



ID#

Application for Enrolment: Diploma in Management – Print

Instructions:

- Print your answers clearly in pen
- Sign and date the form
- Attach required documents
- Complete all contact details

THE APPLICANT

National Student Number (NSN):

Do you have a NSN/NZQA Hook-on Number? Yes No
 If yes, write it here:

Trainee Name:

Verified documents required
 Print your full legal name

Title: _____

First Name: _____

Middle Name: _____

Last Name: _____

Date of Birth:
Day Month Year

Gender: Male Female

Former Name:
 (if applicable) _____

Preferred
 Name: _____

Trainee Contact Details:

Street
 Address: _____

Suburb: _____

Town/City: _____

Postcode: _____

Home Phone: () _____

Mobile: () _____

Email: _____

THE EMPLOYER

Employer Details:

Head Office Name:
 (if applicable) _____

Company/
 Branch Name: _____

Street Address: _____

Postal Address: _____

Suburb: _____

Town/City: _____

Postcode: _____

Contact Name: _____

Phone: () _____

Fax: () _____

Email: _____

PROGRAMME OPTIONS

The Introductory Module is compulsory – please tick this option.

Introductory Research Module (compulsory)

Please tick if you would like to continue upon completion of the compulsory option

Level 5 National Certificate in Management - Print

Level 5 National Diploma in Management - Print

PLEASE CHOOSE DIPLOMA PAPERS FROM PAGE 3

COURSE MATERIAL AND INVOICES

Deliver course material to:

Home Address Business Address

Send invoices to:

Home Address Business Address

STATISTICAL INFORMATION

This Training Agreement collects essential statistical information to meet the funding requirements of the Tertiary Education Commission and Ministry of Education reporting.

Ethnicity: What ethnic group(s) do you belong to?

- | | | | |
|---|--|--|--|
| <input type="checkbox"/> 100 European | <input type="checkbox"/> 331 Tongan | <input type="checkbox"/> 411 Filipino | <input type="checkbox"/> 442 Japanese |
| <input type="checkbox"/> 111 NZ European/Pakeha | <input type="checkbox"/> 341 Niuean | <input type="checkbox"/> 412 Cambodian | <input type="checkbox"/> 443 Korean |
| <input type="checkbox"/> 121 Other European | <input type="checkbox"/> 351 Tokelauan | <input type="checkbox"/> 413 Vietnamese | <input type="checkbox"/> 444 Other Asian |
| <input type="checkbox"/> 211 Maori | <input type="checkbox"/> 361 Fijian | <input type="checkbox"/> 414 Other Southeast Asian | <input type="checkbox"/> 511 Middle Eastern |
| <input type="checkbox"/> 300 Pacific Peoples | <input type="checkbox"/> 371 Other Pacific Peoples | <input type="checkbox"/> 421 Chinese | <input type="checkbox"/> 521 Latin America |
| <input type="checkbox"/> 311 Samoan | <input type="checkbox"/> 400 Asian | <input type="checkbox"/> 431 Indian | <input type="checkbox"/> 531 African |
| <input type="checkbox"/> 321 Cook Islands Maori | <input type="checkbox"/> 410 Southeast Asian | <input type="checkbox"/> 441 Sri Lankan | <input type="checkbox"/> 611 Other Ethnicity |

If, 'Other European', 'Other Pacific Peoples', 'Other Southeast Asian', 'Other Asian', or 'Other Ethnicity' (please specify below):

Iwi Affiliation: If you have identified as New Zealand Maori in the Ethnicity section, which Iwi do you identify with?

Iwi: _____ Don't know Decline to answer

English Language Proficiency:

Is English your second language? Yes No

State your first language: _____

Disability:

Do you have a disability: Yes No Please specify: _____

Prior Activity: What were you doing prior to entering this programme?

- | | | | |
|---|---|---|--|
| <input type="checkbox"/> 01 Secondary School Student | <input type="checkbox"/> 04 Self-employed | <input type="checkbox"/> 07 College of education student | <input type="checkbox"/> 11 Private Training |
| <input type="checkbox"/> 02 Non-employed or beneficiary | <input type="checkbox"/> 05 University student | <input type="checkbox"/> 08 House-person or retired student | |
| <input type="checkbox"/> 03 Wage or salary worker | <input type="checkbox"/> 06 Polytechnic student | <input type="checkbox"/> 09 Overseas | <input type="checkbox"/> 12 Wananga student |

EDUCATION

Name of last secondary school attended: _____

Location: _____ Last year at school:

What is the highest qualification you gained at secondary school?

