学生签证信息采集表（共6页）（中文填写）

1. **申请人基本信息 Applicant’s information**

|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **申请人基本信息** | | | | | | | | | | |
| **姓名**Name |  | | **性别**Gender | |  | | **出生日期**DOB | |  | |
| **曾用名Previous name** |  | | **出生地（城市和国家）**Place of birth | |  | | **婚姻状况**Partnership status | | **请选择打勾**  **□ Single 单身**  **□ Separated 分居**  **□ Partner 同居**  **□ Divorced 离婚**  **□ Married已婚**  **□ Engaged 订婚**  **□ Widowed 鳏寡** | |
| **国籍**Nationality |  | | **其他国籍（如有）**Other citizenship | |  | |
| **联系电话**Contact No. |  | | | | **电子邮箱**Email | |  | | | |
| **中国住址**Residential Add. |  | | | | | | | | | |
| **新西兰住址（如有）**Add. In NZ |  | | | | | | | | | |
| **中国身份证号(Chinese ID No.)** |  | | | | | | | | | |
| **护照信息** | | | | | | | | | | |
| **护照号**Passport no. | | **所属国家**Country | | **签发地点**Place of issue | | **护照有效期**Expiry date | | | **颁发日期**Date of issue | |
|  | |  | |  | |  | | |  | |
| **新西兰联系人/亲戚联系方式（如有）** | | | | | | | | | | |
| **姓名**Name | **地址**Address | | | | | | | **跟你的关系**Relationship | | **生日**DOB |
|  |  | | | | | | |  | |  |

1. **工作经验（包括自主经营）Work Experience（including self-employment）**

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| --- | --- | --- | --- | --- | --- | --- |
| **开始日期**From  (DD/MM/YY)**（日/ 月/ 年）** | **结束日期**To  (DD/MM/YY)**（日/ 月/ 年）** | **雇主姓名/**  **工作机构名称**Name of employer | **工作地点**Location | **工作类型/职位/岗位描述**Type of work/title/JD | **雇主电话/Telephone** | **雇主邮件/Email** |
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1. **学习经历 Study Experience（从高中开始 starting from high school）**

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| --- | --- | --- | --- | --- | --- | --- |
| **开始日期**From  (DD/MM/YY)**（日/ 月/ 年）** | **结束日期**To  (DD/MM/YY)**（日/ 月/ 年）** | **学校名称School Naome** | **学习课程 Course Name** | **学校地址**  **Address** | **获得学位**  **Degree/Qualification granted** | **学校电话 telephone** |
|  |  |  | 高中 |  |  |  |
|  |  |  | 大学本科/大专 |  |  |  |
|  |  |  | 研究生 |  |  |  |
|  |  |  | 博士生 |  |  |  |
|  |  |  |  |  |  |  |

1. **健康状况Health：**

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| --- | --- | --- |
| **您是否患有肺结核**Do you have tuberculosis (TB)? | □ 是Yes | □ 否No |
| **您在新西兰停留期间是否需要或可能需要接受以下医疗服务**Do you have any medical condition that requires, or may require, one of the following during your stay in New Zealand： | | |
| **肾透析Renal dialysis** | □ 是Yes | □ 否No |
| **住院治疗Hospital care** | □ 是Yes | □ 否No |
| **家庭看护\* Residential care\*** | □ 是Yes | □ 否No |
| **您是否有需要长期治疗或服药的病症**Do you or your family have any condition that is likely to require ongoing treatment or medication? | □ 是Yes | □ 否No |
| **您是否被认为需要特殊教育服务**Have you been identified as a person who requires special education services? | □ 是Yes | □ 否No |
| **您是否曾用过静脉注射的毒品**Have you ever used intravenous drugs | □ 是Yes | □ 否No |
| **您是否输过血**Have you ever had a blood or blood product transfusion | □ 是Yes | □ 否No |
| **您是否曾接触任何可能使你感染严重传染病的活动**Have you ever participated in or been exposed to any activity which may have exposed you to a serious infectious disease | □ 是Yes | □ 否No |
| **在之前的任何申请中您是否被新西兰移民局书面告知需要在之后的任何申请里提供体检信息**Have you been advised in writing by Immigration New Zealand to provide a medical certificate, a chest X-ray certificate or any other medical information with this application？ | □ 是Yes | □ 否No |

***\* 家庭看护是指为老年人，或者肢体上、感官上、智力上、精神上有缺陷的人提供的长期陪同看护。****\* Residential care is long-term care provided in live-in facilities for the aged or for people with physical, sensory, intellectual, or psychiatric disabilities.*

**如有以上任何一种情形，请提供详细信息**If you have answered yes to any of the questions above, give full details**：**

|  |  |  |
| --- | --- | --- |
| **疾病/状况名称Disease/Conditions** | **开始时间Starting from** | **状况描述Details** |
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| **您是否怀孕？（如果准备在新西兰生产，需要提供额外的资金证明。）**Are you pregnant(If yes, you will need to provide additional evidence of funds ) | |
| **□ 是Yes** | **预产期： 年 月 日**  **Date you are due to give birth** |
| **□ 否No** |  |

