the questions **C4** to **C10**, you must provide full details of your medical condition.

Continue on a separate sheet if necessary.

Pregnant women are not required to provide an X-ray certificate unless a special report is needed.

Section D Principal applicant's English language ability

In this section we ask you to confirm that you meet the minimum standard of English language ability, which is a prerequisite of the Skilled Migrant Category.

D1 Indicate how you meet the minimum standard of English. (Select one only)

- ☐ An English language test with the required score (IELTS overall band score of 6.5 or more, Cambridge English B2 First (FCE) or B2 First for Schools (FCE for Schools) overall score of 176 or more, TOEFL iBT overall score of 79 or more, PTE Academic overall score of 58 or more, OET grade B or higher in all four skills (Listening, Reading, Writing and Speaking)). Go to **D3**
- ☐ Citizenship of Canada, the United Kingdom, the Republic of Ireland or the United States of America **and** 5 years in work or education in one or more of those countries or Australia or New Zealand. Go to **D2**
- ☐ A recognised qualification comparable to a New Zealand level 7 bachelor's degree and gained in Australia, Canada, New Zealand, the Republic of Ireland, the United Kingdom or the United States of America as a result of study undertaken for at least two academic years in one or more of those countries. Go to **D2**
- ☐ A recognised qualification comparable to a New Zealand qualification at level 8 or above and gained in Australia, Canada, New Zealand, the Republic of Ireland, the United Kingdom or the United States of America as a result of study undertaken for at least one academic year in one or more of those countries. Go to **D2**
- ☐ None of the above.

Note: Regardless of the statement you select, INZ may ask you to provide an English language test result.

D2 Provide details explaining how you meet the minimum standard of English.

- D3** If you have completed an English language test, please confirm which test you have taken, and provide the relevant test details that will allow us to verify your test results (e.g. test report form number, candidate/test taker ID, any other unique number assigned to you (e.g. secret number, registration number)).

- D4** What was the date you sat your test?

English language test score/s

You must provide evidence that you meet the English language requirements.

Section E Principal applicant's skilled employment

In this section you provide details of the points and bonus points you are eligible for, if you have current skilled employment in New Zealand or an offer of skilled employment in New Zealand. Refer to the criteria in the 'Skilled employment' section of the *Skilled Migrant Category Expression of Interest Guide (INZ 1101)*.

- E1** Are you claiming points for skilled employment, and declare that you meet the criteria? (Select one only)

☐ Yes

☐ No. Go to

Points

Claimed

- E2** What is your main occupation in New Zealand? Provide the ANZSCO code and occupation most closely matching your employment or job offer

- E3** Indicate how your job meets the requirements for skilled employment.

Select one:

☐ It is an ANZSCO Skill Level 1, 2 or 3 job (and meets associated requirements)

☐ It is not an ANZSCO Skill Level 1, 2 or 3 job (and meets requirements for jobs not at ANZSCO skill level 1, 2 or 3).

Give a detailed explanation in support of your claim that your job is skilled. You should explain what is in your job description and your occupational tasks. Also explain what relevant recognised qualifications, work experience, and/or occupational registration certificates you have that show you are suitably qualified by training and experience.

Continue on a separate sheet if necessary.

E4 Provide the following details for the skilled employment listed above.

Employer contact name (manager)

Employer's job title/position

Business/organisation name

New Zealand Business Number (for New Zealand businesses only)

For help search: www.nzbn.govt.nz

Number and street name

Suburb City

County/Province/State PIN/ZIP

Country

Telephone Country code/area code/telephone number – eg +12 3 456 7890

Email Website

When did you start working for this employer?

E5 Provide details of your remuneration for this job.

What is the annual salary for this job in New Zealand dollars

What is the rate of pay per hour in New Zealand dollars

If you are paid on a per activity basis, what was your total remuneration in New Zealand dollars for a previous two year period in New Zealand in this job?

E6 Is your skilled employment outside Auckland?

☐ Yes ☐ No

Points

Claimed

E7 Is your salary at or above the high remuneration threshold?

i See term High remuneration in the *Skilled Migrant Category Expression of Interest Guide (INZ 1101)*.

☐ Yes ☐ No

Points

Claimed

E8 Is your skilled employment in one of the areas of absolute skills shortage? If yes, please provide the absolute skills shortage occupation name. Refer to the Long Term Skill Shortage List: <http://skillshortages.immigration.govt.nz>.

☐ Yes ☐ No Go to **F1**

Absolute skills shortage occupation name

Points

Claimed

E9 To do your job in New Zealand, do you require full or provisional occupational registration?

☐ No ☐ Yes Provide the following:

New Zealand Occupational Registration Number (if applicable)

Name of the New Zealand Occupational Registration Body

Points

Claimed

If you are claiming points for current skilled employment in New Zealand or an offer of skilled employment in New Zealand, you must provide evidence of this skilled employment, as described in the *Application for Residence Guide (1105)*. You must also submit your certificate of occupational registration if registration is required for employment in the occupation you are or will be working in.

If you are claiming bonus points for employment outside Auckland, or in an area of absolute skills shortage, you must provide evidence.

Section F Principal applicant's recognised qualification(s)

In this section you qualify for points and bonus points if you have one or more recognised qualifications. Refer to the criteria in the 'Recognised qualifications' section of the Skilled Migrant Category Expression of Interest Guide (INZ 1101).

F1 Are you claiming points for a recognised qualification(s) and declaring that you meet the criteria?

☐ Yes ☐ No

Points

Claimed

F2 Provide the details of the recognised qualification(s) for which you are claiming points.

Name of qualification (please enter the name of the qualification, exactly as it appears on the certificate)

Date obtained

Major area of study

Date commenced studies

Date completed studies

Institution name

Address

Telephone

Student ID number

Continue on a separate sheet if necessary.

