March 2022 INZ 1371



# 2022 Special Ukraine Visa Expression of Interest

#### Who should use this form?

Please use this form if you are a sponsor who is expressing interest on behalf of a family member(s) under the 2022 Special Ukraine Visa Category.

For your expression of interest to be successful:

- the expression of interest must be submitted by the sponsor on behalf of the family member(s)
- the sponsor must be an acceptable New Zealand sponsor
- the nominated family member must:
  - be an eligible relative of the sponsor
  - have been ordinarily resident in Ukraine as at January 2022, and
  - be of good health and character

Applications for a visa under the 2022 Special Ukraine Visa Category can only be made after a successful expression of interest.

## Who is an acceptable New Zealand sponsor?

To be a sponsor under the 2022 Special Ukraine Visa Category, you must:

- be ordinarily resident in New Zealand, and
- be a New Zealand citizen, or the holder of a current residence class visa, and
- have been born in Ukraine, or hold/did hold Ukrainian citizenship or be a permanent resident of Ukraine, and
- be an 'acceptable sponsor' for a temporary visa.

You may submit an expression of interest on behalf of your family member and their partner and/or dependent children.

When you agree to be a sponsor, you undertake and agree to responsibilities including (but not limited to):

- make sure the sponsored person has financial support for the duration of their stay (maintenance costs like food, clothing and health care), and
- make sure the person has suitable accommodation for the duration of their stay

When you agree to be a sponsor, you are responsible for the sponsored person(s) from their arrival in New Zealand until they get a new visa with a different sponsor or no sponsor, or they leave New Zealand. You can not withdraw your sponsorship. If you sponsor a multiple entry visa, you are responsible every time they are in New Zealand with that sponsored visa.

#### **Definitions**

The **nominated family member** is the person who is declared to be the nominated family member on the Expression of Interest form and when the application is assessed, they will be assessed against the criteria.

**Dependent children** are children who are single and:

- aged 17 years or younger, or
- aged 18 to 20 with no children of their own, or
- aged 21 to 24, with no children of their own, and totally or substantially reliant on the nominated family member or their partner for financial support, whether or not they are living with them.

#### How do I submit the expression of interest?

Please complete this form and send it to: SpecialUkraineEOI@MBIE.govt.nz

## **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, INZ will return your registration.

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.

