OFFICE USE ONLY | Client no.:

Date received

/

Application no.

February 2023 INZ 1153



# SSE/WHE Work Visa Application

under Supplementary Seasonal Employment or Working Holidaymaker Extension Instructions

#### Important information

Only use this application form if you are applying for a work visa under the Supplementary Seasonal Employment (SSE) Instructions or the Working Holidaymaker Extension Instructions.

Please note that you will only be eligible for a visa under these instructions if you are currently in New Zealand.

#### **VisaView**

It is an offence to employ a person who is not entitled to work in New Zealand. One way for employers to avoid committing this offence is to check a person's entitlement to work with Immigration New Zealand's online VisaView system. Disclosure of information through VisaView is authorised by legislation.

If you believe that an employer has been given the wrong entitlement information via VisaView you may contact the Immigration Contact Centre (0508 558 855) to request correction of that information.

#### **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 or email info@iaa.govt.nz.

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.

When filling in this form, please print clearly in English using CAPITAL LETTERS.

Work visa you are applying for
Indicate which work visa you are applying for:
☐ Supplementary Seasonal Employer (SSE)
☐ Working Holiday Extension (WHE)
SSE is for applicants who hold a temporary entry class visa and have a genuine intention to work for an eligible employer.
An eligible employer is:

• an employer who holds an SSE Approval in Principle

WHE is for applicants who hold a work visa granted under a working holiday scheme and who have been employed to undertake seasonal work in the horticulture or viticulture industry for a period of at least three months during the currency of their working holiday scheme visa.



#### General requirements for SSE/WHE work visa

To enable your application to be accepted you must submit all of the following documents. If you do not do so your application may be returned to you.

- A completed, signed application form.
- The application fee and applicable levies.
- Your passport or travel document (or certified copy)\* which must be valid for three months past the date you plan
  to leave New Zealand.
- Two recent passport-size photographs attached to this form in the Section A: Personal details.
- Evidence of an outward ticket from New Zealand, or sufficient funds to buy one.
- Any documents required by the instructions you are applying under, as detailed in this application form.

For the purposes of the SSE and Working Holidaymaker Extension Instructions, seasonal work in the horticulture or viticulture industries is planting, picking, maintaining, harvesting or packing crops.

\* Please note during the processing of an application an immigration officer may request further documents or information, including your original passport.

#### SSE work visa applicants

You must complete sections A, B, C, E, F, and G of this form.

All applicants, irrespective of when you apply, must have a genuine intention to work for an eligible employer in the horticulture and viticulture industries. Evidence of your intention may include, but is not limited to:

- · a job offer from an SSE-approved employer;
- arrangements for travel to or accommodation in regions where SSE employers are located;
- evidence of the horticulture and viticulture work you intend to complete, such as information on SSE employers, crops and regions or a harvest trail plan;
- correspondence with the relevant region's seasonal coordinator(s) to obtain information on SSE employers; or
- evidence of contact with SSE employer(s) whose details are available on the Immigration New Zealand website.

Please note, you may only be approved a work visa under these instructions once.

#### Conditions of the SSE work visa

These instructions allow for the granting of visas for employment in seasonal work in the horticulture and viticulture industries, for employers who have been approved in principle under SSE instructions.

Visas may be granted for a period of six months.

#### Working Holidaymaker Extension applicants

You must complete sections A, B, D, E, F and G of this form.

In addition to the general requirements above, you must provide evidence of having been employed to undertake seasonal work in the horticulture or viticulture industries for a period of at least three months during the currency of your working holiday scheme visa.

#### Conditions of the Working Holidaymaker Extension work visa

If approved a visa under the Working Holidaymaker Extension Instructions, you will be able to work in New Zealand for an additional three months from the expiry date of your working holiday scheme visa. Your label will be endorsed with the same conditions as your working holiday scheme visa.

#### Health

People who intend to be in New Zealand:

- for more than six months who:
  - are from a country, area or territory not listed as low incidence for tuberculosis (TB), or
  - have spent more than a total of three months in the past five years in a country, area or territory not listed as low incidence for TB. or
  - have spent six consecutive months in a place that is not listed as a low incidence TB country since any previous application made to Immigration New Zealand,

must complete a Chest X-ray Certificate (INZ 1096).

