OFFICE USE ONLY | Client no.: | Date received: / / | Application no.

March 2021 INZ 1244



Christchurch Response (2019) Category Expression of Interest

The Christchurch Response (2019) Category is a special permanent resident visa available to people at the Masjid al-Noor or the Linwood Masjid during the terrorist attack on 15 March 2019 and to their immediate family living in New Zealand.

You must meet the following requirements:

- be healthy* and of good character
- have been based in New Zealand on 15 March 2019
- have been directly affected by the attacks. This includes those:
 - present at either mosque during the attack, or
 - · injured as a result of the attack, or
 - the immediate family of a person present at either mosque during the attack, or
 - the immediate family of a person who was injured or died as a result of the attack.

*You will not be refused a visa because of injuries you received in the attack.

Based in New Zealand

You must have been living primarily in New Zealand on 15 March 2019. If you had a work or student visa on 15 March we'll usually consider you to have been living primarily in New Zealand. If you had a visitor visa, a limited visa, a working holiday visa or your visa had expired, you'll need to explain in what way you were living primarily in New Zealand on 15 March 2019.

Directly affected by the attack

Someone directly affected by the attack is a person on the New Zealand Police list of people who:

- died in the attack
- injured as a result of the attack
- present at either mosque during the attack (but who did not die and who was not injured)

Immediate family

Which immediate family members are eligible depends on whether the person directly affected by the attack was an adult or a dependent child.

Adults directly affected by the attack

If you are the family member of an adult who was directly affected by the attack, you can get this visa if you are their:

- partner married, civil union or de facto
- dependent child
- parent or partner's parent.

Children directly affected by the attack

If you are the family member of a dependent child who was directly affected by the attack, you can get this visa if you are their:

- brother or sister, and still dependent on your parents
- · parent, or
- · grandparent.

Process

There are 3 stages to get a Christchurch Response (2019) Category visa:

- Complete this expression of interest (EOI) form and send it to us.
- 2. If your claims are credible, we'll invite you to apply and tell you what evidence you need to send us.
- 3. You send us your application and evidence.

Send this form to:

Immigration New Zealand PO Box 22111 Christchurch 8140 New Zealand

You don't need to pay a fee with this expression of interest and you don't need to provide any documents or evidence.

Help

For more information:

- visit our website: www.immigration.govt.nz/christchurch
- call us: 0508 22 52 88



Se	ction A Principal applicant's personal details			
A 1	Name as shown in passport			
	Family/last name Given/first name(s)			
A2	Preferred title Mr Mrs Ms Miss Dr other (please specify)			
A3	Other names you are known by or have ever been known by			
A4	Your name in ethnic script			
A 5	Gender Male Female A6 Date of birth			
A 7	Town/city of birth			
	Country of birth			
A8	Countries of citizenship			
A 9	Partnership status Married/in civil union Never married/never in civil union Partner/De fact Separated Engaged Widowed Divorced			
A10	Have you been living with your partner in a genuine and stable relationship for 12 months or longer?			
	Yes Go to A11			
	No Provide details of your relationship with your partner and how long you have been living together			
A11	Did you hold a work or student visa on 15 March 2019?			
	Yes Go to A12			
	No Please explain below why you consider you were based in New Zealand on 15 March 2019			
Υοι	ır documents			
Note.	: For this expression of interest we do not need originals or copies of your documents.			
A12	Provide details of all the passports you currently hold			
	Passport 1			
	Number Country			
	Name as shown in passport			
	Family/last name Given/first name(s)			

	Expiry date DIDIMINITY Place of issue		
	Passport 2		
	Number Country		
	Name as shown in passport		
	Family/last name Given/first name(s)		
	Expiry date DIDILMIMICATION Place of issue		
Se	Section B Contact details		
B1	Your residential address and contact details in New Zealand		
	Address		
	Telephone (daytime) Telephone (evening)		
	Email		
B2	Name and address for communication about this expression of interest		
	Contact me at address in 🖪 , or 🗌 Other Please fill in details below		
	Name of contact person		
	Organisation name (if applicable)		
	the state of the s	ch: www.nzbn.govt.nz	
	Address		
	Telephone (daytime) Telephone (evening)		
	Email		
В3	Do you authorise the person stated at 182 to act on your behalf?		
	☐ Yes ☐ No		
В4	Do you authorise all other licensed immigration advisers or persons exempt from licensing organisation named at 12 to act on your behalf (if applicable)?	յ who work for the	
	\square Yes Note: the person identified at $^{ t B2}$ will receive all communication from Immigration New Zealand.		
	No Only the person indicated at B2 may act on my behalf.		
B5	Have you received immigration advice for this expression of interest?		
	Yes Please make sure that your immigration adviser completes Section I: Immigration adviser's details.		
_	□No		
Ø	You can find a definition of immigration advice at www.immigration.govt.nz/advice		