March 2022 INZ 1371



# 2022 Special Ukraine Visa Expression of Interest

Name as shown in passport Family/last name  Given/first name(s)  Gender   Male   Female   Gender diverse   3   Date of birth   DID   MINING   MININ				
Family/last name   Given/first name(s)	ection A Sponsor's details			
Family/last name   Given/first name(s)	Name as shown in passport			
Country/countries of citizenship  Passport details  Number  Country  Expiry date  Expiry date  Country  Expiry date  Expiry date  Country  Expiry date  Exp		(	Given/first name(s)	
Country/countries of citizenship  Passport details  Number  Country  Expiry date  Expiry date  Country  Expiry date  Expiry date  Country  Expiry date  Exp				
Country/countries of citizenship  Passport details  Number   Country   Expiry date   E	Gender Male Female	Gender diverse A3 Date	of birth DIDJIMIMIL	Y
Passport details  Number  Country  Expiry date  DIDIMINITY  Ction B Sponsor's contact details  Your home address, telephone number and email address  Address  Telephone  Email  Name and address for communication about this Expression of Interest  Same as  go to Section C  as below  Name of contact person  Organisation name (if applicable) and address  New Zealand Business Number (if applicable)  Telephone (daytime)  Telephone (evening)	Country of birth			
Number Country Expiry date  Sponsor's contact details  Your home address, telephone number and email address Address  Telephone Email Name and address for communication about this Expression of Interest Same as ® go to Section C as below Name of contact person  Organisation name (if applicable) and address  New Zealand Business Number (if applicable) Telephone (daytime) Telephone (evening)	Country/countries of citizenship			
Country  Sponsor's contact details  Your home address, telephone number and email address  Address  Telephone  Email  Name and address for communication about this Expression of Interest  Same as   go to Section C  as below  Name of contact person  Organisation name (if applicable) and address  New Zealand Business Number (if applicable)  Telephone (daytime)  Telephone (evening)	Passport details			
Your home address, telephone number and email address  Address  Telephone Email  Name and address for communication about this Expression of Interest  Same as B go to Section C  as below  Name of contact person  Organisation name (if applicable) and address  New Zealand Business Number (if applicable)  Telephone (daytime)  Telephone (evening)	Number			
Your home address, telephone number and email address Address  Telephone Email  Name and address for communication about this Expression of Interest  Same as B go to Section C  as below  Name of contact person  Organisation name (if applicable) and address  New Zealand Business Number (if applicable) For help search: www.nzbn.govt.nz  Telephone (daytime) Telephone (evening)	Country			Expiry date
Your home address, telephone number and email address  Address  Telephone				
Telephone Email  Name and address for communication about this Expression of Interest  Same as  of contact person  Organisation name (if applicable) and address  New Zealand Business Number (if applicable)  Telephone (daytime)  Telephone (evening)	ction B Sponsor's contac	t details		
Telephone Email  Name and address for communication about this Expression of Interest  Same as B go to Section C as below  Name of contact person  Organisation name (if applicable) and address  New Zealand Business Number (if applicable)  Telephone (daytime)  Telephone (evening)	Your home address, telephone n	umher and email address		
Telephone Email  Name and address for communication about this Expression of Interest  Same as B go to Section C as below  Name of contact person  Organisation name (if applicable) and address  New Zealand Business Number (if applicable)  Telephone (daytime)  Telephone (evening)	Address			
Name and address for communication about this Expression of Interest  Same as B go to Section C  as below  Name of contact person  Organisation name (if applicable) and address  New Zealand Business Number (if applicable)  Telephone (daytime)  Telephone (evening)	Address			
Name and address for communication about this Expression of Interest  Same as B go to Section C  as below  Name of contact person  Organisation name (if applicable) and address  New Zealand Business Number (if applicable)  Telephone (daytime)  Telephone (evening)				
Same as B go to Section C as below Name of contact person  Organisation name (if applicable) and address  New Zealand Business Number (if applicable)  Telephone (daytime)  Telephone (evening)	Telephone	Email		
as below Name of contact person  Organisation name (if applicable) and address  New Zealand Business Number (if applicable)  Telephone (daytime)  Telephone (evening)	Name and address for communic	cation about this Expression	of Interest	
as below Name of contact person  Organisation name (if applicable) and address  New Zealand Business Number (if applicable)  Telephone (daytime)  Telephone (evening)	Same as B go to Section C			
Organisation name (if applicable) and address  New Zealand Business Number (if applicable) For help search: www.nzbn.govt.nz  Telephone (daytime) Telephone (evening)	as below			
New Zealand Business Number (if applicable)  Telephone (daytime)  Telephone (evening)	Name of contact person			
New Zealand Business Number (if applicable)  Telephone (daytime)  Telephone (evening)	I			
New Zealand Business Number (if applicable)  Telephone (daytime)  Telephone (evening)	Organisation name (if applicable	 ) and address		
Telephone (daytime) Telephone (evening)		, aa aaa. 655		
Telephone (daytime) Telephone (evening)				
	New Zealand Business Number (	if applicable)		or help search: <b>www.nzbn.govt.nz</b>
	Telephone (daytime)	Tel	ephone (evening)	
			L_	