- | | | | |
|--|---|---|---|
| <input type="checkbox"/> No formal qualification | <input type="checkbox"/> Year 11 (5th Form) | <input type="checkbox"/> Year 12 (6th Form) | <input type="checkbox"/> Year 13 (7th Form) |
|--|---|---|---|

What is the highest tertiary qualification you have gained since leaving school?

- | | | |
|-------------------------------|-------------------------------------|---------------------------------|
| <input type="checkbox"/> None | <input type="checkbox"/> Sub degree | <input type="checkbox"/> Degree |
|-------------------------------|-------------------------------------|---------------------------------|

TERMS AND RESPONSIBILITIES OF THE TRAINING AGREEMENT FOR THE FULLY SUPPORTED TRAINING OPTION

A training agreement is a formal agreement. Every training agreement is based on a three way partnership between a Trainee, a business and the ITO. The responsibilities of all the parties involved are:

ITO

- Registers training agreements.
- Monitors Trainee's progress and reports credits to NZQA.
- Visits quarterly to meet with the training supervisor and Trainees to discuss progress and set goals.
- Provides quarterly reports to the employer on Trainee progress.
- Provides training resources.
- Organises assessments.
- Organises additional support for Trainees when required.
- Issues certificates on successful completion.

EMPLOYER

- Provides training and learning opportunities in the workplace.
- Models workplace practices.
- Identifies a mentor responsible for meeting regularly with the trainee to provide feedback on training
- Provides the equipment, time and tools needed for the training including computer and internet access.
- Provides support so the Trainee completes training by the agreed dates.
- The Trainee will be released to attend the workshop.

TRAINEE

- Takes responsibility for their learning.
- Reads the training material and completes work to the best of their ability.
- Works towards completion by the agreed dates.
- Meets with the Training Liaison Officer at the agreed times.
- Completes and passes all the assessments.

An individual may choose to study towards the Diploma independently of the employer. If you wish to do this, please talk to PrintNZ Training.

The Training Liaison Officer has assessed the Training Capacity as suitable for the delivery of this programme

In signing this agreement the parties confirm that the Trainee has provided the following information:

1. A verified copy of a Birth Certificate, Passport or Drivers Licence. This verification can be completed by your TLO.
2. Registered on the National Qualifications Framework (NQF) for a NSN number (NZQA Hook-on number), or authorises the ITO to apply on their behalf.

THE EMPLOYER

(Signed for and on behalf of the Employer **as applicable**):

I acknowledge that I have read, understood and agreed to the Terms and Responsibilities of the Training Agreement.

Signature: _____ Date: _____

Name (please print): _____ Position: _____

THE TRAINEE

I apply to be enrolled in this Training Programme and confirm that I have read, understood and agreed to the Terms and Responsibilities of the Training Agreement. I authorise the New Zealand Qualifications Authority to collect information, and/or exchange information with the ITO.

Signature: _____ Date: _____

PrintNZ Training Modules

Please tick your choice of papers below:

- Print Industry Processes and Technology (Compulsory): Level 5 – NQF 25 credits
- Quality Management Project: Level 5 – NQF 25 credits
- Production Planning: Level 4/5 – NQF 25 credits
- Environmental Management: Level 5 – NQF 15 credits
- Project Planning and Management: Level 4 – NQF 15 credits
- Costing and Finance for Print: Level 5 – NQF 25 credits
- Procurement Management: Level 5 – NQF 15 credits

The Open Polytechnic of New Zealand Modules

Please tick for more information.

- Organisation Development
- Management/Supervisory Skills
- HR Management
- Communication and Teams
- Education/Training

CHECKLIST

Have you?

Completed all sections of this form

Attached verified evidence of identification

Provided your NSN/NZQA Hook-on number

Signed and dated this form

Send to: PrintNZ Training, P O Box 31 131, Lower Hutt 5040

Fax to: PrintNZ Training, 0800 654 488

FOR OFFICE USE ONLY

Date Processed: Day Month Year Fund Type: IT Non-funded

Programme #: Version #: Qualification #:

Identification Verified: Yes No

Follow-up comments:

NSN Registration: Yes No

Follow-up comments:

NZ School Code:

Overseas School Code:

Territorial Location:

Industry Classification Code:

Iwi Code:

Invoice Requested: Day Month Year