INZ 1245



# Christchurch Response (2019) Category Application for Residence

#### 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 write clearly in English using CAPITAL LETTERS.

### Invitation to apply

Have you been invited to apply for residence under the Christchurch Response (2019) Category?

Yes No You are not eligible to make an application under the Christchurch Response (2019) Category.

#### Section A Principal applicant's personal details

#### The principal applicant must complete this section.

here	ch <b>two</b> identical passport-size photographs of yourself . The photographs must be less than six months old. e your full name on the back of the photograph.					
<b>A</b> 1	Name as shown in passport	4.50	cm	4.5cm		
	Family/last name					
	Given/first name(s)		3.5cm →	•	3.5cm	
A2	Preferred title Mr Mrs Ms Miss Dr Other (specify	)				
A3	Other names you are known by or have ever been known by					



A4	Your name in ethnic s	script			
A5	Gender 🗌 Male 🗌 F	emale A6 Date of bi	rth	) _ M _ M _ L Y _ Y _ Y _ Y _ Y	
A7	Town/city of birth				
	Country of birth				
A8	Countries of citizens	nip			
A9	Partnership status	Married/in civil union Separated		ever married/never in civil union	Partner/De facto     Divorced
You	ir documents				
A10	Provide details of all	the passports you currently	hold		
	Passport 1				
	Number	Count	ry		
	Name as shown in pa	issport			
	Family/last name			Given/first name(s)	
	Expiry date	MILYLYLY Place of issue			
	Passport 2				
	Number	Count	ry		
	Name as shown in pa	issport			
	Family/last name			Given/first name(s)	
	Expiry date	MILY LY LY Place of issue			

Se	Section B Contact details									
B1	1 Your residential address and contact details in New	Zealand								
	Address	Address								
	Telephone (daytime)	Telephone (evening)								
	Fax Email									
B2	2 Name and address for communication about this ap	plication								
	☐ Same as at 團, or ☐ Other									
	Name of contact person									
	Address									
	Telephone (daytime)	Telephone (evening								
	Telephone (daytime)	Telephone (evening								
B3	Fax Email									
B3	Fax Email									
B3 B4	Fax    Email      3    Do you authorise the person stated at B2 to act on y	your behalf? isers or persons exempt from licensing who work for the								
	<ul> <li>Fax Email</li> <li>Do you authorise the person stated at B2 to act on y</li> <li>Yes No</li> <li>Do you authorise all other licensed immigration adv organisation named at B2 to act on your behalf (if a</li> </ul>	your behalf? isers or persons exempt from licensing who work for the pplicable)?								
	<ul> <li>Fax Email</li> <li>Do you authorise the person stated at B2 to act on y</li> <li>Yes No</li> <li>Do you authorise all other licensed immigration adv organisation named at B2 to act on your behalf (if a Yes Note: the person identified at B2 will receive all communication and the person identified at B2 will receive at the person identif</li></ul>	your behalf? isers or persons exempt from licensing who work for the pplicable)?								
B4	<ul> <li>Fax Email</li> <li>Do you authorise the person stated at B2 to act on y</li> <li>Yes No</li> <li>Do you authorise all other licensed immigration advorganisation named at B2 to act on your behalf (if a Yes Note: the person identified at B2 will receive all communicated at B2 may act on my behalf.</li> </ul>	your behalf? isers or persons exempt from licensing who work for the pplicable)? nication from Immigration New Zealand.								
	<ul> <li>Fax Email</li> <li>Do you authorise the person stated at B2 to act on y</li> <li>Yes No</li> <li>Do you authorise all other licensed immigration adv organisation named at B2 to act on your behalf (if a Yes Note: the person identified at B2 will receive all commu</li> <li>No Only the person indicated at B2 may act on my behalf.</li> </ul>	your behalf? isers or persons exempt from licensing who work for the pplicable)? nication from Immigration New Zealand.								
Β4	<ul> <li>Fax Email</li> <li>Do you authorise the person stated at B2 to act on y</li> <li>Yes No</li> <li>Do you authorise all other licensed immigration adv organisation named at B2 to act on your behalf (if a Yes Note: the person identified at B2 will receive all commu</li> <li>No Only the person indicated at B2 may act on my behalf.</li> <li>Have you received immigration advice on this application</li> </ul>	vour behalf? isers or persons exempt from licensing who work for the pplicable)? nication from Immigration New Zealand. ation?								
B4 B5	<ul> <li>Fax Email</li> <li>Do you authorise the person stated at B2 to act on y</li> <li>Yes No</li> <li>Do you authorise all other licensed immigration adv organisation named at B2 to act on your behalf (if a Yes Note: the person identified at B2 will receive all commu</li> <li>No Only the person indicated at B2 may act on my behalf.</li> <li>Have you received immigration advice on this application</li> </ul>	your behalf? isers or persons exempt from licensing who work for the pplicable)? <i>nication from Immigration New Zealand.</i> ation? ion.govt.nz/advice.								