**关于体检报告Medical report：**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **过去36个月内是否提交过in the past 36 months, whether you have provided:** | | | | |
| **全身体检**  full medical INZ 1007 | □ 是Yes | | □ 否No | |
| **胸透**Chest X-ray INZ1096 | □ 是Yes | | □ 否No | |
| **如有提交过，请提供体检的具体日期If yes, please provide date：** | | | | |
| **全身体检**  full medical INZ 1007 | 年 月 日 | | | |
| **胸透**Chest X-ray INZ1096 | 年 月 日 | | | |
| **自上次提交过胸透至今，是否在肺结核低发国家列表以外的国家（例如中国）居住超过6个月** Have you spent six consecutive months since your previous visa application in a place that is outside the list of ‘Countries, areas, and territories with a low incidence of tuberculosis’**？** | | □ 是Yes | | □ 否No |
| **上一次申请中移民局是否书面要求你提供额外体检信息**Have you been advised in writing by Immigration New Zealand to provide a medical certificate, a chest X-ray certificate or any other medical information with this application**？** | | □ 是Yes | | □ 否No |

1. **品行Character。**

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| --- | --- | --- |
| **您是否曾经因触犯任何国家（包括新西兰）的法律而被**Have you been： | | |
| **定罪**convicted | □ 是Yes | □ 否No |
| **指控**charged | □ 是Yes | □ 否No |
| **调查**under investigation | □ 是Yes | □ 否No |
| **您是否违法交通法规，如危险驾驶，饮酒驾驶或醉酒驾驶，无驾照驾驶等**Have you been convicted of traffic offence involving dangerous driving, driving having consumed excessive alcohol (including drunk driving and driving with a blood or breath alcohol content in excess of a specified limit) or unlicensed driving, etc? | □ 是Yes | □ 否No |
| **您是否曾被任何国家（包括新西兰）**Have you been any offence(s) against the law in any country, including New Zealand： | | |
| **禁止入境**excluded (refused entry) from | □ 是Yes | □ 否No |
| **拒签**refused a visa by | □ 是Yes | □ 否No |
| **递解/驱逐出境**removed or deported from | □ 是Yes | □ 否No |
| **您是否是或曾是恐怖组织的成员或跟恐怖组织有联系？**Have you ever been a member of, or adhered to, any terrorist organisation? | □ 是Yes | □ 否No |
| **您是否是或曾是任何曾倡导或犯下战争罪，危害人类罪和/或其他严重侵犯人权的行为的政府，政权，或机构的成员，与之有联系，或涉及其中？**Have you had (or do you currently have) an association with, membership of, or involvement with, any government, regime, group or agency that has advocated or committed war crimes, crimes against humanity and/or other gross human rights abuses? | □ 是Yes | □ 否No |
| **在之前递交的任何签证申请中，您是否向新西兰移民局提供了错误的、误导性的或虚假的、有所隐瞒的信息或资料？**Have you or your family, in the course of applying for a New Zealand visa/permit, made any statement or provided any information, evidence or submission that was false, misleading or forged, or withheld material information? | □ 是Yes | **□** 否No |

**If you have answered Yes to any of the above questions, provide details below.**

**如果您对上述任一问题回答为“是”，请在下面作出详细说明。**

|  |  |
| --- | --- |
| **时间Date** | **情况描述Details** |
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| --- | --- | --- | --- |
| **过去24个月内是否提交过国籍所属国，或17岁以上居住超过5年的国家或地区的无犯罪记录**：have you provided police certificates 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 | | □ 是Yes | □ 否No |
| **如回答是，请提供以下信息：** | | | |
| **无犯罪记录的日期**Date： |  | | |
| **签证类别**Type of Visa application： |  | | |

1. **学习信息与担保方式确认Programme of study and funds.**

|  |  |  |
| --- | --- | --- |
| **请仔细阅读我们发给你的学校录取通知，记清楚课程细节。**Please read carefully the details on the offer of place of the programme you will be studying. | | |
| **资金担保方式：**Funds | □ **父母存款**Parents support | □ **专用账户**FTS |
| □ **担保人填写担保表格**  Sponsored | □ **政府资助**Government sponsorship |

1. **家庭信息Family Information**

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| --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  | |  | | **配偶、子女、父母及兄弟姐妹信息**  **（Partner, Children, Parents and Siblings Information）** | | | | |
| **姓名**Name | 性别Gender | | **跟你的关系**Relationship | | **生日**DOB | **出国国家 (country of birth)** | **国籍**  **（Nationality）** | **职业Occupation** |
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1. **监护人信息（父母同行申请陪读签证或本地学生签证适用）** Your parent or legal guardian (Complete this section if you will be living with your parent or guardian for the duration of your visa.)**：**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **姓名**Name | **性别**Gender | | **出生日期**DOB | **其他名字**Other name known by |
|  |  | |  |  |
| **出生地(城市和国家)**Place of birth | **其他国籍（如有）**Other citizenship | | **关系**Relationship | **婚姻状况**Partnership status |
|  |  | |  |  |
| **监护人护照信息Guardian’s passport information** | | | | |
| **护照号**Passport no. | **所属国家**Country | **签发地点**Place of issue | | **护照有效期**Expiry date |
|  |  |  | |  |

**本人承诺以上所提供信息属实。如相关信息有所变动，本人将及时通知学校/大学或移民局及代理。本人同时授权指定移民顾问在相关申请文件中使用本人签名。**

**I hereby promise that the information provided above is true. If the relevant information changes, I will promptly notify the relevant school/university or Immigration New Zealand. I also authorize my appointed immigration advisor to use my signature in relevant application documents.**

**申请人签字：**

**Signature:**

**填表时间：**

**Date:**