## **Application for Student Accommodation**





## 1 Personal Details

Title	Mr, Mrs, Miss, Ms, Other		What year is this application for?
Surname			
Legal First Names			
Preferred First Names			Student ID Number (if known)
Previous Name (if different)			
	   Please provide a certified copy of your marriage certifi	cate if applicable	
Date of Birth	Day Month Year	er Male Female Diverse	If Yes, when?
Have you been a resident of Tai	Poutini Polytechnic Limited (TPPL) studen	t accommodation previously? Yes	No
2 Contact Details			
Home Address		Postal Address (if different from	Home address)
	Postcode:		Postcode:
Mobile Number			
Email address			
3 Enrolment Details			
Programme enrolled in:			
Dates			
4 Special Requirements	s, Health and Wellbeing		
with the pastoral and academic state that you provide us with information	ne Education (Pastoral Care of Tertiary & Inte upport to help you succeed. Therefore knowing ion that may affect your health and wellbeing or support plans that might be necessary fo	ng and understanding your support need so we can ensure the appropriate place	s is essential. To help us, it is important
Do you have a disability that requi	ires us to provide you with additional support	? Yes No	
Do you have physical, medical or r If yes, please provide detail below	mental health concerns you would like us to I	know about? Yes No	
In general how would you currentl	ly rate your overall health?		
Excellent Very Goo	od Good Fair	Poor	

Have you ever been convicted of any offence against the law (apart from minor traffic convictions)? Yes No  If YES, please specify details with the date of conviction:  Note: The non-declaration of an offence that you are required to disclose will be seen as a misrepresentation of a criminal record. This may result in your application for residency being declined. Please ensure that you detail convictions that are required to be disclosed.  7 Emergency Contact Details  Contact person in case of emergency  Name  Address  Postcode:  NB: A POST BOX IS NOT ACCEPTABLE  Relationship to you  8 General Information  PRIVACY: Tall Poylin Polytephone Number  NB: A POST BOX IS NOT ACCEPTABLE  Relationship to you  8 General Information  PRIVACY: Tall Poylin Polytephone Number (IPPL) collects and stores information from the form to comply with the requirements of the Ministry of Education, New Zo Collects and stores on the privacy of Education, New Zo Collects and stores on the privacy of Education of the seen and a New Zealand citizen or permanent resident) and Agencie support particular students through scholarinips and privace, payment of fees or other awards (if you are a recipient of one of these awards). The information is also to manage internal administrative processes, and for internal exporting.  In addition, when required by statute, the Institute releases information to Government agencies such as the New Zealand Police, Ministry of Justice, Ministry of Development, and the Accident Compensation Corporation (ACC).  Benefit of the Accident Compensation Commission of the sea awards (if you are a recipient of one of these awards). The information is also to manage internal ordinisticative processes, and for internal reporting.  In addition, when required by statute, the Institute releases information to Government agencies such as the New Zealand P	Please de	escribe in your own wor	rds what t	type of person you a	e.									
Please rate yourself on a 1 - 5 scale on the following: (1 is never and 5 is always)  Studious														
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Studious  Outgoing  Quiet  Considerate  Smoker  Prepared to do house chores  OK with  Considerate  Smoker  Prepared to do house chores  OK with  Considerate  Smoker  Prepared to do house chores  OK with  Considerate  No  No  No  No  No  No  No  No  No  N														
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Address    Home Telephone Number   [ ]	Contact p	person in case of emerg	gency											
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5														
Parent/Guardian Signature (if applicant under 18 at time of application Day Month Year	Parent/G	uardian Signature (if a	pplicant u	nder 18 at time of a	oplication						Day	Month		Year

Day

Month

Year