• for more than 12 months must complete a General Medical Certificate (INZ 1007) and Chest X-ray Certificate (INZ 1096).

Please note, applicants for the Working Holidaymaker Extension visa are not required to submit a medical certificate or chest X-ray certificate regardless of the duration they have spent in New Zealand, unless requested to do so by an immigration officer.

Please refer to the guide *Health Requirements (INZ 1121)* for more details on immigration health instructions and a list of low-incidence TB countries, areas and territories.

#### Character

If you intend to be in New Zealand for two years or longer and you are aged 17 or over you must submit a police certificate from your country of citizenship and any country in which you have lived for five years or more since attaining the age of 17 years (or satisfactory evidence that you have never lived in that country).

If you have been removed, deported or excluded from any country, you may not meet character requirements and may not be eligible to be granted a visa. You must declare if you have been removed, deported or excluded from any country, excluding New Zealand.

Note: We may request additional information to enable your application to be determined.

#### Section A Personal details

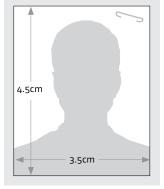
#### All applicants must complete this section.

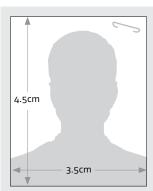
Attach **two** passport-size photographs of yourself here. The photographs must be less than six months old. Write your full name on the back of both of the photographs.

Al Name as shown in passport

Family/last name

Given/first name(s)







A4	Your name in ethnic s	cript				
A5	Gender  Male  Town/city of birth	Female A6 Date o	f birth DIDJEMIMJEY IY			
	Country of birth					
A8	Passport details					
	Number					
	Country			Expiry dat	e DIDIMIMINIYIYIY	
<b>A9</b>	Country of citizenship					
A10	Partnership status	☐ Married/in civil union☐ Separated	☐ Never married/ne	ver in civil union	☐ Partner/De facto☐ Divorced	
Se	ction B Contact	details				
	pplicants must comp					
<b>B</b> 1		ess and telephone number i	n your home country			
	1	·				
	Telephone (daytime)		Telephone (e	vening)		
	Fax	Emai	 			
B2	Your New Zealand res	our New Zealand residential address and telephone number (if you are already in New Zealand)				
	Address					
	Telephone (daytime)		Telephone (e	vening)		
	Fax	Emai	 			
B3	Name and address fo	r communication about this				
☐ Same as address at 🖪 , or ☐ Same as address at 🙉 , or ☐ as below						
	Family/last name		Given/first name	(s)		
	Company name (if app	plicable) and address				

	New Zealand Business Number (if applicable)				
	Telephone (daytime) Telephone (evening)				
	Fax Email				
B4	Do you authorise the person stated at 🖪 to act on your behalf? 🗌 Yes 🔲 No				
B5	Have you received immigration advice on this application?  Yes Make sure that your immigration adviser completes Section H: Immigration adviser's details.  No  You can find a definition of immigration advice at www.immigration.govt.nz/advice.				
В6	Would you like us to email you instructions for registering to check online how your application is progressing? $\square$ Yes $\ \square$ No				
В7	Names and addresses of friends, relatives, or contacts you have in New Zealand (if applicable).  Relationship				
	Address				
	Name Relationship				
	Address				
Se	tion C SSE work visa				
C1	Have you previously been granted a work visa under the TRSE or SSE Instructions? $\square$ Yes $\ \square$ No				
C2	Since your most recent entry to New Zealand, have you held any type of work visa (including a working holiday visa)?				
Noto	Yes No				
	If you have answered Yes to either $\begin{bmatrix} \mathbf{c} \end{bmatrix}$ or $\begin{bmatrix} \mathbf{c} \end{bmatrix}$ , you are not eligible for a work visa under SSE instructions. If you hold a working holiday ou may be eligible for a working holidaymaker extension visa, see Section D: Working holiday extension visa.				
<b>C</b> 3	Do you have an outward travel ticket or sufficient funds to purchase an outward travel ticket?  Yes  No				
<b>C4</b>	Do you intend to work for an eligible employer?  Yes Attach evidence to demonstrate your intention to work for an SSE-approved employer.  No				