56	ection C Your partner		
	this section we need to gather and confirm your partner's p en if your partner is not intending to apply for residence wit		
0	Information on partnership evidence can be found at www.immigration.govt.nz/partnership.		
C 1	Partner's name as shown in passport		
	Family/last name Gi	ven/first name(s)	
C2	Preferred title Mr Mrs Ms Miss Dr other (plea	se specify)	
C3	Other names your partner is known by or has ever been known	own by	
C 4	Partner's name in ethnic script		
C 5	Partner's gender Male Female C6 Partner's d	ate of birth DIDIMIMICALA	
C 7	Partner's town/city of birth		
	Partner's country of birth		
C8	Partner's countries of citizenship		
C9	Will your partner be included in your residence application? Yes No		
You	our partner's documents		
Note:	te: For this expression of interest we do not need originals or copies of your p	artner's documents.	
C 10	Provide details of all the passports your partner currently holds.		
	Passport 1		
	Number Country		
	Name as shown in passport		
	Family/last name Gi	iven/first name(s)	
	Expiry date DIDITED Place of issue		
	Passport 2		
	Number Country		
	Name as shown in passport		
	Family/last name Gi	iven/first name(s)	
	Expiry date DIDIMINITY Place of issue		

Section D Dependent children

In this section we need to gather and confirm information about your dependent children. You must provide this information even if your children are not intending to apply for residence with you. Dependent children must be either:

- 17 years old or younger and single, or
- 18, 19 or 20 years old, single 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

Dan	
	pendent child 1
D1	Child's name as shown in passport
	Family/last name
	Given/first name(s)
D2	Other names child is known by or has ever been known by
D3	Child's gender Male Female D4 Child's date of birth D1DJMMJYJYJYJY
D5	Child's country of birth
D6	Child's passport details
	Number Country Expiry date DIDIMINITY FINANCIAL Expiry date
D 7	Child's countries of citizenship
D8	Partnership status Married/in civil union Never married/never in civil union Partner/De facto Separated Engaged Widowed Divorced
D9	Does this child have children of their own?
D10	Will this child be included in your residence application? \square Yes \square No
Dep	pendent child 2
D11	Child's name as shown in passport
	Family/last name
	Given/first name(s)
D12	Other names child is known by or has ever been known by
D13	Child's gender Male Female D14 Child's date of birth DIDIMINITY OF THE DIDIMINITY OF
D15	Child's country of birth
D16	Child's passport details
	Number Country Expiry date DIDIMINITY
D17	Child's countries of citizenship

Whe	When filling in this form, please write clearly using CAPITAL LETTERS.		
D18	D18 Partnership status ☐ Married/in civil union ☐ Nev	er married/never in civil union aged \text{Widowed}	Partner/De facto
D19	Does this child have children of their own? Yes No		
D20	D20 Will this child be included in your residence application?	☐Yes ☐No	
Dep	Dependent child 3		
D21			
	Family/last name		
	Given/first name(s)		
D22	Other names child is known by or has ever been known by		
D23	D23 Child's gender	f birth DIDJ[MIMJ[YIYIY]	
D25	D25 Child's country of birth		
D26	D26 Child's passport details		
	Number Country	Expiry date	e DIDIEMIMIENIA
D27	Child's countries of citizenship		
D28	D28 Partnership status Married/in civil union Nevel Separated Enga	er married/never in civil union aged	☐ Partner/De facto ☐ Divorced
D29	D29 Does this child have children of their own? Yes No		
D30	D30 Will this child be included in your residence application?	☐ Yes ☐ No	
If yo	If you have any other dependants, please continue on a separat	e sheet of paper.	
Se	Section E Character		
	The following questions apply to everyone included in this ex	rpression of interest aged 17 yea	ars and over.
E1	Have you, or anyone included in this expression of interest including any driving offence? Please note that this includes any or wiped by 'clean slate' legislation. Yes No		
E 2	Are you, or anyone included in this expression of interest for under investigation Yes No • wanted for questioning Yes No • facing charges Yes No	or any offence in any country, cu	irrently:
E3	Do you, or does anyone included in this expression of interin any country? Yes No	est, currently have an outstandi	ng arrest warrant

E4	Have you, or has anyone included in this expression of interest, ever been:
	• excluded Yes No
	• refused entry
	• removed or deported Yes No
	from any country, excluding New Zealand?
E5	Have you, or has anyone included in this expression of interest, ever been a member of, or adhered to, any terrorist organisation? Yes No
E6	Have you, or has anyone included in this expression of interest, 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
Е7	Have you, or has anyone included in this expression of interest, been (or currently are) a member of an organisation or group which had 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
E8	Have you, or has anyone included in this expression of interest, 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.
	I separate piece of parally imposed, continue on a separate piece of paper in necessary.