## Section C Your family

## In this section, please give details of ALL your family, whether they are migrating with you or not. It is not necessary to list deceased family members.

For more information, see 'Completing Section D: Your family' in the *Residence Guide (INZ 1002)*.

Note: if you do not declare all your partner's family members, your residence application could be declined. If you are granted residence and it is later found that all family members were not declared, you may become liable for deportation. In addition, any family members not declared may not be eligible for residence.

CI Please give your parents' details. Include both biological and adoptive parents, if applicable. If your parents are deceased, give details of legal guardians (if any), and/or grandparents.

Full name	Gender (M/F)	Date of birth (DD/MM/YYYY)	Partnership status (e.g. single, married, partner/de facto, etc.)	Country of residence
		/ /		
		/ /		
		/ /		
		/ /		

Please give the details of your brothers and sisters. Include half, step and adopted brothers and sisters.

Full name	Gender (M/F)	Date of birth (DD/MM/YYYY)	Partnership status (e.g. single, married, partner/de facto, etc.)	Country of residence
		/ /		
		/ /		
		/ /		
		/ /		
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		/ /		

<sup>C3</sup> Do you have any children? This includes biological children, adopted children, and step-children from previous marriages/relationships.

**Yes** *Provide details below* 

**NO** Go to Section D: Your partner

Full name	Gender (M/F)	Date of birth (DD/MM/YYYY)	Partnership status (e.g. single, married, partner/de facto, etc.)	Country of residence	Does the person intend to migrate with you? (Y/N)
		/ /			
		/ /			
		/ /			
		/ /			
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		/ /			
		/ /			

## Section D Your partner

## If you do not have a partner, or your partner is not included in your application, go to Section E: Dependent children.

If your partner is eligible to be included in this application (check your Invitation to Apply letter), you must provide evidence to demonstrate that you and your partner meet the minimum partnership requirements. Refer to 'Family: Partnership Category' in the *Residence Guide (INZ 1002)*.

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

D1	Have you provided the evidence listed in your expression of interest demonstrating that you and your partner meet the minimum partnership requirements?		
D2	Your partner's name as shown in passport		
	Family/last name	4.5cm	4.5cm
	Given/first name(s)	3.5cm	3.5cm
		5.5	<b>V</b>
D3 D4	Partner's preferred title Mr Mrs Ms Miss Dr Other ( <i>specify</i> ) Other names your partner is known by or has ever been known	own by	
D5	Partner's gender Male Female D6 Partner's d	date of birth	Y I Y I Y
D7	Partner's town/city of birth		
	Partner's country of birth		
	Partner's countries of citizenship		

#### Your partner's documents

D8	Provide details of all the passports your partner currently	/ holds
	Passport 1	
	Number   Country	
	Name as shown in passport	
	Family/last name	Given/first name(s)
	Expiry date DIDIMINICY Place of issue	
	Passport 2	
	Number Country	
	Name as shown in passport	
	Family/last name	Given/first name(s)
	Expiry dateM_M_YYYYY Place of issue	

In the following questions give details of all your partner's family, whether migrating with you or not, including those adopted legally or by custom. It is not necessary to list deceased family members.

Note: if you do not declare all your partner's family members, your residence application could be declined. If you are granted residence and it is later found that all family members were not declared, you may become liable for deportation. In addition, any family members not declared may not be eligible for residence.

D9 Please give your partner's parents' details. Include both biological and adoptive parents, if applicable. If both parents are deceased, give details of legal guardians (if any), and/or grandparents.

Full name	Gender (M/F)	Date of birth (DD/MM/YYYY)	Partnership status (e.g. single, married, partner/de facto, etc.)	Country of residence
		/ /		
		/ /		
		/ /		
		/ /		

DIO Please give the details of your partner's brothers and sisters. Include half, step and adopted brothers and sisters.

Full name	Gender (M/F)	Date of birth (DD/MM/YYYY)	Partnership status (e.g. single, married, partner/de facto, etc.)	Country of residence
		/ /		
		/ /		
		/ /		
		/ /		
		/ /		
		/ /		
		/ /		
		/ /		

DII Does your partner have any children? This includes biological children, adopted children, and step-children from previous marriages/relationships.