F3 Is this qualification on the List of Qualifications Exempt from Assessment? Or has an Occupational Registration Body assessed your qualification(s) as comparable to a New Zealand qualification?

Note: If the qualification is on the List of Qualifications Exempt from Assessment all the requirements of the list must be met including the name of the qualification, the awarding institution and the date it was awarded.

☐ Yes ☐ No Provide level

F4 Has your qualification(s) been assessed by the New Zealand Qualifications Authority (NZQA)?

☐ Yes Provide assessment details below ☐ No Go to **F5**

Note: If you have only obtained a Pre-Assessment Result (PAR) for your EOI and you are invited to apply for residence, the level of your qualification will have to be confirmed through a full International Qualifications Assessment by NZQA before points can be awarded.

Reference number

Type ☐ Pre-Assessment (Preliminary) ☐ Interim ☐ Full

Level

What New Zealand qualification(s) was your qualification(s) assessed as being comparable with?

F5 Are you claiming points for a New Zealand qualification under the 24 July 2011 transitional provisions?

☐ Yes Provide level of qualification

☐ No Go to **F6**

F6 Do you have a bachelor degree gained in New Zealand following at least two years of full time study at a New Zealand university or other New Zealand-based tertiary training institution?

☐ Yes ☐ No

Points

Claimed

F7 Do you have a recognised postgraduate qualification (at levels 8, 9 or 10 on the New Zealand Qualifications Framework) gained in New Zealand following at least one year full-time study at a New Zealand-based university or other New Zealand-based tertiary training institution?

☐ Yes ☐ No

Points

Claimed

F8 Do you have a recognised postgraduate qualification (at levels 9 or 10 on the New Zealand Qualifications Framework) gained in New Zealand following at least two years of full-time study at a New Zealand-based university or other New Zealand-based tertiary training institution?

☐ Yes ☐ No

Points

Claimed

If you started studying towards a New Zealand qualification or hold a New Zealand qualification at levels 4 to 8 on the New Zealand Qualifications Framework as at 24 July 2011 and you have not claimed points under questions **F6 to **F8**, you must complete questions **F9** and **F10**.**

F9 Have you studied full-time in New Zealand towards a New Zealand recognised qualification for two years or more?

☐ Yes ☐ No

Points

Claimed

F10 Do you have a recognised basic New Zealand qualification (at levels 4–8 on the New Zealand Qualifications Framework) awarded from at a New Zealand university or tertiary training institute?

☐ Yes ☐ No

Points

Claimed

F11 Provide details of your New Zealand qualification. Name of New Zealand qualification (please enter the name of the qualification, exactly as it appears on the certificate)

Date obtained Major area of study

Date commenced studies Date completed studies

Institution name

Address

Telephone Student ID number

(Country code/Area code/Telephone number? (eg +12 3 456 7890))

Section G Principal applicant's skilled work experience

In this section we recognise the importance of skills and experience gained through your previous employment. Refer to the criteria in the 'Skilled work experience' section of the *Skilled Migrant Category Expression of Interest Guide (INZ 1101)*.

Note: If you do not have current skilled employment in New Zealand or an offer of skilled employment in New Zealand, you can only be awarded points if your work experience was gained in a comparable labour market or that work experience was in an occupation that is in an area of absolute skills shortage.

Bonus points for skilled work experience (such as points for skilled work experience in New Zealand) can only be claimed if you are claiming points for at least 2 years of skilled work experience in total.

G1 How many separate periods of work experience are you claiming points for?

From To

Complete this section for each separate period of work experience you are claiming points for. You should attach additional sheets if necessary; you may wish to photocopy this section to use.

Business/organisation name

New Zealand Business Number (for New Zealand businesses only)

For help search: www.nzbn.govt.nz

Occupation name *Provide the ANZSCO code and occupation most closely matching the employment*

Your job title/position held

Type of employment: ☐ Volunteer ☐ Self-employed ☐ Independent contractor ☐ Full-time employee
☐ Part-time employee

Full-time employment for the purposes of the Skilled Migrant Category is employment that amounts to, on average, at least 30 hours per week. If you worked, on average, less than 30 hours per week, confirm your average hours per week'

Number and street name

Suburb

City

County/Province/State

PIN/ZIP

Country

Country employer is domiciled in

Telephone

Country code/area code/telephone number – eg +12 3 456 7890

Contact name

Explain why you consider this work experience is skilled. For each period of work experience, you should state what recognised qualifications, relevant work experience, and/or occupational registration you held that made you suitably qualified for the occupation. You should also explain how each job was consistent with the description for that occupation as set out in the ANZSCO.

Attach additional sheets if necessary.

G2 Are you claiming points for at least 1 year or more of skilled work experience in New Zealand?

☐ Yes—1 year or more ☐ No

Points

Claimed

G3 Indicate the total number of years of skilled work experience. Include any skilled New Zealand work experience indicated in **G2**.

☐ 2 but less than 4 years ☐ 4 but less than 6 years ☐ 6 but less than 8 years
☐ 8 but less than 10 years ☐ 10 years or more ☐ None of the above

Points

Claimed

G4 Indicate the total number of years of work experience in an area of absolute skills shortage.

☐ 2 but less than 6 years ☐ 6 years and over ☐ None of the above

Points

Claimed

Absolute skills shortage occupation name

If you are claiming points or bonus points for your skilled work experience, you must submit evidence of this work experience, as described in the *Application for Residence Guide (INZ 1105)*. If you are claiming bonus points for work experience in New Zealand, or in an area of absolute skills shortage, you must provide evidence,.

Section H Partner's identity

Provide the following information about your partner. You must provide this information even if your partner is not applying for residence with you.