Se	ction F Health
F1	Do you, or anyone included in your expression of interest require or are likely to require, dialysis treatment in the immediate future? Yes No
F2	Do you, or anyone included in your expression of interest have tuberculosis (TB)? Yes No
F3	Do you, or anyone included in your expression of interest have severe haemophilia? Yes No
F4	Do you, or anyone included in your expression of interest have a physical, intellectual, cognitive and/or sensory incapacity that requires full-time care (including care in the community)? Yes No
F5	Has your health status, or the health status of anyone included in your expression of interest, changed or deteriorated since you last applied for a visa?
	Yes No If you answered Yes to any of questions h to fs, you must provide an explanation of your, or your family member's, medical condition(s). Any injuries sustained as a result of the attack will not prevent you from being invited to apply.

Se	ection G Principal applicant's connection to the attacks
G1	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 section H: Declaration by principal applicant
	No Go to G2
0	INZ will check with the New Zealand Police to confirm if you were present at the mosques or injured as a result of the attack
G2	Are you an immediate family member of a person directly affected by the terrorist attack on 15 March 2019 (this includes those present at the Masjid al-Noor or Linwood Masjid and those injured or who died as a result of the attack)?
	☐ Yes Go to G3
	No You are not eligible for this visa
0	INZ will check with the New Zealand Police to confirm that an immediate family member was present at the mosques or was injured as a result of the attack
G3	Which of your immediate family members was present, injured or died in the attack?
	Name as shown in passport
	Family/last name
	Given/first name(s)
G4	What is your relationship to this person?
	They are my: Partner Son or daughter Father or mother Grandson or granddaughter Son or daughter's partner Partner's father or mother
	For questions 65 to 660, please provide as much information as you can.
G5	All other names this person is known by or has ever been known by
G6	Gender Male Female Date of birth DIDIMINITY Y
G8	Town/city of birth
	Country of birth
G9	Countries of citizenship
G 10	Details of persons passport
	Passport 1
	Number Country
	Name as shown in passport
	Family/last name Given/first name(s)
	Expiry date DID HIM IN HIV I Y I Y I Y I Y I Y I Y I Y I Y I Y I

Section H Declaration by principal applicant

The principal applicant must sign this declaration on behalf of everyone included in this expression of interest.

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, I may not be invited to apply, any resident visa application may be declined and I may lose any right of appeal. Any resident visa may later be revoked. I may also be committing an offence and I may be prosecuted.

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

I will inform Immigration New Zealand of any relevant fact or change of circumstances that may: (i) affect the decision on my expression of interest and any application for a visa, or (ii) affect the decision to grant a visa that relies on the visa for which I am expressing interest and 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 expression of interest.

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 expression of interest.

I authorise Immigration New Zealand 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 Immigration New Zealand about me.

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.

I accept that any advice given to me by Immigration New Zealand before submitting this expression of interest form was intended to assist me and acting on that does not mean that any later application for residence will be granted.

Signature of principal applicant Date Date				
Se	ction l Im	migration advise	r's details	
with	in an organisa	tion to act on their b		f the applicant has authorised all advisers ed at 📴 must complete this section. ot have to be completed.
lı	Tick the one op	ption that applies to y	you.	
	☐ I am a licen	sed immigration advi	ser under the New Zealand Immigr	ation Advisers Licensing Act 2007. <i>Go to</i> 12
	☐ I am exemp	ot from licensing unde	er the New Zealand Immigration Ad	visers Licensing Act 2007. <i>Go to</i> B
	,	,		nsing Act 2007, Immigration New Zealand will e without holding a licence, unless you are exempt.
12	Licensed advis	sers. Please provide y	our licence details.	
	Licence type			
	full	provisional	☐ limited. List conditions specified	l in the register.
	Licence number	er 2 0 1 1 1 1 1	Go to Section J: Declaration by person	assisting the applicant.

3	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.
	\square I am employed by, or I am working as a volunteer for, a New Zealand citizens advice bureau.
	Go to Section J: Declaration by person assisting the applicant.

Section | 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 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 Expression of Interest. 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 name and address given at \square or \square as below. Family/last name Given/first name(s) Organisation name (if applicable) and address New Zealand Business Number (if applicable) For help search: www.nzbn.govt.nz Telephone (evening) Telephone (daytime) 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. Please specify I have **provided immigration advice** (as defined in the Immigration Advisers Licensing Act 2007) and my details in Section I: Immigration adviser's details are correct.

Date DID HIM MILY LY LY LY

Signature of person assisting



About the information you provide

Deciding whether you are eligible to be invited to apply for residence

Immigration New Zealand collects the information about you on this form to determine your eligibility to be invited to apply for residence in New Zealand, and if invited to apply to make a decision on your application. 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 Expression of Interest 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 cannot accept your expression of interest.

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).

Information you provide to Immigration New Zealand may also be used or disclosed as otherwise required or permitted under New Zealand law.

You may ask to see the information we hold about you and request we correct it if you think that is necessary.

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 expression of interest.

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.

New Zealand Government