ection D Working holidaymal	ker extension vis	a		
What was the start date of your working holiday in New Zealand?				
List the seasonal work you have und (Attach additional pages to this form if neces		land during your working h	oliday below.	
Name and contact details of employer	New Zealand Business Number	Position (planting/maintaining/ harvesting/packing)	Start date of employment	Finish date of employment
Name:				
Address:				
Phone number:				
Name:				
Address:				
Phone number:				
Name:				
Address:				
Phone number:				
Name:				
Address:				
Phone number:				
Make sure you attach evidence of all periods (eg a letter from the employer, tax statemen		orticulture and viticulture indust	ries to this applicati	on form
Do you have an outward travel ticke	et or sufficient funds	to purchase an outward tr	ravel ticket?	
Yes Attach evidence of your outward tra	avel ticket or funds.			
□No				
ction E Character details				
applicants must complete this secti	on.			
Have you been convicted at any tim any conviction(s) outside of New Zealand sul				nis includes
Are you currently:				
• under investigation Yes	□No			
• wanted for questioning $\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \$	□No			
• facing charges Yes for any offence in any country?	□No			
Have you ever been:				
• excluded Yes	□No			
<u> </u>	No			
• removed or deported Yes	□No			
from any country, excluding New Ze	aland?			

E4	Have you ever been refused a visa/permit to visit, work, study or reside in any country, excluding New Zealand?  Yes No
<b>E</b> 5	Have you ever been a member of, or adhered to, any terrorist organisation?   Yes   No
E6	Have you had (or 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 have answered yes to any of the questions above give full details. This includes full details of any charges,
	convictions and the sentence or penalty imposed. Continue on a separate piece of paper if necessary.
E7	Are you required to submit a police certificate? (See 'Character' information on page 2.) Yes No
Se	ection F Health details
	applicants must complete this section.
F1	Do you have tuberculosis (TB)? Yes No
F2	Are you HIV positive?
F3	Do you have any medical condition(s) that require, or may require, one of the following during your stay in New Zealand?
	• Renal dialysis
	• Hospital care Yes No
	• Residential care*
	If you have answered <b>Yes</b> to any of the above questions, provide further details such as what your medical condition is and how long you have had the medical condition.
F4	Are you required to submit a General Medical Certificate (INZ 1007) or a Chest X-ray Certificate (INZ 1096)?
	Yes Go to F5
	No Go to F8
	Applicants for the Working Holidaymaker Extension visa are not required to submit a medical certificate
	regardless of the duration they have spent in New Zealand unless requested to do so by an immigration officer.