H1 Family name

H2 Given name(s)

H3 Please provide all other names your partner is/or has been known by

H4 Preferred title ☐ Mr ☐ Mrs ☐ Ms ☐ Miss ☐ Dr ☐ Other (specify)

H5 Gender ☐ Male ☐ Female

H6 Date of birth

H7 Country of birth

H8 Provide your partner's birth certificate number and the name of the issuing authority

Birth certificate number

Name of issuing authority

H9 Provide your partner's main country of citizenship/nationality.

H10 Provide details of all passports currently held by your partner.

Passport number

Country

Family name

Given name(s)

Date of issue Date of expiry

Place of issue

Passport number

Country

Family name

Given name(s)

Date of issue Date of expiry

Place of issue

Passport number

Country

Family name

Given name(s)

Date of issue Date of expiry

Place of issue

H11 List any other citizenships currently held.

H12 Provide a national ID number, or other unique identifier issued to your partner by any government.

National ID number

Country

H13 List all countries, including all countries of citizenship, your partner has lived in for a total of 12 months or more in the last 10 years. Include all countries where your stay was broken by any departures.

From	To	Country
From	To	Country
From	To	Country
From	To	Country
From	To	Country
From	To	Country
From	To	Country
From	To	Country
From	To	Country
From	To	Country

You must provide evidence of your relationship with your partner if they are included in your application, as described in the *Application for Residence Guide (INZ 1105)*. You must also provide their full birth certificate, or certificate of identity and, if available, their passport (these can be original documents or certified copies).

H14 Has your partner previously submitted an Expression of Interest (EOI)? ☐ Yes ☐ No

If your partner has previously submitted an EOI, please provide the EOI number here, if known

Section I Partner's character

In this section we need to confirm that your partner is of good character, which is a prerequisite of the Skilled Migrant Category.

I1 Has your partner ever been sentenced to imprisonment for a term of five years or more (including any suspended sentences or any expunged criminal records)?

☐ Yes ☐ No

I2 Has your partner been sentenced to imprisonment for a term of 12 months or more within the last 10 years (including any suspended sentences or any expunged criminal records)?

☐ Yes ☐ No

I3 Is your partner subject to a period of prohibition under the Immigration Act 2009? ☐ Yes ☐ No

I4 Has your partner ever been:

• excluded ☐ Yes ☐ No

• removed or deported ☐ Yes ☐ No

from any country, excluding New Zealand?

I5 Has your partner ever been involved in any terrorist activities or supported similar violent activities?

☐ Yes ☐ No

I6 Has your partner ever been a member of, or adhered to, any terrorist organisation? ☐ Yes ☐ No

I7 Has your partner been involved in any drug trading or trafficking? ☐ Yes ☐ No

I8 Has your partner been a member of, or belonged to, any group with criminal objectives? ☐ Yes ☐ No

I9 Has your partner been a member of, or belonged to, any group that has engaged in or supported criminal activities?

☐ Yes ☐ No

I10 Is your partner currently:

• under investigation ☐ Yes ☐ No

• wanted for questioning ☐ Yes ☐ No

• facing charges ☐ Yes ☐ No

for any offence in any country?

I11 Has your partner been convicted at any time of any offence, including any driving offence? *Please note that this includes any conviction(s) outside of New Zealand subsequently cleared or wiped by 'clean slate' legislation.*

☐ Yes ☐ No

I12 Has your partner ever been refused entry to any country, excluding New Zealand? ☐ Yes ☐ No

I13 Has your partner been (or are they currently) a member of an organisation or group which had/has objectives or principles based on hostility against people or groups on the basis of colour, race or ethnic/national origins; or an assumption that persons of a particular race or colour are inherently inferior or superior to other races or colours? ☐ Yes ☐ No

h4 Has your partner at any time in a public speech or public comments, or public broadcast, or in publicly distributing or publishing a document, argued that one race or colour is inherently inferior or superior to another race or colour; or used language intended to encourage hostility or ill will against any person or group of persons on the basis of colour, race, or ethnic or national origins of that person or group? ☐ Yes ☐ No

h5 Has your partner had (or does your partner currently have) an association with, membership of, or involvement with, any government, regime, group or agency that has advocated or committed war crimes, crimes against humanity and/or other gross human rights abuses? ☐ Yes ☐ No

If you answered Yes to any of the questions **h4** to **h5**, you must provide full details about the surrounding circumstances. This includes full details of any charges, convictions and the sentence or penalty imposed.

Continue on a separate sheet if necessary.

You must attach police certificates from each country/ies your partner has lived in for 12 months or more in the last 10 years and from their country/ies of citizenship.

Section J Partner's health

Provide the following details about your partner's health.

J1 Has your partner submitted a *General Medical Certificate (INZ 1007)* and *Chest X-ray Certificate (INZ 1096)*, completed and dated by a medical practitioner within the last 36 months with another Immigration New Zealand application?

☐ Yes ☐ No They must provide a medical certificate (General Medical Certificate (INZ 1007) and Chest X-ray Certificate (INZ 1096)).

If your partner has submitted a medical certificate and chest X-ray certificate in the last 36 months, they do not need to provide further certificates now, unless:

- their health status has deteriorated since their previous medical certificate was issued, or
- they have spent six consecutive months since their last *Chest X-ray Certificate (INZ 1096)* was issued, in a country, area or territory not listed as having a low incidence of TB (see the leaflet *Health Requirements (INZ 1121)* for further information).

Otherwise we will tell you if we need any further medical information.

If your partner has not submitted medical certificates that were completed and dated by a medical practitioner within the last 36 months, you will have to provide certificates now.

J2 Tick the option(s) below which applies to your partner:

- ☐ My partner does not need to provide any medical certificates or chest X-ray certificates
- ☐ My partner needs to provide a *General Medical Certificate (INZ 1007)*
- ☐ My partner needs to provide a *Chest X-ray Certificate (INZ 1096)*
- ☐ A physician is submitting their medical and/or X-ray certificate

J3 Has the physician submitting their medical and/or X-ray certificates supplied them with an eMedical Reference Code (NZER)?

