Working Holiday Scheme
Second Work Visa Application
for a temporary stay in New Zealand

Who should use this form?

Use this form if you are:

• in New Zealand on a 12-month Canada or United Kingdom working holiday scheme (WHS) work visa; and
• you wish to apply for a further 11 months.

You must still meet all the requirements from your first application, except the requirement to not have previously been approved a WHS work visa.

No person who holds a temporary visa (including a work visa) in New Zealand may provide commercial sexual services, or operate or invest in a business which provides commercial sexual services.

What documents do I need to provide?

• If you are applying for a further United Kingdom WHS visa, you need to provide evidence of having NZ$350 per month of funds available for maintenance for the remaining period of stay in New Zealand.

• If you are applying for a further Canada WHS visa, you need to provide evidence that you have purchased medical and comprehensive hospitalisation insurance covering the remaining period of stay in New Zealand.

Health requirements

As you intend to be in New Zealand for more than 12 months you must complete a General Medical Certificate (INZ 1007) and Chest X-Ray Certificate (INZ 1096) and provide these to Immigration New Zealand.

If you seek health care when in New Zealand you should carry your passport so that health providers can check whether you are eligible for publicly-funded health care.

Download forms and guides from our website at www.immigration.govt.nz/forms.

VisaView

It is an offence for an employer to employ a person who is not entitled to work in New Zealand. It is also an offence for an education provider to allow a person to undertake a course of study if that person is not entitled to do so.

VisaView is an online enquiry system that allows registered employers and education providers to check whether a person who is not a New Zealand citizen can work or study in New Zealand for them.

If you believe that an employer or education provider has been given the wrong 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 (INZ) 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.
**Section A  Your application**

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 photographs.

A1  Have you previously been granted a work visa under the Canada or United Kingdom Working Holiday Scheme?

- [ ] Yes  Go to A2
- [x] No  You must lodge your application using the online system.

A2  Are you a Canada or United Kingdom Working Holiday Scheme visa holder applying for a further work visa up to a maximum entitlement of 23 months?

- [ ] Yes  Go to A3
- [x] No  You are not eligible for another visa under a working holiday scheme.

A3  Are you currently in New Zealand on your Canada or United Kingdom Working Holiday Scheme work visa?

- [ ] Yes  Go to Section B: Personal details.
- [x] No  You are not eligible for another visa under this scheme. You must be in New Zealand on a valid Canada or United Kingdom Working Holiday Scheme work visa to apply.

**Section B  Personal details**

B1  Name as shown in passport

<table>
<thead>
<tr>
<th>Family/last name</th>
<th>Given/first name(s)</th>
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B2  Other names you are known by or have ever been known by

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B3  Gender  [ ] Male  [ ] Female

B4  Date of birth  [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ]

B5  Town/city of birth

<table>
<thead>
<tr>
<th>Country of birth</th>
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B6  Country of citizenship

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<th>Country of citizenship</th>
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B7  Passport number

<table>
<thead>
<tr>
<th>Expiry date</th>
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<td>[ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ]</td>
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**Section C  Contact details**

C1  Your residential address and telephone number in your home country

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<th>Address</th>
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<th>Telephone (daytime)</th>
<th>Telephone (evening)</th>
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<th>Fax</th>
<th>Email</th>
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</table>
Name and address for communication about this application

☐ Same as address at C1, or ☐ As below

Family/last name ___________________________ Given/first name(s) ___________________________

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 ___________________________

Do you authorise the person stated at C2 to act on your behalf? ☐ Yes ☐ No

Have you received immigration advice on this application?

☐ Yes Please 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.

Name and address of a friend, relative, or contact you have in New Zealand (if applicable)

Name ___________________________ Relationship ___________________________

Address ___________________________

Section D Travel plans

What date did you arrive in New Zealand? ___________________________

What (approximate) date do you intend to depart New Zealand? ___________________________

What arrangements have you made for your travel out of New Zealand?

Section E Your character

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

Are you currently:

• under investigation ☐ Yes ☐ No

• wanted for questioning ☐ Yes ☐ No

• facing charges ☐ Yes ☐ No

for any offence in any country?
When filling in this form, please write clearly using CAPITAL LETTERS.

E3 Have you ever been:
- excluded  □ Yes  □ No
- refused entry  □ Yes  □ No
- removed or deported  □ Yes  □ No
from any country, excluding New Zealand?

