

September 2023

INZ 1380



Skilled Residence Visa Application

Supplementary form for additional secondary applicants

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. 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.

Who uses this form

Use this form if you wish or are required to add eligible family members as secondary applicants to your Skilled Residence Visa application that has already been submitted to Immigration New Zealand through the online system.

How to submit this form

After completing the form, please upload to your online account or contact your Immigration Officer. Do not send it by post.

Notes:

- **If you have a partner or child who holds (or has applied for) a temporary entry visa on the basis of their relationship to you, they must be included in your Skilled Residence Visa application.**
- There is no application fee associated with adding eligible family members to your existing Skilled Residence Visa application.

Section A Principal applicant's personal details

All principal applicants must complete this section.

A1 Name as shown in passport

Family/last name

Given/first name(s)

A2 Passport number

Section B Partner's personal details

Complete this section if you are including your partner in your Skilled Residence Visa application. You may be either legally married, or in a civil union, or in a de facto relationship (whether opposite or same sex) to your partner. Your partner must be included in your Skilled Residence Visa application if they hold or have applied for a temporary entry class visa based on their relationship with you.

i For more information on the questions in this section see 'Completing Section D: Partner's personal details' in the *Residence Guide*.

Please provide a scanned copy of your partner's passport or certificate of identity as well as their full birth certificate. If the face image in the passport or certificate of identity is more than six months old, please also provide a clear face image of your partner which is less than 6 months old.

B1 Partner's name as shown in passport

Family/last name

Given/first name(s)

B2 Partner's preferred title

Mr Mrs Ms Miss Dr Other (specify)

B3 Other names your partner is known by or has ever been known by

B4 Partner's gender Male Female

B5 Date of birth

B6 Partner's town/city of birth

Partner's country of birth

B7 Other citizenships your partner holds

B8 Details of passport held by your partner

Passport 1

Number Country

Expiry date Issue date Place of issue

Family/last name as shown in passport

Given/first name(s) as shown in passport

Note: You must provide evidence of your relationship as described in 'Completing Section D: Partner's personal details in the Residence Guide (INZ 1002). However, if your partner has already been granted a relationship-based visa on the basis of their relationship with you, you do not need provide this evidence, unless later requested to do so by an immigration officer.

Section C Dependent children

Supply the following details for each dependent child you are including in your Skilled Residence Visa application. Please ensure that you complete **D49** (at the end of this section).

i For more information on the questions in this section see 'Completing Section F: Dependent children' in the *Residence Guide*.

Note: you must include your dependent child (aged 24 years or younger) if they hold or have applied for a temporary entry class visa based on their relationship with you.

Please provide a scanned copy of the passport or certificate of identity for each of your children below as well as their full birth certificate. If the face image in the passport or certificate of identity is more than six months old, please also provide a clear face image of them which is less than 6 months old.

Dependent child one

C1 Child's name as shown in passport

Family/last name

Given/first name(s)

C2 Child's gender Male Female

C3 Child's date of birth

C4 Child's country of birth

C5 Child's passport details

Number

Country Expiry date

C6 Other citizenships child holds

C7 Partnership status *For a definition of partnership, see Completing Section D: Partner's personal details in the Residence Guide (INZ 1002). A person is single if they are not living with a partner in a genuine and stable partnership.*

Single Separated Partner/De facto Divorced
 Married/in civil union Engaged Widowed

C8 Does this child have children of his/her own? Yes No

Dependent child two

C9 Child's name as shown in passport

Family/last name

Given/first name(s)

C10 Child's gender Male Female

C11 Child's date of birth

C12 Child's country of birth

C13 Child's passport details

Number

Country

Expiry date

C14 Other citizenships child holds

C15 Partnership status

Single

Separated

Partner/De facto

Divorced

Married/in civil union

Engaged

Widowed

C16 Does this child have children of his/her own?

Yes No

Dependent child three

C17 Child's name as shown in passport

Family/last name

Given/first name(s)

C18 Child's gender Male Female

C19 Child's date of birth

C20 Child's country of birth

C21 Child's passport details

Number

Country

Expiry date

C22 Other citizenships child holds

C23 Partnership status

Single

Separated

Partner/De facto

Divorced

Married/in civil union

Engaged

Widowed

C24 Does this child have children of his/her own? Yes No

Dependent child four

C25 Child's name as shown in passport

Family/last name

Given/first name(s)

C26 Child's gender Male Female

C27 Child's date of birth

C28 Child's country of birth

C29 Child's passport details

Number

Country Expiry date

C30 Other citizenships child holds

C31 Partnership status

Single Separated Partner/De facto Divorced
 Married/in civil union Engaged Widowed

C32 Does this child have children of his/her own? Yes No

Dependent child five

C33 Child's name as shown in passport

Family/last name

Given/first name(s)

C34 Child's gender Male Female

C35 Child's date of birth

C36 Child's country of birth

C37 Child's passport details

Number

Country Expiry date

C38 Other citizenships child holds

C39 Partnership status

Single Separated Partner/De facto Divorced
 Married/in civil union Engaged Widowed

C40 Does this child have children of his/her own? Yes No

Dependent child six

C41 Child's name as shown in passport

Family/last name

Given/first name(s)

C42 Child's gender Male Female

C43 Child's date of birth

C44 Child's country of birth

C45 Child's passport details

Number

Country

Expiry date

C46 Other citizenships child holds

C47 Partnership status

Single

Separated

Partner/De facto

Divorced

Married/in civil union

Engaged

Widowed

C48 Does this child have children of his/her own? Yes No

Give details of any additional dependants on the form *Additional Dependants for Residence in New Zealand (INZ 1001)*, and attach it to this page.