Yes Provide details below

**No** Go to Section E: Dependent children

Full name	Gender (M/F)	Date of birth (DD/MM/YYYY)	Partnership status (e.g. single, married, partner/de facto, etc.)	Country of residence	Does the person intend to migrate with you? (Y/N)
		/ /			
		/ /			
		/ /			
		/ /			
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		/ /			
		/ /			

## Section E Dependent children

## You must complete this section with the details of each dependent child included in this application. If you are not including any dependent children, go to Section F: Character.

Dependent children must be either:

- 17 years old or younger and single, or
- 18,19 or 20 years old and with no children of their own, or
- 21,22,23 or 24, single, without children of their own, and rely on you or your partner for financial support

Attach **two** passport-size photographs for each of your dependent children included in this application. The photographs must be less than six months old. Write your child's full name on the back of the photograph.

#### Dependent child 1

EI	Child's name as shown in passport Family/last name					
	Given/first name(s)		4.5cm		4.5cm	
E2	Other names child is known by or has ever been known by		3.5cm		3.5cm	
E3 E5	Child's gender Male Female E4 Child's date Child's country of birth	e o	f birth 📴 דער און	][ <sup>Y</sup> ] <sup>Y</sup> ] <sup>Y</sup> ] <sup>Y</sup> ]	Y	
E6	Child's passport details       Number      Country			Expiry da	te 🕞 te	ΥΥΥΥ
E7	Child's countries of citizenship					

Dep	endent child 2
E8	Child's name as shown in passport Family/last name
	Given/first name(s) 4.5cm 4.5cm
E9	Other names child is known by or has ever been known by
E10	Child's gender Male Female Ell Child's date of birth
E12	Child's country of birth
E13	Child's passport details
	Number     Expiry date
E14	Child's countries of citizenship
Dep	endent child 3
E15	Child's name as shown in passport Family/last name
	Given/first name(s) 4.5cm 4.5cm
E16	Other names child is known by or has ever been known by
E17	Child's gender Male Female
E19	Child's country of birth
E20	Child's passport details
	Number     Expiry date
E21	Child's countries of citizenship

## Dependent child 4

E28       Child's countries of citizenship         If you have any other dependants, please continue on a separate sheet of paper.         Section F       Character	E22	Child's name as shown in passport Family/last name
<ul> <li>24 Child's gender Male Female E25 Child's date of birth DIDIMINITYTYTY</li> <li>25 Child's country of birth</li> <li>27 Child's passport details</li> <li>Number Country Country Expiry date DIDIMINITYTY</li> <li>28 Child's countries of citizenship If you have any other dependants, please continue on a separate sheet of paper.</li> <li>29 Section F Character</li> <li>7 Have you provided police certificates for every person in this application aged 17 years and over from all countries</li> </ul>		Given/first name(s) 4.5cm 4.5cm
<ul> <li>E26 Child's country of birth</li> <li>E27 Child's passport details</li> <li>Number Country Country Expiry date Expiry date I</li></ul>	E23	Other names child is known by or has ever been known by
<ul> <li>E27 Child's passport details</li> <li>Number Country Expiry date Expiry date Expiry date Further the second seco</li></ul>	E24	Child's gender Male Female E25 Child's date of birth
Number Expiry date   E28 Child's countries of citizenship   If you have any other dependants, please continue on a separate sheet of paper.     Section F   Character     F1   Have you provided police certificates for every person in this application aged 17 years and over from all countries of the person in this application aged 17 years and over from all countries of the person in this application aged 17 years and over from all countries of the person in this application aged 17 years and over from all countries of the person in this application aged 17 years and over from all countries of the person in this application aged 17 years and over from all countries of the person in this application aged 17 years and over from all countries of the person in this application aged 17 years and over from all countries of the person in	E26	Child's country of birth
<ul> <li>E28 Child's countries of citizenship</li> <li>If you have any other dependants, please continue on a separate sheet of paper.</li> <li>Section F Character</li> <li>FI Have you provided police certificates for every person in this application aged 17 years and over from all countried</li> </ul>	E27	Child's passport details
If you have any other dependants, please continue on a separate sheet of paper.         Section F       Character         FI       Have you provided police certificates for every person in this application aged 17 years and over from all countried		Number     Expiry date
Section F       Character         FI       Have you provided police certificates for every person in this application aged 17 years and over from all countries	E28	
FI Have you provided police certificates for every person in this application aged 17 years and over from all countrie		If you have any other dependants, please continue on a separate sheet of paper.
	Se	ction F Character
Yes No	FI	
Section G Health	Se	ction G Health
GI Have you or anyone in your application been requested to provide a <i>Limited Medical Certificate (INZ 1201), Chest X-ray Certificate (INZ 1096)</i> , or additional medical tests?	G1	Chest X-ray Certificate (INZ 1096), or additional medical tests?
Ves Go to question 2		

