

# Course Enrolment Form

## Personal Details (as per your Driver's Licence)

Surname or Family Name \_\_\_\_\_

First Name(s) \_\_\_\_\_

Preferred First Name \_\_\_\_\_

Date of Birth (DD/MM/YYYY) \_\_\_\_\_

## Contact Details

Street Address: \_\_\_\_\_

\_\_\_\_\_

Suburb: \_\_\_\_\_

Town / City: \_\_\_\_\_

Post Code: \_\_\_\_\_

Daytime Contact Number (\_\_\_\_) \_\_\_\_\_

Email: \_\_\_\_\_

## Statistical

### Gender:

Male       Female       Other

### Ethnicity:

NZ Maori       NZ European  
 Pacific Island       Other

### Education:

No formal qualification       NCEA Level 1,2 or 3  
 Certificate or Diploma from a tertiary provider       Degree or higher qualification

### Employment Status:

Employed       Not Employed

Name of Employer: \_\_\_\_\_

Name and contact details of person receiving invoice:

Name: \_\_\_\_\_

Email: \_\_\_\_\_

Phone: \_\_\_\_\_

### Payer Signature:

Signature of person receiving the invoice: \_\_\_\_\_

## Course Details

Name of Course: \_\_\_\_\_

### Location:

Kawerau     Opotiki     Whakatane

Other: \_\_\_\_\_

Course start date: \_\_\_\_\_

## Current Licences / Endorsements

**Tick the licences and endorsements that are on your current driver's licence.**

### Car (Class 1)

Learner  
 Restricted  
 Full (Date of issue) \_\_\_\_\_

### Truck (Class 2)

Learner  
 Full (Date of issue) \_\_\_\_\_

### Truck (Class 3)

Learner  
 Full (Date of issue) \_\_\_\_\_

### Truck (Class 4)

Learner  
 Full (Date of issue) \_\_\_\_\_

### Truck (Class 5)

Learner  
 Full (Date of issue) \_\_\_\_\_

WTR \_\_\_\_\_     Forklift \_\_\_\_\_

### Student Signature:

**I agree to the terms and conditions listed on page 2**

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Please scan and send the completed form to:

nancy@toi-eda.co.nz

# Course Enrolment Form

## Agreement

**PLEASE READ THE FOLLOWING INFORMATION AND SIGN AT THE BOTTOM OF PAGE 1.**

**All students must sign this declaration if they agree to the terms below.**

- I declare that the information provided by me on this form is complete and correct.
- I agree to abide by all Toi EDA regulations, guidelines and policies as may be amended from time to time.
- I understand that the personal information collected on this form will be used for enrolling in a course through Toi EDA. I understand that without this consent my application / enrolment cannot proceed.
- I understand that the information gathered may be disclosed to third party training providers as part of the enrolment, and where relevant, to other agencies such as Ministry of Business, Innovation and Employment; Ministry of Social Development, Industry Training Organisations, Industry Licensing and Registration bodies, providers of work experience for students in courses with a practical component, and where required by statute.
- I understand that Toi EDA will collect and hold my personal information to enable us to process your enrolment with third party providers and for MBIE reporting purposes where necessary. Also, when required by law, Toi EDA has the right to release information to government agencies such as the New Zealand Police, Department of Justice, Inland Revenue, Ministry of Social Development, and the Accident Compensation Corporation.
- I understand that I have the right to see and correct information about me that has been collected by Toi EDA in accordance with New Zealand Privacy Laws