☐ Yes Enter their eMedical Reference Code(s) here:

☐ No Enter the name of the clinic submitting your health information:

If the physician has returned the medical and/or X-ray certificate to your partner then you will need to submit these with your application.

J4 Does your partner, or is your partner likely to, require dialysis treatment in the immediate future? ☐ Yes ☐ No

J5 Does your partner have active tuberculosis? ☐ Yes ☐ No

- J6** Does your partner have a mental disorder, or intellectual disability that has needed care in a hospital or supervised residence for more than 90 days in the last two years? ☐ Yes ☐ No
- J7** Does your partner have a physical incapacity that requires full-time care? ☐ Yes ☐ No
- J8** Has your partner been exposed to, or diagnosed with, any infectious or communicable disease? ☐ Yes ☐ No
- J9** Is your partner receiving, or has received, any treatment for any psychiatric condition or developmental disorder?
☐ Yes ☐ No
- J10** Does your partner have any condition that is likely to require ongoing treatment or medication? ☐ Yes ☐ No
- If you answered Yes to any of the questions **J4** to **J10**, you must provide full details of your partner's medical condition.

Continue on a separate sheet if necessary.

Pregnant women are not required to provide an X-ray certificate unless a special report is needed.

Section K Partner's English language ability

Provide the following details about your partner's English language ability.

- K1** Does your partner meet the minimum standard of English, as listed below? (Select **one** only)
- ☐ An English language test with the required score (IELTS overall band score of 5 or more, Cambridge English B2 First (FCE) or B2 First for Schools (FCE for Schools) overall score of 154 or more, TOEFL iBT overall score of 35 or more, PTE Academic overall score of 36 or more, OET grade C or higher in all four skills (Listening, Reading, Writing and Speaking)). Go to **K3**
- ☐ An English language test with the required score if claiming points for your partner's skilled employment or offer of skilled employment or recognised qualification (IELTS overall band score of 6.5 or more, Cambridge English B2 First (FCE) or B2 First for Schools (FCE for Schools) overall score of 176 or more, TOEFL iBT overall score of 79 or more, PTE Academic overall score of 58 or more, OET grade B or higher in all four skills (Listening, Reading, Writing and Speaking)). Go to **K3**
- ☐ Citizenship of Canada, the United Kingdom, the Republic of Ireland or the United States of America **and** 5 years in work or education in one or more of those countries or Australia or New Zealand. Go to **K2**
- ☐ A recognised qualification comparable to a New Zealand level 7 bachelor's degree and gained in Australia, Canada, New Zealand, the Republic of Ireland, the United Kingdom or the United States of America as a result of study undertaken for at least two academic years in one or more of those countries. Go to **K2**
- ☐ A recognised qualification comparable to a New Zealand qualification at level 8 or above and gained in Australia, Canada, New Zealand, the Republic of Ireland, the United Kingdom or the United States of America as a result of study undertaken for at least one academic year in one or more of those countries. Go to **K2**
- ☐ None of the above.

Note: Partners must pre-purchase English for Speakers of Other Languages (ESOL) tuition if they do not meet the minimum standard of English. They will need to attend English language classes once they arrive in New Zealand.

- K2** Provide details explaining why your partner meets the minimum standard of English.

- K3** If your partner has completed an English language test, please confirm which test they have taken, and provide the relevant test details that will allow us to verify their test results (e.g. test report form number, candidate/test taker ID, any other unique number assigned to them (e.g. secret number, registration number)).

- K4** What was the date that your partner sat their test?

English language test score/s

Section L Partner's skilled employment

In this section you can qualify for bonus points if your partner has current ongoing skilled employment in New Zealand or an offer of ongoing skilled employment in New Zealand.

Note: Your partner will only be able to claim points for an offer of skilled employment in New Zealand if they meet the English language requirements for principal applicants. If your partner has an offer of employment in an occupation which requires registration, you can only claim these points if they have the required registration.

- L1** Are you claiming points (and declaring that your partner meets the criteria) for your partner's current skilled employment or offer of skilled employment in New Zealand? (Select one only)

☐ Yes

☐ No Go to

Points

Claimed

- L2** What is your partner's main occupation in New Zealand?

Provide the ANZSCO code and occupation most closely matching your partner's employment or job offer

- L3** Indicate how your partner's job meets the requirements for skilled employment.

Select one:

☐ It is an ANZSCO Skill Level 1, 2 or 3 job (and meets associated requirements)

☐ It is not an ANZSCO Skill Level 1, 2 or 3 job (and meets requirements for jobs not at ANZSCO skill level 1, 2 or 3).

Give a detailed explanation in support of your claim that your partner's job is skilled. You should explain what is in the job description and the occupational tasks. Also explain how your partner's recognised qualification and/or work experience and/or occupational registration certificates make your partner suitably qualified for the occupation.

Continue on a separate sheet if necessary.

- L4** Provide the following details for the skilled employment listed above.

Employer contact name (manager)

Employer's job title/position

Business/organisation name

New Zealand Business Number

For help search: www.nzbn.govt.nz

Number and street name

Suburb City

County/Province/State PIN/ZIP

Country

Telephone Country code/area code/telephone number – eg +12 3 456 7890

When did your partner start working for this employer?

L5 Provide details of the remuneration for your partner's job.

What is the annual salary for this job in New Zealand dollars

What is the rate of pay per hour in New Zealand dollars

If your partner is paid on a per activity basis, what was their total remuneration in New Zealand dollars for a previous 2 year period in New Zealand in this job?

Section M Partner's recognised qualification(s)

In this section you can provide information about your partner's recognised qualification(s) in New Zealand.

M1 Are you claiming points for your partner's recognised qualification(s) and declaring that they meet the criteria?

☐ Yes ☐ No

Points

Claimed

M2 Provide the details of the recognised qualification(s) for which you are claiming points.