Do you authorise the person stated at 182 to act on behalf of you and the nominated family member?
☐ Yes ☐ No
Do you authorise all other licensed immigration advisers or persons exempt from licensing who work for the organisation named at 182 to act on behalf of you and the nominated family member (if applicable)?
Yes Note: the person identified at B2 will receive all communication from Immigration New Zealand.  No Only the person indicated at B2 may act on my/our behalf.
Have you received immigration advice on this matter?
You can find a definition of immigration advice at www.immigration.govt.nz/advice.
Yes Make sure that your immigration adviser completes Section F: Immigration adviser's details.  No
ection C Acceptable New Zealand sponsor
To be an eligible sponsor, you must be a New Zealand citizen or residence class visa holder. Tick the option that applies to you.
☐ I am a New Zealand citizen
I am a New Zealand residence class visa holder (includes Australian citizens and residents who are in New Zealand)
Which of the following applies to you:
☐ I was born in Ukraine ☐ I am/was a Ukrainian citizen ☐ I am a permanent resident of Ukraine
Are you ordinarily resident in New Zealand?
ection D Sponsor's declaration
sponsor must undertake to ensure certain responsibilities for the nominated family member(s) (and their their and dependent children, as applicable) are met while in New Zealand.
Will you be able to complete a formal undertaking for the nominated family member(s) (and any partner and dependent children), agreeing to be responsible for their maintenance, accommodation and other relevant costs?  Yes No
I confirm that the persons included in the Expression of Interest have authorised me to notify their expression of interest in applying for a visa on their behalf. I confirm that to the best of my knowledge, all information provided about the nominated family member(s) and their family members is true and correct.  Yes No

ction E Details o	of the nominate	d family memb	er					
Name of the person y Family/last name	you wish to nominate under the 2022 Special Ukraine Visa Category  Given/first name(s)							
Was the person listed	d at 🗈 ordinarily resident in Ukraine as at January 2022? 🗌 Yes 🔲 No							
Their gender $\Box$ Mal	le Female Gender Diverse E4 Their date of birth							
Their country of citize	enship							
Their country of birth	1							
Their partnership sta	tus Married/in		ever married/neve ngaged	r in civil union	Partner/De fa			
What is your relation	ship to this person	?						
Their passport detail Number	S							
Country				Expiry date	DIDI[M]M][Y]Y]Y			
		15 21						
Telephone		Email						
List any partner and								
Please provide as much info	ormation as possible. If the	ne information is not av	ailable, enter N/A. Child	dron				
Family name	raitilei		Cime	uieii				
Given names								
Gender								
Date of birth (DD/MM/YY)	/ /	/ /	/ /	/ /	/ /			
Partnership status (e.g. single, married, partner/ de facto, etc.)								
Country of citizenship								
Country of residence								
Passport number								
Passport country of issue								

Please go to section H to add additional family members.

Section F	Immigration	adviser's	detaile
<b>S</b> ection F	IIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIII	auvisei s	uetanis

If the sponsor and/or family member the sponsor is expressing interest on behalf of does not have an immigration

adv	iser, this section does not have to be completed.
is ex	s section must be completed by the applicant's immigration adviser. If the sponsor and/or family member the sponsor expressing interest on behalf of has authorised all advisers within an organisation to act on their behalf at $[B4]$ , only person named at $[B2]$ must complete this section.
F1	If you are a licensed adviser, please provide your licence details.
	Licence type  full provisional limited List conditions specified in the register
	Licence number 2 0 Go to Section G: Declaration by person assisting the applicant
F2	If you are exempt from licensing, tick <b>one</b> box below to show why you are exempt from licensing then go to Section G: Declaration by person assisting the applicant.
	I provided immigration advice in an informal or family context only, and I did not provide the advice systematically or for a fee.
	$\square$ I have provided immigration advice in the course of my work (employed or volunteer) and that work exempts me from the requirement to be licensed. Indicate the reason for your exemption below.
	Lawyer with current New Zealand practicing certificate Community Law Centre Citizens Advice Bureau
	☐ New Zealand Member of Parliament or staff ☐ New Zealand public servant ☐ Foreign Diplomatic/Consular

**(1)** See www.immigration.govt.nz/adviserlicensing for more information about who is exempt from licensing.

# Section G Declaration by person assisting the sponsor If the sponsor and/or their family member does not have an immigration adviser, and no one helped the sponsor and/or their family member to fill in this form, this section does not have to be completed.