C49 Are you separated or divorced from the parent of any of the above children or is the parent of any of the above children **not** included in this application?

Yes *You must provide evidence. See 'Completing Section F: Dependent children' in the Residence Guide.*

No

Section D Character requirements

The following questions apply to every person included in this form 17 years of age and over. Every person aged 17 years and over applying for residence in New Zealand must also provide:

- a police certificate from their country of citizenship; and
- police certificates from any country they have lived in for 12 months or more (whether in one visit or intermittently) in the last 10 years.

For information on how to obtain a police certificate visit www.immigration.govt.nz/policecertificate.

i For more information about the questions in this section, see 'Completing Section G: Character requirements' in the *Residence Guide*.

D1 List the countries your family have lived in for 12 months or more in (whether on one visit or intermittently) the last 10 years, with the dates they began and ended living there. If you do not know the exact dates they began and ended living in a country, give approximate dates. Please include their home country.

Name of family member

Name of country

Date of arrival Date of departure

Name of family member

Name of country

Date of arrival Date of departure

Name of family member

Name of country

Date of arrival Date of departure

Name of family member

Name of country

Date of arrival Date of departure

D2 Has anyone included in this form, 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

D3 Is anyone included in this form, currently:

• under investigation Yes No

• wanted for questioning Yes No

• facing charges Yes No

for any offence in any country?

D4 Does anyone included in this form, currently have an outstanding arrest warrant in any country?

Yes No

D5 Has anyone included in this form, ever been:

- excluded Yes No
- refused entry Yes No
- removed or deported Yes No

from any country, excluding New Zealand?

D6 Has anyone included in this form, ever been a member of, or adhered to, any terrorist organisation?

Yes No

D7 Has anyone included in this form, 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

D8 Has anyone included in this form, 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

D9 Has anyone included in this form, 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 in this section, provide full details below. This includes full details of any charges, convictions and the sentence or penalty imposed. Continue on a separate piece of paper if necessary.

Section E Health requirements

E1 Has anyone in this form submitted a medical certificate (*General Medical Certificate (INZ 1007)* and *Chest X-ray Certificate (INZ 1096)*), completed and dated by a medical practitioner within the last 36 months (at the time your Skilled Residence Visa application was lodged) with another Immigration New Zealand application?

Yes *Provide details in the table below*

No *A General Medical Certificate (INZ 1007) and Chest X-ray Certificate (INZ 1096) must be provided for every person included in this application. Go to **E2***

Full name	Type of application	Date application was lodged (DD/MM/YY)
1.		/ /
2.		/ /
3.		/ /
4.		/ /
5.		/ /
6.		/ /

If everyone included in this form has submitted a medical certificate and chest X-ray certificate in the last 36 months (at the time your Skilled Residence Visa application was lodged) they do not need to provide further certificates now, unless:

- the health status of any applicant has deteriorated since their previous medical certificate was issued, or
- any applicant has spent six consecutive months since their last *Chest X-ray Certificate (INZ 1096)* was issued, in a country, area or territory not listed as having a low incidence of TB (see the leaflet *Health Requirements (INZ 1121)* for further information).

Otherwise we will tell you if you need any further medical information. *Go to **E2***.

If not everyone included in the application has submitted medical certificates that were completed and dated by a medical practitioner within the last 36 months (as at the time your Skilled Residence Visa application was lodged), they will have to provide certificates now. *Go to **E2***.

E2 Tick the option(s) below which applies to you:

- I do not have to provide any medical certificates or chest X-ray certificates at this stage. *Go to **E4***
- I am providing a *General Medical Certificate(s)* for partner child(ren). *Go to next section*
- I am providing a *Chest X-ray Certificate(s) (INZ 1096)* for partner child(ren). *Go to next section*
- A physician is submitting a General medical and/or X-ray certificate for partner child(ren). *Go to **E3***

E3 Has the physician submitting their General medical and/or X-ray certificates supplied them with an eMedical Reference Code (NZER)?

Yes *Enter their eMedical Reference Code(s) here: _____ Go to next section*

No *Enter the name of the clinic submitting their health information: _____ Go to next section*

If the physician has returned the medical and/or X-ray certificate to you or them then you will need to submit these.

E4 Does anyone included in this form, have tuberculosis (TB)? Yes No

E5 Does anyone included in this form have any medical condition that requires, or may require, one of the following during your stay in New Zealand?

- Renal dialysis Yes No
- Hospital care Yes No
- Residential care* Yes No

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

E6 If you have answered Yes to any of the questions in **E4** or **E5**, provide further details.

