



SOUTHERN
INSTITUTE OF TECHNOLOGY
NEW ZEALAND
TE WHARE WANANGA O MURIKU

INTERNATIONAL STUDENT APPLICATION FORM

Please print clearly in BLOCK LETTERS

PERSONAL DETAILS

Family name			
First name		Preferred name	
Date of birth (dd/mm/yyyy)	/	Gender	<input type="checkbox"/> Female <input type="checkbox"/> Male
Citizenship		Status	<input type="checkbox"/> Single <input type="checkbox"/> Married
Mailing address			
City		Postcode	
Country		Phone or mobile	
Email			
Passport number		Expiry date	

Have you applied to SIT before? ☐ No
☐ Yes, my SIT student ID number is:

Which of the following most influenced your decision to apply to SIT?	<input type="checkbox"/> SIT website	<input type="checkbox"/> Agent
	<input type="checkbox"/> SIT international prospectus	<input type="checkbox"/> NZ High Commission / Embassy
	<input type="checkbox"/> Ads (TV, radio, newspaper)	<input type="checkbox"/> Education exhibition / fair
	<input type="checkbox"/> Family / friend	<input type="checkbox"/> Other: <input type="text"/>

EDUCATION AGENT (if applicable)

Agent name	
Agent email	
Agent stamp or mailing address	

EDUCATIONAL BACKGROUND

What is the highest academic qualification you hold from a secondary or high school?

Qualification	Institution	Country	Year gained

Have you gained any other qualifications after leaving school?
Provide transcripts and completion certificates for all qualifications listed here:

Qualification	Institution	Country	Year gained

ENGLISH LANGUAGE

☐ English is my first language or the language of instruction in my education in a native English-speaking country

☐ I have taken / will take an academic IELTS or TOEFL test

Date of test: / /

Attach results to application

I want to study English at SIT:

☐ Certificate in English Language

☐ 24 Weeks English Scholarship

Start date requested: / /

PROPOSED STUDY AT SIT

(If you are applying for the 24 Week English Scholarships, enter the mainstream programme you are likely to apply for)

Name of qualification

Start / intake date / /

Campus

☐ Invercargill

☐ Queenstown

☐ Christchurch

ACCOMMODATION

If you would like SIT to arrange your accommodation, please complete this section. SIT will provide you with two weeks of accommodation upon arrival at no extra charge at a homestay, Grand Hall of Residence or other approved accommodation.

I would like:

☐ Accommodation at an approved Homestay

Accommodation required from: / /

(minimum six weeks required)

to: / /

Do you smoke?

☐ Yes ☐ No

Do you mind members in your homestay smoking?

☐ Yes ☐ No

Do you mind homestays with pets / animals?

☐ Yes ☐ No

Do you mind homestays with young children?

☐ Yes ☐ No

Please list any special cultural or spiritual/religious requirements, dietary needs, medical problems or anything else your homestay host should be aware of:

☐ Accommodation at the Grand Hall of Residence, Invercargill

☐ 2 weeks

☐ 4 weeks

☐ _____ weeks

☐ Accommodation at the Queenstown Campus

☐ Accommodation at the Christchurch Campus

DECLARATION

I declare that all the information provided by me on and with this application form is correct and complete. I understand that SIT reserves the right to vary or reverse any decision regarding admission made on the basis of incorrect or incomplete information provided by me.

I authorise SIT to obtain official records and related information to my application for enrolment from any educational institution that I have previously attended and from any applicable authority such as the New Zealand Qualifications Authority. I authorise SIT and New Zealand government agencies, including Immigration New Zealand, to supply information about me to each other if it is considered to be relevant to my immigration status and/or my enrolment status.

I authorise SIT to release academic records or information related to my health and safety to my parents, education agency or other organisation should SIT consider that it is necessary to do so for my wellbeing or educational benefit.

I agree to abide by all SIT regulations and policies as may be amended from time to time. I have read, understood and accept SIT's Refund Policy for International Students and Privacy Statement available at www.sit.ac.nz. I am aware of the geographical location of the SIT campus in New Zealand at which my programme is offered.

Signature:

Date: / /

Send your completed application

CHECKLIST

I have:

- ☐ Completed all sections of this application form
- ☐ Attached a certified copy of my passport ID page or birth certificate
- ☐ Attached a certified copy of my IELTS or TOEFL test result (if a test was taken)
- ☐ Attached a certified copy of academic transcripts and completion certificates listed on this form (in original language and an English translation if appropriate)
- ☐ Attached any other documents required by my programme (eg. portfolio for digital media and design programmes, statement of purpose for specified programmes)

By email: applications@sit.co.nz

By post: SIT International,
Private Bag 90114, Invercargill 9840,
New Zealand