This section must be completed and signed by the sponsor and/or their family member's immigration adviser, or by any person who has assisted the sponsor and/or their family member by providing immigration advice, explaining, translating, or recording information on the form for the sponsor and/or their family member. If you are not exempt under the Immigration Advisers Licensing Act 2007, it is an offence for you to provide immigration advice without holding a license, and Immigration New Zealand will refuse to accept this expression of interest. More information about immigration adviser licensing can be obtained from the Immigration Advisers Authority website www.iaa.govt.nz, via email info@iaa.govt.nz or by telephone on 0508 422 422. Name and address of person assisting sponsor and/or their family member.  $\square$  Same as name and address given at B<sub>3</sub>, 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: www.nzbn.govt.nz Telephone Email I understand that after the form has been signed 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 sponsor and/or their family member asked me to help them complete this form and any additional

Se	ction H Details	of the nominate	ed family memb	per						
H1	Name of the person Family/last name	you wish to nomin		: Special Ukraine Visiven/first name(s)	sa Category					
H2	Was the person listed	s the person listed at 🖽 ordinarily resident in Ukraine as at January 2022? 🗌 Yes 🔲 No								
Н3						, , , , , <u>,                          </u>				
H5	Their gender									
15										
Н6	Their country of birt	h								
U-7	The six or a set of a set of a set		::!	1						
H7	Their partnership sta	atus		lever married/neve ngaged	r in civil union [	<ul><li>Partner/De facto</li><li>Divorced</li></ul>				
Н8	What is your relation	nship to this persor	n?							
Н9	Their passport detai Number	ls								
	Country				Expiry date D					
110	Their address and co	ontact details								
	Telephone		Email							
<del>-</del> 111	List any partner and Please provide as much in									
		Partner		Child	Iren					
	Family name									
	Given names									
	Gender									
	Date of birth (DD/MM/YY)	/ /	/ /	/ /	/ /	/ /				
	Partnership status (e.g. single, married, partner/ de facto, etc.)									
	Country of citizenship									
	Country of residence									
	Passport number									
	Passport country of issue									

ction l Details o	of the neminate	od family momb	or				
Ction Details 0	or the nominate	d ranning menn	Jei				
Name of the person y Family/last name	you wish to nominate under the 2022 Special Ukraine Visa Category Given/first name(s)						
Was the person listed	at 🖪 ordinarily res	ident in Ukraine as	at January 2022?	]Yes □ No			
Their gender	e 🗌 Female 🔲 G	Gender Diverse	Their date of bi	rth DIDIMIMILY	YYYY		
Their country of citize	enship						
Their country of birth							
Their partnership stat	tus Married/in		lever married/neve	er in civil union	☐ Partner/De fac		
What is your relations	ship to this person	?					
Their passport details Number	5						
Country				Expiry date			
Telephone		Email					
List any partner and c	-		-				
	Partner		Chil	dren			
Family name							
Given names							
Gender							
Date of birth (DD/MM/YY)	/ /	/ /	/ /	/ /	/ /		
Partnership status (e.g. single, married, partner/ de facto, etc.)							
Country of citizenship							
Country of residence							
Passport number							
Passport country of issue							