**G2** Enter your eMedical Reference Code(s) here:

Se	ction H Your connection to the attacks
H1	Were you present at the Masjid al-Noor or the Linwood Masjid or injured during the terrorist attack on 15 March 2019?
	Yes Go to H3
	No Go to H2
H2	Have you provided evidence that you are an eligible immediate family member of a person who was present at the Masjid al-Noor or the Linwood Masjid? 🗌 Yes 🗌 No
	List the evidence here
H3	Did any person included in this application hold a limited visa, visitor visa, working holiday visa or were unlawfully in New Zealand on 15 March 2019?
	Yes Go to H4 NO Go to next section
H4	You must provide evidence that you or your family members were based in New Zealand on 15 March 2019.
	List the evidence here
Se	ction I Amendments or new information
11	Amendments or new information
	If your circumstances have changed since submitting your expression of interest, you must complete the table below.
	Question number         Page number         Addition/Change

Question number	Page number	Addition/Change

## Section J 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. Please ensure you understand the declarations below before you sign and agree to them.

I understand that the information I provided in my expression of interest constitutes part of this application for residence and that the onus is on me to check that no information provided in my expression of interest is now incorrect or incomplete.

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 have provided true and correct answers to the questions in this form.

I declare that I provided a full list of my family members in this application (including any children 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 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 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 Immigration New Zealand to make any enquiries it deems necessary regarding the information provided on this form and/or accompanying documentation and to share this information with other government agencies (including overseas agencies) to the extent necessary to make decisions about my immigration status.

I authorise any agency whether in New Zealand or overseas, including but not limited to border or immigration agencies, education providers, financial institutions, foreign embassies, government authorities, healthcare providers, police or other law enforcement agencies, that holds information (including personal information) related to information on this form and/or accompanying documentation to disclose that information to Immigration New Zealand.

I understand that if I have received immigration advice from an immigration adviser and if that immigration adviser is not licensed under the Immigration Advisers Licensing Act 2007 when they should be, Immigration New Zealand will return my application.

I authorise Immigration New Zealand to provide information about my health and my immigration status to any health service agency. I authorise any health service agency to provide information about my health to Immigration New Zealand.

Signature of principal applicant	Date	
Signature of partner (if applicable)	Date	

Signatures of accompanying dependent children over 18 years of age (if applicable)

Section K Immigration adviser's detai
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adv	s section must be completed by the applicant's immigration adviser. If the applicant has authorised all isers within an organisation to act on their behalf at [84], only the person named at [82] must complete this tion. If the applicant does not have an immigration adviser, this section does not have to be completed.
K1	Tick the <b>one</b> option that applies to you.
	🗌 I am a licensed immigration adviser under the New Zealand Immigration Advisers Licensing Act 2007. Go to 🗵
	$\Box$ I am exempt from licensing under the New Zealand Immigration Advisers Licensing Act 2007. Go to $f{k3}$
	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.
K2	Licensed advisers. Please provide your licence details.
	Licence type 🗌 full 🗌 provisional 🗌 limited. List conditions specified in the register.
	Licence number 2 0 Go to Section L: Declaration by person assisting the applicant.
K3	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 High Court of New Zealand.
	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 the community law centre in a supervisory capacity.
	$\Box$ I am employed by, or I am working as a volunteer for, a New Zealand citizens advice bureau.

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

## Section L 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.

Same as name and address given at [12], or as below.

#### Family/last name

Given/first name(s)

Organisation name (if applicable) and address

New Zealand Business	Number (if applicable)	For help search: <b>www.nzbn.govt.nz</b>	
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 K: Immigration adviser's details are correct.

Signature of person assisting

### 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 determine your eligibility for residence in New Zealand. 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 supply it then your application for residence is likely to be declined.

## 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 to the extent necessary to make decisions about your immigration status (as you have agreed

in the declaration). In particular, the Ministry of Social Development (Work and Income) may be given information about your personal resources.

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 your application should be sent.

#### For more information

If you have questions about completing the form:

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

#### Send your completed application to:

Immigration New Zealand PO Box 22111 Christchurch 8140

## Application checklist

Office use only	Please present your documents in the following order	Please tick
	Application form, fully completed and signed, and including two passport-sized photographs for each applicant	
	Marriage certificate (if applicable)	
	Appropriate evidence to show that your partnership is genuine and stable (if applicable)	
	Full birth certificate(s)	
	Police certificate(s) (if applicable)	
	Photocopies of the identity pages of your passport(s)	
	Evidence of relationship to the directly affected person (if applicable)	
	Evidence that you and/or your family were based in New Zealand on 15 March 2019 (if applicable)	

## Returning your documents

Please return documents to me by secure post at the address given at:

B1

B2

New Zealand Government