Name of qualification(s) (please enter the name of the qualification exactly as it appears on the certificate)

Date obtained Major area of study

Date commenced studies Date completed studies

Institution name

Address

Telephone Student ID number

M3 Is this qualification on the List of Qualifications Exempt from Assessment? Or has an Occupational Registration Body assessed your partner's qualification(s) as comparable to a New Zealand qualification?

☐ Yes Provide level of your partner's qualification

☐ No

M4 Does your partner hold a report from the New Zealand Qualifications Authority assessing the level of their qualification?

☐ Yes Provide details below ☐ No Go to

What is the reference number, type and level assessed by the NZQA?

Reference number

Type ☐ Pre-Assessment (Preliminary) ☐ Interim ☐ Full Level

What New Zealand qualification(s) was your partner's qualification(s) assessed as being comparable with?

If you are claiming points for your partner's qualification(s) you must provide:

- your partner's qualification(s) for which you are claiming points; and
- an NZQA Pre-Assessment Result (Preliminary Assessment Report) or NZQA International Qualifications Assessment (unless your partner's qualification(s) is included in the List of Recognised Qualifications); or
- your partner's certificate of registration if you are claiming points for their qualification(s) on the basis of full or provisional registration in New Zealand.

Note: If you provide a Pre-Assessment Result for your partner's qualification when lodging your application, your application may not be approved until you provide an International Qualifications Assessment.

Section N Other family

Children

N1 How many children do you have? This includes biological, adopted and step-children from previous marriages/relationships

Provide the following details for your children (including biological, adopted and step-children from previous marriages/relationships).

Full name

Gender ☐ Male ☐ Female Date of birth

Partnership status

☐ Married ☐ Civil Union ☐ Partner/De facto ☐ Separated ☐ Divorced ☐ Widowed ☐ Single

Country of residence

Is this child included in your application for residence? ☐ Yes ☐ No

Full name

Gender ☐ Male ☐ Female Date of birth

Partnership status

☐ Married ☐ Civil Union ☐ Partner/De facto ☐ Separated ☐ Divorced ☐ Widowed ☐ Single

Country of residence

Is this child included in your application for residence? ☐ Yes ☐ No

Full name

Gender ☐ Male ☐ Female Date of birth

Partnership status

☐ Married ☐ Civil Union ☐ Partner/De facto ☐ Separated ☐ Divorced ☐ Widowed ☐ Single

Country of residence

Is this child included in your application for residence? ☐ Yes ☐ No

Full name

Gender ☐ Male ☐ Female Date of birth

Partnership status

☐ Married ☐ Civil Union ☐ Partner/De facto ☐ Separated ☐ Divorced ☐ Widowed ☐ Single

Country of residence

Is this child included in your application for residence? ☐ Yes ☐ No

Full name

Gender ☐ Male ☐ Female Date of birth

Partnership status

☐ Married ☐ Civil Union ☐ Partner/De facto ☐ Separated ☐ Divorced ☐ Widowed ☐ Single

Country of residence

Is this child included in your application for residence? ☐ Yes ☐ No

Full name

Gender ☐ Male ☐ Female Date of birth

Partnership status

☐ Married ☐ Civil Union ☐ Partner/De facto ☐ Separated ☐ Divorced ☐ Widowed ☐ Single

Country of residence

Is this child included in your application for residence? ☐ Yes ☐ No

Full name

Gender ☐ Male ☐ Female Date of birth

Partnership status

☐ Married ☐ Civil Union ☐ Partner/De facto ☐ Separated ☐ Divorced ☐ Widowed ☐ Single

Country of residence

Is this child included in your application for residence? ☐ Yes ☐ No

Continue on a separate sheet if necessary.

For each DEPENDENT child who is included in your residence application, please complete an *Expression of Interest Form – Child Supplement (INZ 1103)*. Refer to the *Application for Residence Guide* Section P: *Child's identity*.

You may only include dependent children in your application. Refer to the requirements for 'dependent children' in the guide. If you are separated or divorced and bringing a child under 16 years of age with you to New Zealand, we will need to see proof of their right to leave their home country and your right to remove them.

- N2** Give details of ALL your family (not just those living in New Zealand), including those adopted legally or by custom. It is not necessary to list deceased family members. Family includes biological and adoptive parents, siblings (including step-, half- and adopted brothers and sisters).

Full name

Gender ☐ Male ☐ Female Date of birth

Partnership status

☐ Married ☐ Civil Union ☐ Partner/De facto ☐ Separated ☐ Divorced ☐ Widowed ☐ Single ☐ Unknown

Country of residence

Relationship to you

Full name

Gender ☐ Male ☐ Female Date of birth

Partnership status

☐ Married ☐ Civil Union ☐ Partner/De facto ☐ Separated ☐ Divorced ☐ Widowed ☐ Single ☐ Unknown

Country of residence

Relationship to you

Full name

Gender ☐ Male ☐ Female Date of birth

Partnership status

☐ Married ☐ Civil Union ☐ Partner/De facto ☐ Separated ☐ Divorced ☐ Widowed ☐ Single ☐ Unknown

Country of residence

Relationship to you

Full name

Gender ☐ Male ☐ Female Date of birth

Partnership status

☐ Married ☐ Civil Union ☐ Partner/De facto ☐ Separated ☐ Divorced ☐ Widowed ☐ Single ☐ Unknown

Country of residence

Relationship to you

Full name

Gender ☐ Male ☐ Female Date of birth

Partnership status

☐ Married ☐ Civil Union ☐ Partner/De facto ☐ Separated ☐ Divorced ☐ Widowed ☐ Single ☐ Unknown

Country of residence

Relationship to you

Full name

Gender ☐ Male ☐ Female Date of birth

Partnership status

☐ Married ☐ Civil Union ☐ Partner/De facto ☐ Separated ☐ Divorced ☐ Widowed ☐ Single ☐ Unknown

