



# APPLICATION PAGE

## PERSONAL INFORMATION

Name: \_\_\_\_\_  
(Family name) (Personal names)

Address: \_\_\_\_\_

Telephone: \_\_\_\_\_ Email: \_\_\_\_\_ Fax: \_\_\_\_\_

Nationality: \_\_\_\_\_ Date of Birth: \_\_\_\_\_  
[Day/Month/Year]

I am \_\_\_\_\_ years old      Male      Female  
     

## CONTACTS

Father's Name: \_\_\_\_\_ Occupation: \_\_\_\_\_

Mother's Name: \_\_\_\_\_ Occupation: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Fax: \_\_\_\_\_ Email: \_\_\_\_\_

Emergency Contact Phone: \_\_\_\_\_

Who is the emergency contact person? \_\_\_\_\_

Please email or fax to:      Garry Chronican, Director of International Students  
 Email: g.chronican@xtra.co.nz  
 Fax: +64 3 4531602  
 Phone: +64 21 2488961 or +64 3 4536035 Ext 814