E4 Have you ever been refused a visa/permit to visit, work, study or reside in any country, excluding New Zealand?  □ Yes  □ No

E5 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.

Section F  Your health

F1 Do you have tuberculosis (TB)?  □ Yes  □ No

F2 Do you have any serious health conditions, such as conditions requiring hospitalisation, residential care*, significant support, long-term medication or dialysis?
□ Yes  □ No

F3 If you have answered Yes to the questions in F1 or F2, provide details below.

Medical certificates you must provide

F4 Have you submitted a medical certificate, or a chest X-ray certificate, with another Immigration New Zealand application in the last 36 months?  □ Yes Go to F5  □ No Go to F6

F5 Date of previous application ________________
Type of application ________________________________

Unless your health has deteriorated since your previous medical certificate was issued, then you do not have to provide a medical certificate at this stage. We will advise you if you have to submit another certificate, test, or report at a later date.

F6 Are you pregnant?  □ Yes  □ No

F7 Tick the option that applies to you: Is a physician submitting your medical and/or chest X-ray certificates to Immigration New Zealand on your behalf?
□ Yes Has your physician supplied you with an eMedical Reference Code (NZER)?
□ Yes Enter your eMedical Reference Code here: ________________________________
□ No Enter the name of the clinic that is submitting your health information: ________________________________
□ No if the physician has returned the medical and/or chest X-ray certificates to you, then you will need to submit these with your visa application.

* Residential care is defined as in-patient care for people with psychiatric, sensory or intellectual disabilities or live-in facilities for the aged.
Section G  Declaration by applicant

I have provided true and correct answers to the questions in this form.
I understand that if false or misleading information is submitted, my application may be declined without further warning.
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, INZ will return my application.
I understand that Immigration New Zealand may provide information about my entitlement to work to potential employers via the online VisaView system. If I undertake a course of study while in New Zealand, I authorise Immigration New Zealand to provide information about my immigration status to my education provider, including via VisaView.
I agree to tell Immigration New Zealand about any changes to my circumstances that occur after making this application.
I agree to leave New Zealand before my visa expires. If I remain in New Zealand after my visa has expired, I will become liable for deportation.
I agree that if I am not entitled to free health care in New Zealand, I will pay for any health care or medical assistance I may require in New Zealand.
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 applicant ___________________________ Date ________________

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.

H1  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.

H2  Licensed advisers. Provide your licence details.

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

Licence number [20__________]  Go to Section I: Declaration by person helping the applicant to complete this form.

H3  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.
☐ I am employed by, or I am working as a volunteer for, a New Zealand citizens advice bureau.

Go to Section I: Declaration by person helping the applicant to complete this form.
Section I Declaration by person helping the applicant to complete this form

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 filling in 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 address given at ☐ or ☐ as below.

Family/last name

Given/first name(s)

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 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 ____________

Application checklist

All applicants must provide:

☑ Passport or travel document

☑ Completed, signed application form

☑ Two passport size photographs

☑ Medical and chest X-ray certificates if required by section F.

United Kingdom WHS applicants must also provide:

☐ Evidence of NZ$350 per month of maintenance funds (e.g. NZ bank account balance or credit card statements).

Canada WHS applicants must also provide:

☐ Evidence of having purchased medical and comprehensive hospital insurance covering the remainder of stay in New Zealand.

*While you can provide a certified copy of your passport with your application, we highly recommend you provide your original passport. This will enable us to process your application faster and it may be needed to complete your application. Please note during the processing of an application an immigration officer may request any document, including your original passport.
Returning your documents

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

☐ C1
☐ C2

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. 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.

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. Do not send your application to this address.

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).

Section J  Paying your application fee and levies

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

Your application fee and levies

Amount you are paying:

Amount

Currency
(e.g. NZD, USD, RMB)

Application number
(office use only)

Preferred methods of payment

We recommend that you use one of the following methods of payment for better security and faster processing:

☐ Bank cheque/bank draft
☐ Credit card (choose one)
☐ Mastercard  ☐ Visa
☐ SWITCH card (UK only)  SWITCH card Issue number

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 card.

Expiration date

Signature of cardholder

Date

Other methods of payment

Personal cheque. Note that we will hold your application for 10 working days to allow the cheque to be cleared.

We do not accept money orders or cash.