Country of residence

Relationship to you

Full name

Gender ☐ Male ☐ Female Date of birth

Partnership status

☐ Married ☐ Civil Union ☐ Partner/De facto ☐ Separated ☐ Divorced ☐ Widowed ☐ Single ☐ Unknown

Country of residence

Relationship to you

Full name

Gender ☐ Male ☐ Female Date of birth

Partnership status

☐ Married ☐ Civil Union ☐ Partner/De facto ☐ Separated ☐ Divorced ☐ Widowed ☐ Single ☐ Unknown

Country of residence

Relationship to you

Full name

Gender ☐ Male ☐ Female Date of birth

Partnership status

☐ Married ☐ Civil Union ☐ Partner/De facto ☐ Separated ☐ Divorced ☐ Widowed ☐ Single ☐ Unknown

Country of residence

Relationship to you

Section 0 Partner's family

01 How many children does your partner have? This includes biological, adopted and step-children from previous marriages/relationships. Do not include children already listed under **Nh**.

Provide the following details for your partner's children (including biological, adopted and step-children from previous marriages/relationships).

Full name

Gender ☐ Male ☐ Female Date of birth

Partnership status

☐ Married ☐ Civil Union ☐ Partner/De facto ☐ Separated ☐ Divorced ☐ Widowed ☐ Single

Country of residence

Is this child included in your application for residence? ☐ Yes ☐ No

Gender ☐ Male ☐ Female Date of birth | | | | | |

☐ Married ☐ Civil Union ☐ Partner/De facto ☐ Separated ☐ Divorced ☐ Widowed ☐ Single

Country of residence |

Is this child included in your application for residence? ☐ Yes ☐ No

Full name |

Gender ☐ Male ☐ Female Date of birth | | | | | |

☐ Married ☐ Civil Union ☐ Partner/De facto ☐ Separated ☐ Divorced ☐ Widowed ☐ Single

Country of residence |

Is this child included in your application for residence? ☐ Yes ☐ No

Full name |

Gender ☐ Male ☐ Female Date of birth | | | |

☐ Married ☐ Civil Union ☐ Partner/De facto ☐ Separated ☐ Divorced ☐ Widowed ☐ Single

Country of residence |

Is this child included in your application for residence? ☐ Yes ☐ No

Full name |

Gender ☐ Male ☐ Female Date of birth | D D M M Y Y Y Y

☐ Married ☐ Civil Union ☐ Partner/De facto ☐ Separated ☐ Divorced ☐ Widowed ☐ Single

Country of residence |

Is this child included in your application for residence? ☐ Yes ☐ No

For each DEPENDENT child who is included in your residence application, please complete a Child Supplement application form. Please refer to the *Application for Residence Guide* Completing Section P: Child's identity. You may only include dependent children in your application. Refer to the requirements for 'dependent children' in the guide. If your partner is separated or divorced and bringing a child under 16 years of age with them to New Zealand, we will need to see proof of their right to leave their home country and your partner's right to remove them.

02 Give details of ALL your partner's family, including those adopted legally or by custom. It is not necessary to list deceased family members. Family includes biological and adoptive parents, siblings (including step-, half- and adopted brothers and sisters).

Full name |

Gender ☐ Male ☐ Female Date of birth | D D | M M | Y Y | Y Y

☐ Married ☐ Civil Union ☐ Partner/De facto ☐ Separated ☐ Divorced ☐ Widowed ☐ Single ☐ Unknown

Country of residence |

Relationship to your partner |

Full name

Gender ☐ Male ☐ Female Date of birth

Partnership status

☐ Married ☐ Civil Union ☐ Partner/De facto ☐ Separated ☐ Divorced ☐ Widowed ☐ Single ☐ Unknown

Country of residence

Relationship to your partner

Full name

Gender ☐ Male ☐ Female Date of birth

Partnership status

☐ Married ☐ Civil Union ☐ Partner/De facto ☐ Separated ☐ Divorced ☐ Widowed ☐ Single ☐ Unknown

Country of residence

Relationship to your partner

Full name

Gender ☐ Male ☐ Female Date of birth

Partnership status

☐ Married ☐ Civil Union ☐ Partner/De facto ☐ Separated ☐ Divorced ☐ Widowed ☐ Single ☐ Unknown

Country of residence

Relationship to your partner

Full name

Gender ☐ Male ☐ Female Date of birth

Partnership status

☐ Married ☐ Civil Union ☐ Partner/De facto ☐ Separated ☐ Divorced ☐ Widowed ☐ Single ☐ Unknown

Country of residence

Relationship to your partner

Full name

Gender ☐ Male ☐ Female Date of birth

Partnership status

☐ Married ☐ Civil Union ☐ Partner/De facto ☐ Separated ☐ Divorced ☐ Widowed ☐ Single ☐ Unknown

Country of residence

Relationship to your partner

Full name

Gender ☐ Male ☐ Female Date of birth

Partnership status

☐ Married ☐ Civil Union ☐ Partner/De facto ☐ Separated ☐ Divorced ☐ Widowed ☐ Single ☐ Unknown

Country of residence

Relationship to your partner

Full name

Gender ☐ Male ☐ Female Date of birth

Partnership status

☐ Married ☐ Civil Union ☐ Partner/De facto ☐ Separated ☐ Divorced ☐ Widowed ☐ Single ☐ Unknown

Country of residence

Relationship to your partner

Full name

Gender ☐ Male ☐ Female Date of birth

Partnership status

☐ Married ☐ Civil Union ☐ Partner/De facto ☐ Separated ☐ Divorced ☐ Widowed ☐ Single ☐ Unknown