Was the person listed at indicating resident in Ukraine as at January 2022? Yes No Their gender Male   Female   Gender Diverse   Their date of birth   The	ction L Dotails of	f the neminate	nd family member	or .			
Family/last name  Given/first name(s)  Was the person listed at pordinarily resident in Ukraine as at January 2022? Yes No  Their gender Male Female Gender Diverse Their date of birth Partiel Person (southern of citizenship)  Their country of citizenship  Their country of birth  Their partnership status Married/in civil union Separated Engaged Midowed Divorced  What is your relationship to this person?  Their passport details  Number  Country Expiry date Engaged  Their address and contact details  Telephone Email Expiry and the person you want to sponsor.  Please provide as much information as possible. If the information is not available, enter N/A.  Partner Given names  Given names  Gender Date of birth (DOMMYY)  Partner/for dizzenship  Country of esidence  Passport number							
Their gender   Male   Female   Gender Diverse   4 Their date of birth	Name of the person your Family/last name						
Their gender Male   Female   Gender Diverse   4   Their date of birth   DIVERTION OF CITIZENSHIP    Their country of citizenship    Their country of birth   Country of birth   Country of birth   Country of birth    Their partnership status   Married/in civil union   Never married/never in civil union   Partner/De fa    Separated   Engaged   Widowed   Divorced    What is your relationship to this person?    Their passport details    Number   Expiry date   DIVERTION OF COUNTRY   Expiry date   DIVERTION OF COUNTRY    Their address and contact details    Email   List any partner and dependent children of the person you want to sponsor.  Please provide as much information as possible. If the information is not available, enter N/A.  Partner   Children    Given names   Given names    Gender   Gender   Children							
Their country of citizenship  Their country of birth  Their partnership status   Married/in civil union   Never married/never in civil union   Partner/De fa   Engaged   Widowed   Divorced   What is your relationship to this person?   Their passport details Number  Country   Expiry date   Expiry	Was the person listed a	nt 🖪 ordinarily res	sident in Ukraine as a	t January 2022?	Yes 🗌 No		
Their country of birth  Their partnership status   Married/in civil union   Never married/never in civil union   Partner/De file	Their gender 🗌 Male	☐ Female ☐ 0	Gender Diverse 4	Their date of bir	th LDDDMMMILYL	Y I Y I Y	
Their country of birth  Their partnership status   Married/in civil union   Never married/never in civil union   Partner/De f	Their country of citize	nship					
Their partnership status   Married/in civil union   Rever married/never in civil union   Partner/De f   Engaged   Widowed   Divorced   Divorced   Partner/De f   Partner/De							
Separated Engaged Widowed Divorced  What is your relationship to this person?  Their passport details  Number  Country Expiry date Expiry date Expiry date  Expiry date Expiry date  Expiry date Expiry date  Expiry date Expiry date  Expiry date Expiry date  Expiry date Expiry date  Expiry date Expiry date  Expiry date  Expiry date Expiry date  Expiry date Expiry date  Expiry date Expiry date  Expiry date Expiry date  Expiry date Expiry date  Expiry date Expiry date  Expi	Their country of birth						
Separated Engaged Widowed Divorced  What is your relationship to this person?  Their passport details  Number  Country Expiry date Expiry date Expiry date  Expiry date Expiry date  Expiry date Expiry date  Expiry date Expiry date  Expiry date Expiry date  Expiry date Expiry date  Expiry date Expiry date  Expiry date  Expiry date Expiry date  Expiry date Expiry date  Expiry date Expiry date  E							
What is your relationship to this person?  Their passport details  Number  Country Expiry date Expiry	Their partnership stat						
Their passport details  Number  Country Expiry date DID MAN MINION DETAILS AND		•		gaged	Widowed	Divorced	
Number  Country Expiry date Ex	What is your relations	hip to this person	15				
Country Expiry date Expiry dat	Their passport details						
Telephone Email List any partner and dependent children of the person you want to sponsor.  Please provide as much information as possible. If the information is not available, enter N/A.  Partner Children  Family name  Given names  Gender  Date of birth (DD/MM/YY)  Partnership status (e.g., single, married, partner/ de facto, etc.)  Country of citizenship  Country of residence  Passport number	Number						
Telephone Email List any partner and dependent children of the person you want to sponsor.  Please provide as much information as possible. If the information is not available, enter N/A.  Partner Children  Family name  Given names  Gender  Date of birth (DD/MM/YY)  Partnership status (e.g., single, married, partner/ de facto, etc.)  Country of citizenship  Country of residence  Passport number	Country				Eveley date		
Telephone Email Email List any partner and dependent children of the person you want to sponsor.  Please provide as much information as possible. If the information is not available, enter N/A.  Partner Children  Family name  Given names  Gender  Date of birth (DD/MM/YY)  Partnership status (e.g., single, married, partner/ de facto, etc.)  Country of citizenship  Country of residence  Passport number	Country					DIMIMITY	
List any partner and dependent children of the person you want to sponsor.  Please provide as much information as possible. If the information is not available, enter N/A.  Partner Children  Family name Given names  Gender Date of birth (DD/MM/YY) Partnership status (e.g. single, married, partner/ de facto, etc.)  Country of citizenship  Country of residence  Passport number	l address and con						
Please provide as much information as possible. If the information is not available, enter N/A.  Partner Children  Family name Given names  Gender Date of birth (DD/MM/YY) Partnership status (e.g. single, married, partner/ de facto, etc.)  Country of citizenship  Country of residence  Passport number	Telephone		Email				
Please provide as much information as possible. If the information is not available, enter N/A.  Partner Children  Family name Given names  Gender Date of birth (DD/MM/YY) Partnership status (e.g. single, married, partner/ de facto, etc.)  Country of citizenship  Country of residence  Passport number	List any partner and d	enendent childrer	of the person your	want to sponsor			
Family name  Given names  Gender  Date of birth (DD/MM/YY)  Partnership status (e.g. single, married, partner/ de facto, etc.)  Country of citizenship  Country of residence  Passport number							
Given names  Gender  Date of birth (DD/MM/YY)  Partnership status (e.g. single, married, partner/ de facto, etc.)  Country of citizenship  Country of residence  Passport number		Partner		Child	Iren		
Gender  Date of birth (DD/MM/YY)  Partnership status (e.g. single, married, partner/ de facto, etc.)  Country of citizenship  Country of residence  Passport number	Family name						
Date of birth (DD/MM/YY)  Partnership status (e.g. single, married, partner/ de facto, etc.)  Country of citizenship  Country of residence  Passport number	Given names						
(DD/MM/YY)  Partnership status (e.g. single, married, partner/ de facto, etc.)  Country of citizenship  Country of residence  Passport number	Gender						
(e.g. single, married, partner/ de facto, etc.)  Country of citizenship  Country of residence  Passport number		/ /	/ /	/ /	/ /	/ /	
Country of residence  Passport number	(e.g. single, married,						
Passport number	Country of citizenship						
Passport number	Country of residence						
Passport country  of issue	Passport country						