[Empty text area for providing further details]

Section F English language requirements

Partners and dependent children aged 16 and over are required to meet English language requirements or prepurchase ESOL tuition.

Indicate how your partner or dependent child(ren) aged 16 or over will meet English language requirements or whether they will prepurchase ESOL tuition. Write "N/A" or "not applicable" if no one else aged 16 or over is included in this form.

i For more information, see 'English language test results for residence visas'.

Name of partner or dependent child(ren)	Meets minimum standard of English?	
	Yes - list evidence to be provided	No - intends to prepurchase ESOL tuition
		<input type="checkbox"/> Yes <input type="checkbox"/> No
		<input type="checkbox"/> Yes <input type="checkbox"/> No
		<input type="checkbox"/> Yes <input type="checkbox"/> No
		<input type="checkbox"/> Yes <input type="checkbox"/> No
		<input type="checkbox"/> Yes <input type="checkbox"/> No
		<input type="checkbox"/> Yes <input type="checkbox"/> No

Section G Declaration

Before you submit this form, you (the principal applicant) and any partner and dependent children aged 18 years and over who are being included in your application must agree to the declaration below. Read it carefully and make sure you understand it before you confirm that you have read, understood and agree to this declaration.

i For more information about the declaration, see Section 'Completing Section P: Declaration' in the *Residence Guide*.

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 way, my application may be declined, or I may become liable for deportation.

I understand the notes and questions in this form and I declare the information given about myself, my partner and any children is true and complete.

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 am aware that convictions for certain criminal offences committed up to 10 years after first being granted a residence class visa can result in deportation from New Zealand.

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 form.

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 understand that Immigration New Zealand may provide information about my entitlement to work to potential employers via the online VisaView system. VisaView is authorised by legislation.

I authorise INZ to make any enquiries it deems necessary in respect of 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 authorise INZ to provide information about my state of health and my immigration status to any health service agency. I authorise any health service agency to provide information about my state of health to INZ.

I accept that any advice given to me by INZ before lodging this form was intended to assist me, and acting on that does not mean that my application for residence will be approved.

I understand that in order to work in certain occupations in New Zealand, registration is required by law. I accept that the granting of a residence class visa does not guarantee that registration will be granted.

I agree that information about my personal resources and the contents of this form may be provided to Work and Income (a service unit of the Ministry of Social Development) if I apply for an emergency benefit. I understand that I will need to give a copy of this declaration to Work and Income if I apply for an emergency benefit.

I understand that I am not entitled to an emergency benefit, unemployment benefit on grounds of hardship or sickness benefit on grounds of hardship from Work and Income for the first 24 months of my residence in New Zealand unless I can show that I am in hardship. I also understand that if I apply for an emergency benefit, unemployment benefit on grounds of hardship or sickness benefit on grounds of hardship that I will need to show that I cannot support myself and my dependants before any application for emergency benefit, unemployment benefit on grounds of hardship or sickness benefit on grounds of hardship is considered. I understand that my application for an emergency benefit, unemployment benefit on grounds of hardship or sickness benefit on grounds of hardship may be declined if I have deprived myself of income or property, by gift or any other method.

I have read, understood and agree to this declaration

- Principal applicant
- Partner
- Parent or guardian if principal applicant is under 18 years of age

Accompanying dependent children over 18 years of age if applicable (enter names below)

- Child one
- Child two
- Child three
- Child four
- Child five
- Child six
- Child seven
- Child eight
- Child nine
- Child ten

Date

Section H Declaration by person assisting the applicant

This section must be completed 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

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 (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. Check the box that applies below to indicate how you have assisted the applicant:
- 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 am the immigration advisor authorised to act on the applicant's behalf in relation to the Skilled Residence Visa application.

Date

About the information you provide

Immigration New Zealand collects the information about you on this form to decide whether you are eligible for a resident 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.

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.

Other documents we may need or you may wish to send

We may ask for additional documents or information so that we can consider it with this application.

You may wish to send other documents or information so that we can consider it with this application. Send photocopies only (not original documents), as these documents will not be returned to you. If we need to see an original document, we will ask you to produce it later.

Form checklist

Office Use only	I have uploaded to my online account or emailed my Immigration Officer to submit the following document(s):	Check list
<input type="checkbox"/>	completed form including the required declaration(s)	<input type="checkbox"/>
<input type="checkbox"/>	copies of passports or certificates of identity for each applicant included	<input type="checkbox"/>
<input type="checkbox"/>	full birth certificate(s) of each applicant included	<input type="checkbox"/>
<input type="checkbox"/>	recent face image(s) of applicant(s) if required	<input type="checkbox"/>
<input type="checkbox"/>	required police certificate(s) of applicant(s) aged 17 years and over	<input type="checkbox"/>
<input type="checkbox"/>	listed evidence for the English language requirements if available	<input type="checkbox"/>
<input type="checkbox"/>	any other required evidence as outlined in this form	<input type="checkbox"/>

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).



Te Kāwanatanga o Aotearoa
New Zealand Government