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)			
	Lease provide a certified copy of your marriage certi	ficate if applicable	
Date of Birth	Day Month Year	Male Female Diverse	If Yes, when?
Have you been a resident of Tai	Poutini Polytechnic Limited (TPPL) stude	nt 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 & Int upport to help you succeed. Therefore know ion that may affect your health and wellbeir or support plans that might be necessary f	ring and understanding your support needs ng so we can ensure the appropriate placen	is essential. To help us, it is important
Do you have a disability that requi	ires us to provide you with additional suppo	rt? Yes No	
Do you have physical, medical or r If yes, please provide detail below	mental health concerns you would like us to	know about? Yes No	
In general how would you currently	ly rate your overall health?		
Excellent Very Goo	od Good Fair	Poor	

5 Tell us about Yourself				
Please describe in your own words what type of person you are.				
What would you expect to gain from living in Student Accommodation?				
Please rate yourself on a 1 - 5 scale on the following: (1 is never and 5 is always)				
Studious Outgoing Qui	Co	nsumes alco	ohol	Tidy
Considerate Smoker Pre	pared to do house chores			OK with rule
6 Convictions against the law				
Have you ever been convicted of any offence against the law (apart from minor t	raffic convictions)? Yes	1	No 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			cord. This may	result in your
application for residency being declined. Please ensure that you detail conviction	ns that are required to be discl	osed.		
7 Emergency Contact Details				
Contact person in case of emergency		_		
Name	Mobile Phone Nu	mber		
Address	Home Telephone	Number	[]	
Postcode:	Work Telephone N	Number	[]	
NB: A POST BOX IS NOT ACCEPTABLE	Relationship to yo	ou		
8 General Information				
PRIVACY - Tai Poutini Polytechnic Limited (TPPL) collects and stores information from				
Qualifications Authority, Tertiary Education Commission, Department of Immigratio support particular students through scholarships and prizes, payment of fees or other transfer of the state of the sta				
to manage internal administrative processes, and for internal reporting. In addition, when required by statute, the Institute releases information to Government	ent agencies such as the New Ze	aland Police, N	ninistry of Justi	ce, Ministry of Socia
Development, and the Accident Compensation Corporation (ACC).				
In signing this form you authorise such disclosure on the understanding that TPPL w the Privacy Act 2020 and the Post-compulsory Unique Identifier Code of Practice. You so, contact the TPP Registry.	0	0		·
NB:The Privacy Act came into force on 30 June 2020 with the stated aim of protecting t				lect, hold, handle, us
and disclose personal information in accordance with the thirteen information principal and disclose personal information in accordance with the thirteen information principal and disclose personal information in accordance with the thirteen information principal and disclose personal information in accordance with the thirteen information principal and disclose personal information in accordance with the thirteen information principal and disclose personal information in accordance with the thirteen information principal and disclose personal information in accordance with the thirteen information principal and disclose personal information in accordance with the thirteen information principal and disclose personal	les in the Act. http://www.privacy	y.org.nz/privacy	/-act	
9 Checklist				
Carefully read and complete all required sections of this Application for	Student Accommodation.			
Bead, sign and date the Declaration. If you are under 18 years of age at t	ne time of submission, your par	ent/guardian	must co-sign t	he form.
C Ensure you have included the completed Referee Form.				
10 Declaration				
I hereby declare the information given to be true. I authorise any information given bound by the statutes, regulations and policies of Tai Poutini Polytechnic Limite				
may be withdrawn by Tai Poutini Polytechnic Limited.	. ratso understand that it rhav	e supplied fat	se illiolillatioi	i, my application
Signature		Dat	e	
Parent/Guardian Signature (if applicant under 18 at time of application			ay Month	Year

Day

Month

Year