

Work Visa Application - A2471868 - Shyam Chaudhary

Application Submit Date & Time: 24 February 2021 12:17 PM (NZT)

Version: December 2020 V14.0

Identity and Contact

The questions on this screen only relate to the Principal Applicant.

Please provide some basic information about yourself.

What is your name as shown on your passport?

Family/last name **Chaudhary**

Given/first name(s) **Shyam**

Middle name(s) **Not answered**

Title **Mr**

Other names you are known by or have ever been known by (if applicable)

Other family/last name **Not answered**

Other given/first name(s) **Not answered**

Other middle name(s) **Not answered**

Name type **Not answered**

What is your gender? **Male**

What is your date of birth? **18/09/1993**

Where were you born?

Country/territory **Nepal**

State/province/region **Not answered**

Town/city **Biratnagar**

Provide details of your passport

Passport number **09884038**

Country/territory of passport **Nepal**

Expiry date **07/07/2026**

If applicable, provide details of your national identity number

National identity number **Not answered**

If applicable, provide details of other citizenships you hold

If applicable, provide details of other citizenships you hold **Not answered**

What is your partnership status? **Single**

Have you previously applied for a visa for New Zealand? **Yes**

Client number **74559486**

Please provide details of your residential and postal addresses. We will communicate with you via your online account and your nominated email address, please provide us with an email address you check regularly.

Provide your current residential address

Country/territory **New Zealand**

Address **10 Robyn Place, Dinsdale, Hamilton 3204**

Provide your telephone and email contact

Telephone (landline) **64-22-3268506**

Mobile number **64-0223268506**

Email **sam.chaudhary615@protonmail.com**

Confirmation email **sam.chaudhary615@protonmail.com**

Is your postal address the same as your current residential address? **Yes**

Provide your most recent overseas address

Country/territory **Nepal**

Address line 1 **Rani - 17**

Address line 2 **Not answered**

Address line 3 **Not answered**

Town/city **Biratnagar**

State/province/region **Not answered**

ZIP/post code **Not answered**

Will you be in the same country as your residential address when you submit this application? **Yes**

Group application

Will this visa application be submitted together with other visa applications as part of a group? **No**

Declaration

Immigration New Zealand (INZ) will use the information you have provided on this page to check if you or anyone else included in this application may apply for a visa online. By selecting 'I agree', you give permission for the information you have provided to be used for this purpose. If you do not agree, you may delete this information by clicking 'Cancel'. Note that if you do not delete this information, it will be retained in your online account until deleted according to our retention policy. Immigration New Zealand will retain any failed facial image uploads for analysis and improvements to our system. See the [Immigration New Zealand website](#) to download the application form and make a paper-based application.

If you want to submit your application with other people (such as your family), you will need to complete applications on their behalf. You will be able to submit the applications together, after they are all completed.

I agree **Yes**

Work Details

Provide details about the work visa you are applying for.

What type of work visa are you applying for? **Post-Study Work Visa - Open**

Do you have a job offer that requires New Zealand Registration? **I don't have a job offer**

How long do you plan to stay in New Zealand in total (including the time you have already spent in New Zealand)? **24 months or more**

Health Details

All visa applicants must have an acceptable standard of health. Depending on the answers provided, you may be required to provide medical certificates.

Do you have tuberculosis? **No**

Do you have any medical condition that requires, or may require, one of the following during your stay in New Zealand?

Renal dialysis **No**

Hospital care **No**

Residential care **No**

Are you pregnant? **Not applicable**

Where have you visited or lived for more than 3 months within the last 5 years?

Country/territory **India**

Have you previously provided a chest X-ray certificate? **Yes**

Was your chest X-ray certificate issued in the last 36 months? **Yes**

Have you visited or lived in any countries for more than 6 consecutive months since the certificate was issued? **No**

Have you previously provided a [General Medical Certificate \(INZ 1007\)](#) or [Limited Medical Certificate \(INZ 1201\)](#)? **No**

When you applied for your last visa, did Immigration New Zealand ask you to provide any of the following medical information with this visa application? **• Chest X-ray Certificate**

Character Details

All visa applicants must meet our character requirements. You may be required to provide a police certificate from your country of citizenship and any country you have lived in for five years or more since the age of 17 if you plan to be in New Zealand for 24 months or longer.

Find out how to obtain a police certificate [here](#).

Have you ever been convicted at any time of any offence, including any driving offence? **No**

Have you ever been removed from, deported from, expelled from, excluded from or refused entry to, any country, excluding New Zealand? **No**

In any country, including New Zealand, are you currently under investigation, wanted for questioning, or facing charges for any offence? **No**

Have you ever been refused a visa by any country, excluding New Zealand? **No**

Have you lived in any country for more than 5 years since the age of 17 (not including your country of citizenship)? **No**

Have you provided a police certificate from Nepal with a previous application? **Yes**

Was the police certificate issued in the last 24 months? **Yes**

Work History

The questions on this screen only relate to the Principal Applicant. Provide details of your work history

Are you currently working? **Yes**

If you are currently working, provide details of your current work. If you are retired, provide details of your last paid work.

New Zealand Business Number **Not answered**

Name of employer **Best Value Dairy**

Employer's Address **6 Ulrich Avenue Melville Hamilton 3206**

Telephone (landline) **64-07-8436411**

Mobile number **Not answered**

Email **Not answered**

Type of work/occupation/job title **Retail Assistant**

Start date **12/2020**

End date **Not answered**

Provide details of all periods of previous work, include periods of self-employment and employment outside New Zealand.