Country of residence

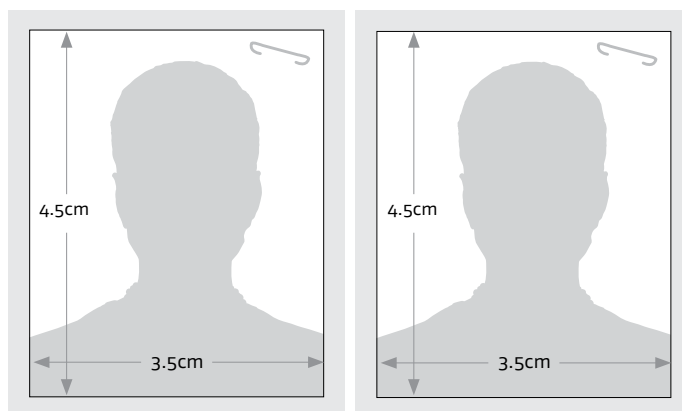
Relationship to your partner

Continue on a separate sheet if necessary.

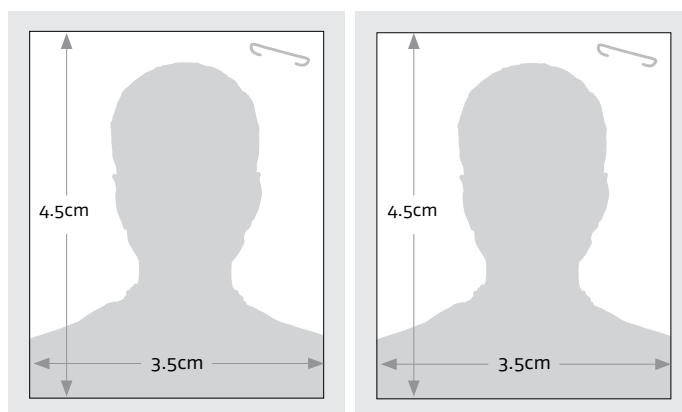
Section P Photographs

Pin or staple two recent passport-size photographs of the principal applicant and of any accompanying partner and/or child/ren on this page. Write the name of each applicant on the back of each photo. Attach further sheets and photographs as necessary.

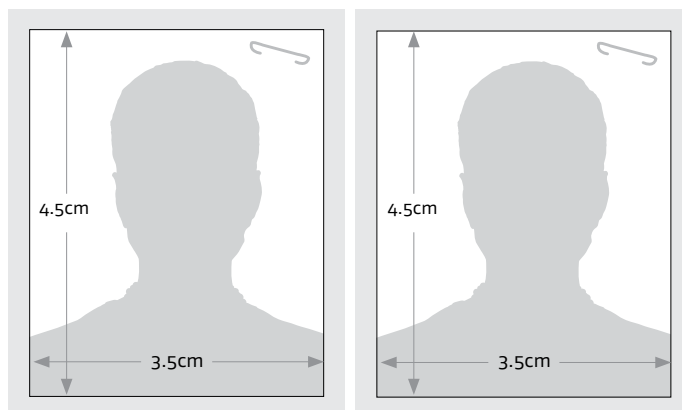
Principal applicant



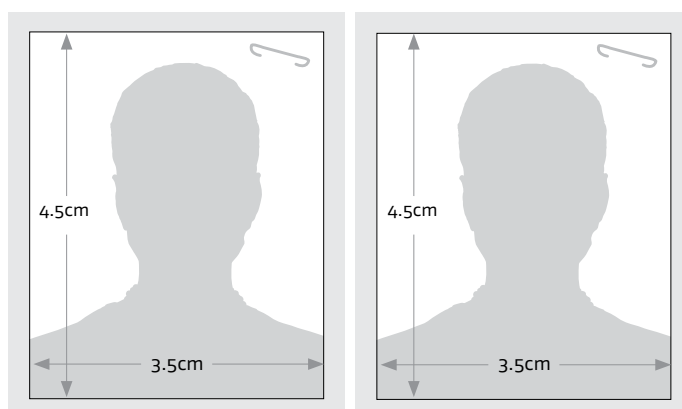
Partner



Child 1



Child 2



Section Q Declaration

The principal applicant, any partner and dependent children aged 18 years and over who are included in this application, must agree to the following terms and conditions and sign the declaration space below. Make sure you understand the declarations below before you sign and agree to them.

Terms and conditions

I understand that if I make any false statements or provide any false or misleading information, or have changed or altered this form in any material way after it has been signed, my application for residence may be declined, and I may lose any right of appeal of the decision to decline the application. I may become liable for deportation. I may also be committing an offence and I may be imprisoned.

I understand the notes and questions in this form and I declare the information given about myself, my partner and any children is true and complete.

I understand that Immigration New Zealand may provide information about my entitlement to work to potential employers via the online VisaView system. VisaView is authorised by legislation.

I declare that I have listed all my family members, including any adopted by law or by custom and my grandparents or legal guardians (if any) if both my parents are deceased, and understand that the non-declaration of any family members may result in that family member not being recognised as part of my family in any future applications.

I will inform Immigration New Zealand of any relevant fact or change of circumstances that may (i) affect the decision on my application for a visa, or (ii) affect the decision to grant entry permission based on the visa for which I am applying.

I acknowledge that convictions for certain criminal offences committed up to 10 years after first being granted a resident visa can result in deportation from New Zealand.

I declare that there are no matters or warrants outstanding, or investigations of any kind, which could have any current or future effect on the assessment of my good character, or the good character of any other persons included in this application.

I authorise INZ to make any enquiries it deems necessary regarding the information provided on this form and to share this information with other Government agencies (including overseas agencies) to the extent necessary to make decisions about my immigration status. I also consent to any organisation providing relevant information to INZ about me.

I authorise INZ to provide information about my state of health and my immigration status to any health service agency. I authorise any health service agency to provide information about my state of health to INZ.

I accept that any advice given to me by INZ before lodging this application was intended to assist me, and acting on that does not mean that my application for residence will be granted.