ction K Details of	f the <u>nominate</u>	d family memb	er					
	you wish to nominate under the 2022 Special Ukraine Visa Category  Given/first name(s)							
Was the person listed a	at 🕅 ordinarily resident in Ukraine as at January 2022? 🗌 Yes 🔲 No							
Their gender	☐ Female ☐ G	Gender Diverse K4	Their date of bir	th   DID   I M I M   I Y I	YIYIY			
Their country of citize								
Their country of birth								
Their partnership stati	us Married/in		ever married/neve	r in civil union	Partner/De fa			
What is your relations	hip to this person	?						
Their passport details Number								
Country				Expiry date				
Telephone		Email						
List any partner and de	-	of the person you	-					
	Partner		Child	Iren				
Family name								
Given names								
Gender Date of birth								
(DD/MM/YY)	/ /	/ /	/ /	/ /	/ /			
Partnership status (e.g. single, married, partner/ de facto, etc.)								
Country of citizenship								
Country of residence								
Passport number								
Passport country								

ection L Details of	f the nominate	ed family meml	per		
Name of the person yo Family/last name	ou wish to nomina		2 Special Ukraine Visiven/first name(s)	sa Category	
Was the person listed a	at 🗓 ordinarily res	sident in Ukraine as	at January 2022?	Yes No	
Their gender	Female 🔲	Gender Diverse	4 Their date of birt	:h   DID HMIMHYIY	1 7 1 7
Their country of citize					
Their country of birth					
Their partnership state	us Married/ir		lever married/never	in civil union	Partner/De f
What is your relations	hip to this persor	1?			
Their passport details Number					
Country				Expiry date	DJ[M]MJ[Y]YJ
Their address and con-	tact details				
Telephone		Email			
List any partner and de					
	Partner		Child	ren	
Family name					
Given names					
Gender					
Date of birth (DD/MM/YY)	/ /	/ /	/ /	/ /	/ /
Partnership status (e.g. single, married, partner/ de facto, etc.)					
Country of citizenship					
Country of residence					
Passport number					
Passport country					

## About the information you provide

Immigration New Zealand collects the information about you and the nominated family member (and their partner and dependent children, as applicable) on this form to decide whether you are eligible to be a sponsor and whether the nominated family member (and their partner and dependent children) are eligible to be invited to apply under the 2022 Special Ukraine Visa.

Collecting the information is authorised by the Immigration Act 2009 and the Immigration Regulations made under that Act.

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 registration should be sent.

#### 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).

