

Certificate in Automotive Engineering Student Application Questionnaire

Nai	me:						
Imp	portant Notes						
T^{I}	his form <u>MUST</u> be fully completed and <u>returned</u> with enrolment form.						
The	lease answer the following questions, to the best of your ability, <u>in your own handwriting.</u> here are no right answers for these questions. The purpose is to give us an insight into your evel of prior learning as it relates to this programme.						
1.	In what way have your experiences so far equipped you for this programme?						
2.	What interests you about this programme?						
3.	What special strengths will you bring to this programme?						
4.	What are your weaknesses?						

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					•		ing in a group environment.
	V	ery Con	fident			Not C	Confident At All
			1	2	3	4	5
How well d	o you coi	nmunica	ate and	relate	to peor	ole?	
Describe yo	our ability	to follo	w inst	ruction	ıs.		
						.g: reme	mbering instructions, reading o
writing? (W	e can pro	ovide yo	u with	assista	ince)		
Ye	es	No		(Pleas	se tick)		
			which			dential):	
			(which			lential):	
f yes, please	e provide	details (will be	e confid	lential):	
	e provide	details (will be	e confid	lential):	
f yes, please	e provide	details (will be	e confid	dential):	
f yes, please	e provide	details (ents or	will be	e confid		
f yes, please Do you turn No Are you we	e provide	details (ents or	will be made with the matter of time?	e confid		

Please state any part time and/or full time, including holiday employment, work-based training and voluntary work.

Employer's Name	Address	Type of Work	Dates	Full or Part
			From - To	Time

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OFFENCES:									
Have you been convicted of a criminal offence within the past ten years, or are you currently being charged with a criminal offence?									
	Yes No	(Please tick)							
If yes, please p	provide details (which wil	l be confidential):							
REFEREES: Please provide the names of two referees who may be contacted by us.									
Name:									
Address:									
Telephone:	Day (0)	Night	(0)						
Name:									
Address:									
	Day (0)	Nicht	(0.)						
Telephone:	Day (0)	Night	(0)						
Please include	e a copy of your drivers	licence with this form	l .						
DECLARAT	ON								
I certify that the details given on this form are correct and that, if accepted for this programme, I will observe such rules and conditions as may be required by Tai Poutini Polytechnic.									

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Date:

Signature: