



NZQA USE ONLY

National Qualifications Framework Hook On (Registration) Form

All sections of this form must be completed. Please print clearly.

Return this form to your teaching institution or your assessor. The Hook On fee is \$25.00 incl GST.

Please note that the name entered in this section will appear on your Record of Learning and certificates

Surname (family name)

[Grid for Surname]

First names (given names). Enter all names in full

[Grid for First names]

Address. This should be your permanent address, NOT a temporary address used while attending a teaching institution.

[Grid for Address]

Date of Birth

[Day] [Month] 19 [Year]

Local (Providers) Student ID (if applicable)

[Grid for Student ID]

Tick appropriate box (for statistical purposes only)

Male Female

Tick box(es) next to the ethnic group(s) you feel you belong to (for statistical purposes only)

European/Pakeha Tongan Chinese Asian Indian
New Zealand Maori Niuean Other Pacific Island
Samoan Tokelauan Other
Cook Island Maori Fijian

Name of Teaching Institution / ITO:

PCAITO

I declare that the particulars given above are correct and authorise the New Zealand Qualifications Authority to collect information from, and/or exchange information with any Teaching Institution, Industry Training Organisation or Government Agency with which I am enrolled, or have requested enrolment or funding.

Signed

[Signature line]

Date

[Date line]

Teaching Institution or NZQA USE ONLY

RC [] \$ [] Date []

New Zealand Qualifications Authority, PO Box 160, Wellington. Telephone: 04-802-3000. Fax: 04-802-3113.

DATE RECORD ENTERED

[Date line]

PCAITO OFFICER

[Signature line]

White copy – To Training Coordinator Pink copy – To Opportunity Training Green copy – Moderator to retain