Start date	09/2020
End date	11/2020
Name of Employer	Yakeda's Gift Store
Employer's Address	Shop 46 Centre Place Shopping Centre Hamilton
Type of work/occupation/job title	Sales Assistant
Start date	06/2017
End date	06/2019
Name of Employer	Birat Kshitiz College
Employer's Address	Morang College College Road Biratnagar- 12
Type of work/occupation/job title	IT Technician

Qualification History

Provide details of all qualifications you hold.

Start date	02/2020
End date	11/2020
Name of institution	Wintec
Name of qualification	Postgraduate Diploma in Applied Information Technology
Start date	11/2011
End date	11/2015
Name of institution	Jawaharlal Nehru Technological University Kakinada
Name of qualification	Bachelor of Technology in Computer Science &Engineering

Other Contacts

Provide details of your contacts in New Zealand.

Do you have any contacts in New Zealand?	Yes
Names and address of any friends, relatives, or contacts you have in New Zealand	
Family/last name	Phua
Given/first name(s)	Szenan
Relationship to you	Other
Date of birth	23/02/1982
Enter their address	20 Vincent Place, Dinsdale, Hamilton 3204
Telephone (Landline)	64-07-8467956
Telephone (Mobile)	64-021449348
Email	szenan.phua@balancetcm.co.nz
Family/last name	Nagarajan
Given/first name(s)	Ayyappan
Relationship to you	Friend
Date of birth	19/04/1977
Enter their address	332 Rangatira Road, Beach Haven, Auckland 0626

Telephone (Landline) **64-22-1407618**

Telephone (Mobile) **64-02108991168**

Email **nagaraj_1977@ymail.com**

Apply on Behalf / Assist

Provide information about any person assisting with this application by providing immigration advice, explaining, translating or recording information on the form for the applicant(s).

Are you completing this form on behalf of someone else? **No**

Have you received immigration advice or assistance relating to this application? **No**

Upload Documents

Based on the information you have provided you must upload the following documents to support your visa application. The size of each document must not exceed 10 MB. If you have multiple documents to upload as evidence for the same requirement, combine these together into one pdf before uploading. A document that is translated must be [a certified or official translation](#).

See our help pages for [uploading documents](#) and [taking acceptable passport photos](#).

Passport style photograph of your head and shoulders from the front **02.JPG (4227287 bytes)**

Relevant pages of the passport/travel document you will be travelling on **03.pdf (584411 bytes)**

Your identification card, if available **No files uploaded**

If this document is not in English and has been translated, upload the translation **No files uploaded**

Evidence of your qualifications relevant to Post-Study Work Visa – Open **CourseCompletionLetter.PDF (75232 bytes)**

Evidence that you have [sufficient funds](#) to support yourself in New Zealand

Evidence **final.pdf (120245 bytes)**

If this document is not in English and has been translated, upload the translation **No files uploaded**

Based on the information entered you must provide a General Medical Certificate and a Chest X-Ray Certificate to support your visa application.

Is a physician submitting your health information on your behalf? **Yes**

Did your physician supply you an eMedical reference code? **Yes**

Enter your eMedical reference code here **N001170355**

Are there any other documents you wish to provide in support of your application? **No**

Declaration

Before you submit your application you must agree to the declaration below. Read it carefully and make sure you understand it before selecting "I agree".

I have provided true and correct answers to the questions in this form.

I understand that if false or misleading information is submitted, my application may be declined without further warning.

I agree to tell Immigration New Zealand about any changes to my circumstances (including a change in my employment or partnership status) that occur after making this application.

I agree to leave New Zealand before my visa expires. If I remain in New Zealand after my visa has expired, I may be deported by Immigration New Zealand.

I agree that if I am not entitled to free health care in New Zealand, I will pay for any health care or medical assistance I may require in New Zealand.

I understand that if I have received immigration advice from an immigration adviser and if that immigration adviser is not licensed under the Immigration Advisers Licensing Act 2007 when they should be, Immigration New Zealand will not further process my application.

I understand that Immigration New Zealand may provide information about my entitlement to work to potential employers including via the online VisaView system.

I authorise Immigration New Zealand to provide information about my health and my immigration status to any health service agency. I authorise any health service agency to provide information about my health to Immigration New Zealand.

I authorise Immigration New Zealand to share any information with Edmund Hillary Fellowship which is relevant to my visa application or status.

I authorise Immigration New Zealand to make any necessary enquiries about information on this form and/or accompanying documentation and to share this information with other government agencies (including overseas agencies) to the extent necessary to make decisions about my immigration status.

I authorise any agency whether in New Zealand or overseas, including but not limited to border or immigration agencies, education providers, financial institutions, foreign embassies, government authorities, healthcare providers, police or other law enforcement agencies, that holds information (including personal information) related to information on this application form and/or accompanying documentation to disclose that information to Immigration New Zealand so that they can:

- * make a decision on this application

- * answer enquiries about my immigration status once my application has been decided.

I authorise any agency that holds information (including personal information) related to those matters to disclose that information to Immigration New Zealand.

I have provided all the documents required by this application.

If I am granted a limited visa, I agree that I will leave New Zealand on or before the expiry date of that visa. If I do not leave New Zealand, I may be immediately deported from New Zealand without the right of appeal.

I have confirmed all the information I have provided is still true and correct, and that I have uploaded all the necessary documents.

I agree with the declaration.

I agree **Yes**

Work Visa Application - A2471868 - Shyam Chaudhary

Thank You

Shyam Chaudhary

We received your application **A2471868**.

What happens next?

Your application will be allocated to an immigration officer for assessment. Information on processing times can be found on our [website](#). You do not need to send us your passport(s). We will contact you by email if we require further information.

You can view your application as a PDF document under 'Submitted applications' in [your account](#). Your visa application fee payment receipt is also available as a PDF under the application.