I understand that in order to work in certain occupations in New Zealand, registration is required by law. I accept that the grant of residence does not guarantee that registration will be granted.

Financial Resources

I have sufficient personal resources to maintain myself and my dependants for at least my first 24 months as a resident in New Zealand.

I understand that I am not entitled to an emergency benefit, unemployment benefit on grounds of hardship or sickness benefit on grounds of hardship from Work and Income for the first 24 months of my residence in New Zealand unless I can show that I am in hardship. I also understand that if I apply for an emergency benefit, unemployment benefit on grounds of hardship or sickness benefit on grounds of hardship that I will need to show that I cannot support myself and my dependants before any application for emergency benefit, unemployment benefit on grounds of hardship or sickness benefit on grounds of hardship is considered. I understand that my application for an emergency benefit, unemployment benefit on grounds of hardship or sickness benefit on grounds of hardship may be declined if I have deprived myself of income or property, by gift or any other method.

The personal resources I will use are: (tick at least one)

☐ My cash and assets

☐ An offer of skilled employment or current skilled employment in New Zealand
(evidence of which is included in my application)

Signature of principal applicant _____ Date

D	D	M	M	Y	Y	Y	Y
---	---	---	---	---	---	---	---

Signature of partner (if applicable) _____ Date

D	D	M	M	Y	Y	Y	Y
---	---	---	---	---	---	---	---

[illegible]

This section must be completed by your immigration adviser. If you do not have an immigration adviser, this section does not have to be completed.

☐ I am a licensed immigration adviser under the New Zealand Immigration Advisers Licensing Act 2007. Go to

☐ I am exempt from licensing under the New Zealand Immigration Advisers Licensing Act 2007. Go to

R2 Licensed advisers. Please provide your licence details.

☐ full ☐ provisional ☐ limited List conditions specified in the register.

Exempt from licensing. Tick one box below to show why you are exempt from licensing.

- Go to Section 5: Declaration by person assisting the applicant.

Section S Declaration by person assisting the applicant to complete this form

This section must be completed and signed by your immigration adviser, or by any person who has assisted you by providing immigration advice, explaining, translating, or recording information on the form. If you do not have an immigration adviser, and no one helped you to fill in this form, this section does not have to be completed.

If you are unlicensed when you should be licensed under the Immigration Advisers Licensing Act 2007, Immigration New Zealand will return your client's application. It is an offence to provide immigration advice without holding a licence.

For more information, go to the Immigration Advisers Authority website www.iaa.govt.nz, or email info@iaa.govt.nz or write to them at PO Box 6222, Wellesley Street, Auckland 1141, New Zealand.

Name and address of person assisting applicant ☐ Same as address given at A18 or ☐ as below.

Family/last name

Given/first name(s)

[illegible]

Company name (if applicable) and address

New Zealand Business Number (for New Zealand businesses only)

For help search: www.nzbn.govt.nz

Telephone (daytime)

Telephone (evening)

Fax

Email

I understand that after the applicant has signed this form it is an offence to change or add further information, change any documents attached to the form, or attach any further documents to the form.

I note that the maximum penalty for this offence is a fine of up to NZ\$100,000 and/or a term of imprisonment of up to seven years. However, if changes are needed, the person making the changes must state on the form what information or documents have been changed and give reasons for the changes.

I certify that the applicant asked me to help them complete this form and any additional forms.

I certify that the applicant agreed that the information provided was correct before signing the declaration.

- ☐ I have **assisted** the applicant as an interpreter/translator
- ☐ I have **assisted** the applicant with recording information on the form
- ☐ I have **assisted** the applicant in another way. Specify _____

- ☐ I have **provided immigration advice** (as defined in the Immigration Advisers Licensing Act 2007) and my details in Section R: Immigration adviser's details are correct.

Signature of person assisting

Date _____

D D M M Y Y Y Y

About the information you provide

Deciding whether you are eligible for a visa

Immigration New Zealand collects the information about you on this form to decide whether you are eligible for a residence class visa. We may also use the information to contact you for research purposes or to advise you on immigration matters.

Collecting the information is authorised by the Immigration Act 2009 and the Immigration Regulations made under that Act. You do not have to provide the information, but if you do not we are likely to decline your application.

Deciding whether you are eligible to board a flight to New Zealand

The information we collect may also be used to determine whether you are allowed to board a flight to New Zealand. We will not share your personal information with airline check-in agents; however, we will send a boarding message to the airline check-in agent based on the information you have provided in this form.

Immigration New Zealand may also share the information you have provided with other government agencies that are entitled to it by law, or with other agencies (as you have agreed in the declaration).

You are able to ask for the information we hold about you and have any of it corrected if you think it is necessary. The address of Immigration New Zealand is PO Box 1473, Wellington 6140, New Zealand. **This is not where you application should be sent.**

Other documents we may need

Sometimes we may ask for additional documents or information so that we can consider it with this application.

Other documents you may wish to send

You may wish to send other documents or information so that we can consider it with this application. Please send photocopies only (not original documents), as these documents will not be returned to you. If we need to see an original document, you will be asked to produce it later.

For more information

If you have questions about completing the form:

- see our website www.immigration.govt.nz
- telephone our call centre on 0508 558 855 (within New Zealand)

Section U

Paying your application fee

To find out how much to pay, payment methods, where to send your application, and how long a decision may take, see www.immigration.govt.nz/fees.

Your application fee and immigration levy

Amount you are paying:

Amount

Currency

(e.g. NZD, USD, RMB)

Application number

(office use only)

Credit/debit card details

☐ Mastercard

☐ Visa

Name of cardholder

Card number

CVC/CVV number

Note: Your CVC/CVV number is the three-digit number found on the signature strip on the back of your credit/debit card.

Expiry date

Signature of cardholder

Date

