

Certificate in Civil Plant Operation (Specialist Large Plant) Application Questionnaire

Please answer all of the following questions to the best of your ability in your own handwriting. The purpose of this questionnaire is to provide us with an insight into you level of prior learning and experiences as they relate to this programme and the industry for which you will be training.

Name: _____
(Surname) (First Names)

NEXT OF KIN
(Someone with a close relationship to you)

Name: _____
(Surname) (First Names)

Relationship to this person: _____

Address: _____

Telephone: Day (0) _____ Mobile (0) _____

Circle the Civil Plant venue you wish to attend:

Auckland Waikato West Coast Southland

Section B: Medical expectations

Do you have a medical or physical condition that would prevent you from operating fully in this physically demanding programme and industry No Yes

If you have answered yes to the above question please provide an explanation:

Section C: Criminal offences

Have you been convicted of a criminal offence in the last ten years, or are you currently being processed for a criminal offence? No Yes

If you have answered yes to the above question please provide an explanation:

Section D: Learning

Do you have any difficulties with learning e.g. remembering instructions, reading or writing?

No

Yes

If you have answered yes to the above question please provide an explanation:

What attracts you to this programme?

Declaration

I certify that the details provided in this form are correct. I also agree, if I am accepted for this programme, I will observe all rules and conditions as may be required by Tai Poutini Polytechnic.

Signature:

Date:

**Contact Civil Plant:
0800 TPP INFO**