F5 Have you submitted a <i>General Medical Certificat</i> Immigration New Zealand application in the last	e (INZ 1007) or a Chest X-ray Certificate (INZ 1096) with another
Yes Provide details of the type and date of the previous	
□ No Go to F6	
Application number	Type of application
Date of application Description	
Unless your health has deteriorated since your	previous medical certificate was issued, then you do not ge. We will advise you if we need you to submit additional rtificate at a later date.
F6 Have you attached a completed Chest X-ray Cert	ificate (INZ 1096)? Yes No
F7 Have you attached a completed General Medical	Certificate (INZ 1007)? ☐ Yes ☐ No
F8 Are you pregnant? Yes No	
Tick the option that applies to you: Is a physician Immigration New Zealand on your behalf?  Yes Has your physician supplied you with an eMedical Reference of the property of	n submitting your medical and/or chest X-ray certificate to
Yes Enter your eMedical Reference Code here:	
igsquare No Enter the name of the clinic that is submitting ye	our health information:
No If the physician has returned the medical and/or chesyour visa application.	st X-ray certificate to you, then you will need to submit these with
Section G Declaration	
	, and the information I have provided is true and correct.
I understand the questions and contents of this form I understand that if false or misleading information is further warning. I understand that if, between the time that I make thi matter relating to the application changes, I am oblig	s submitted, my application may be declined without
I understand the questions and contents of this form I understand that if false or misleading information is further warning.  I understand that if, between the time that I make thi matter relating to the application changes, I am oblig I am responsible for making sure I leave New Zealand for deportation.	is application and the time it is decided, any relevant led to inform Immigration New Zealand (INZ). I understand before my visa expires and that if I do not I may be liable wide information about my entitlement to work to potential
I understand the questions and contents of this form I understand that if false or misleading information is further warning.  I understand that if, between the time that I make thi matter relating to the application changes, I am oblig I am responsible for making sure I leave New Zealand for deportation.  I understand that Immigration New Zealand may prove employers via the online VisaView system. VisaView i Short-term work visa holders are generally not eligible covered by New Zealand's Reciprocal Health Agreement	is application and the time it is decided, any relevant led to inform Immigration New Zealand (INZ). I understand led before my visa expires and that if I do not I may be liable led information about my entitlement to work to potential is authorised by legislation. It for publicly-funded health and disability services. People lents with Australia and the United Kingdom are entitled to my medical treatment only. I understand that if not entitled to
I understand the questions and contents of this form I understand that if false or misleading information is further warning.  I understand that if, between the time that I make thi matter relating to the application changes, I am oblig I am responsible for making sure I leave New Zealand for deportation.  I understand that Immigration New Zealand may prove employers via the online VisaView system. VisaView i Short-term work visa holders are generally not eligible covered by New Zealand's Reciprocal Health Agreeme publicly-funded health care for immediately necessar free treatment, I will pay for any health care or medic I understand that if I have received immigration advice	is application and the time it is decided, any relevant led to inform Immigration New Zealand (INZ). I understand led before my visa expires and that if I do not I may be liable led information about my entitlement to work to potential is authorised by legislation. It for publicly-funded health and disability services. People lents with Australia and the United Kingdom are entitled to my medical treatment only. I understand that if not entitled to
I understand the questions and contents of this form I understand that if false or misleading information is further warning.  I understand that if, between the time that I make thi matter relating to the application changes, I am oblig I am responsible for making sure I leave New Zealand for deportation.  I understand that Immigration New Zealand may prove employers via the online VisaView system. VisaView i Short-term work visa holders are generally not eligible covered by New Zealand's Reciprocal Health Agreeme publicly-funded health care for immediately necessar free treatment, I will pay for any health care or medic I understand that if I have received immigration advice	is application and the time it is decided, any relevant led to inform Immigration New Zealand (INZ). I understand before my visa expires and that if I do not I may be liable wide information about my entitlement to work to potential is authorised by legislation. We for publicly-funded health and disability services. People ents with Australia and the United Kingdom are entitled to my medical treatment only. I understand that if not entitled to all assistance I may require in New Zealand. The form an immigration adviser and if that immigration adviser is 19 Act 2007 when they should be, INZ will return my application.
I understand the questions and contents of this form I understand that if false or misleading information is further warning.  I understand that if, between the time that I make thi matter relating to the application changes, I am oblig I am responsible for making sure I leave New Zealand for deportation.  I understand that Immigration New Zealand may prove employers via the online VisaView system. VisaView i Short-term work visa holders are generally not eligible covered by New Zealand's Reciprocal Health Agreeme publicly-funded health care for immediately necessar free treatment, I will pay for any health care or medic I understand that if I have received immigration advic not licensed under the Immigration Advisers Licensin I authorise INZ to provide information about my state	is application and the time it is decided, any relevant ed to inform Immigration New Zealand (INZ). I understand before my visa expires and that if I do not I may be liable vide information about my entitlement to work to potential s authorised by legislation.  The for publicly-funded health and disability services. People ents with Australia and the United Kingdom are entitled to my medical treatment only. I understand that if not entitled to all assistance I may require in New Zealand.  The from an immigration adviser and if that immigration adviser is 1900 Act 2007 when they should be, INZ will return my application.
I understand the questions and contents of this form I understand that if false or misleading information is further warning.  I understand that if, between the time that I make thi matter relating to the application changes, I am oblig I am responsible for making sure I leave New Zealand for deportation.  I understand that Immigration New Zealand may prove employers via the online VisaView system. VisaView i Short-term work visa holders are generally not eligible covered by New Zealand's Reciprocal Health Agreeme publicly-funded health care for immediately necessar free treatment, I will pay for any health care or medic I understand that if I have received immigration advic not licensed under the Immigration Advisers Licensin I authorise INZ to provide information about my state service agency. I authorise any health service agency to provide infor I authorise INZ to make any enquiries it considers necorder to make a decision on this application and enqu	is application and the time it is decided, any relevant ed to inform Immigration New Zealand (INZ). I understand before my visa expires and that if I do not I may be liable vide information about my entitlement to work to potential s authorised by legislation.  The for publicly-funded health and disability services. People ents with Australia and the United Kingdom are entitled to my medical treatment only. I understand that if not entitled to all assistance I may require in New Zealand.  The from an immigration adviser and if that immigration adviser is 1900 Act 2007 when they should be, INZ will return my application.

Section H Immigration adviser's details This section must be completed by the applicant's immigration adviser. If the applicant does not have an immigration adviser, this section does not have to be completed. Tick the **one** option that applies to you. ∐ I am a licensed immigration adviser under the New Zealand Immigration Advisers Licensing Act 2007. Go to H₂ I am exempt from licensing under the New Zealand Immigration Advisers Licensing Act 2007. Go to H3. 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, unless you are exempt. Licensed advisers. Provide your licence details. Licence type full provisional limited. List conditions specified in the register. Licence number 2,0, Go to Section I: Declaration by person assisting the applicant. Exempt from licensing. Tick one box below to show why you are exempt from licensing. ☐ I provided immigration advice in an informal or family context only, and I did not provide the advice systematically or for a fee. I am a New Zealand member of Parliament or member of their staff and I provided immigration advice as part of my employment agreement. I am a foreign diplomat or consular staff. I am an employee of the New Zealand public service and I provided immigration advice within the scope of my employment agreement. ☐ I am a lawyer and I hold a current practising certificate as a barrister or as a barrister and solicitor of the

I am employed by, or I am working as a volunteer for, a New Zealand community law centre where at least one lawyer is on the employing body of the community law centre or is employed by or working as a volunteer for

☐ I am employed by, or I am working as a volunteer for, a New Zealand citizens advice bureau.

High Court of New Zealand.

the community law centre in a supervisory capacity.

Go to Section I: Declaration by person assisting the applicant.

SSE/WHE Work Visa Application - February 2023 - 9

#### Section I Declaration by person assisting the applicant

This section must be completed and signed by the applicant's immigration adviser, or by any person who has assisted the applicant by providing immigration advice, explaining, translating, or recording information on the form for the applicant. If the applicant does not have an immigration adviser, and no one helped the applicant 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.  $\square$  Same as address given at  $\square$ , or  $\square$  as below. Family/last name Given/first name(s) Company name (if applicable) and address New Zealand Business Number (if applicable) 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 for me to change or add further information, or change or add any documents attached to the form, without making a statement identifying what information or material has been changed, added or attached and by whom. If I make these changes or additions, I must state on the form what they were, who made them and the reason they were made. I understand 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. 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 H: Immigration adviser's details are correct. Signature of person assisting Date | DID | MIMILY | YIY | Y

#### **Application checklist** Information and documents you must supply I have completed and signed the application form. I have provided my application fee and applicable levies. I have attached my passport or travel document (or certified copy)\*. I have attached a recent passport-size photograph. I have attached evidence of an outward ticket from New Zealand, or sufficient funds to buy one. Applicants applying under the SSE Instructions I have attached evidence of my employment offer, or other evidence, to demonstrate my intention to work for an eligible employer. Applicants applying under the Working Holidaymaker Instructions I have attached evidence of being employed to undertake seasonal work for three months in the horticulture and viticulture industries while holding my working holiday visa. Additional information and documents you may need to supply Health I have provided evidence about my health. I do not have to provide this evidence. Character I have provided evidence about my character. I do not have to provide this evidence. \* Please note during the processing of an application an immigration officer may request further documents or information, including your original passport. 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. **Returning your documents** Please return documents to me by secure post at the address given at: □ B1

\_\_\_ B2 □ B3

#### 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 work visa under the Supplementary Seasonal Employment (SSE) Instructions or the Working Holidaymaker Extension Instructions. We may also use the information to contact you for research purposes or to advise you on immigration matters.

The address of Immigration New Zealand is PO Box 1473, Wellington 6140, New Zealand.

This is not where your application should be sent.

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).

If you come to New Zealand, you will be able to ask to see the information we hold about you and have any of it corrected if you think it is necessary.

#### For more information

If you have questions about completing the form:

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



### Section J

## Paying your application fee and levies

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 DIDIMIMICATION DISTRIBUTION DIST
Signature of cardholder
Date DIDIMIMINIANIAN