School of Business t/as Exercise Academy

INTERNATIONAL ENROLMENT FORM

The information you provide on this form is needed to enrol you into a qualification at School of Business t/as Exercise Academy. Please print clearly in blue or black pen and complete all sections in full. An incomplete application cannot be processed.

Your Programme Information

Have you studied at School of Business (SOBL) t/as Exercise Academy before?

☐ No ☐ Yes

My last year of study at SOBL was: _____

How do you intend to study?

☐ Full-time (Domestic or International) + Work Placement

☐ Part-time (Online Only) + Work Placement

N.B. Student visas are only granted for full-time on-site study. Therefore, part-time fees shown below are only for students remaining in their home country and studying with SOBL via distance delivery. Tuition fees are subject to annual adjustment. Tuition fees do not include accommodation, living expenses, or other programme related or incidental expenses.

Which programme will you be enrolling in? (Please tick the relevant programme).

☐ **New Zealand Certificate in Exercise (NZQA Level 4)**

Full-time – 52 weeks (20 hours/week)

+ Work placement (60 hours) during course

Part-time – Online self paced + Work placement (60 hours)

N.B. A student can apply to enrol in a different level of study by submitting a record of prior learning and a portfolio to the Academic Board for approval. Please contact admissions for further details. For details, please contact admissions - email: admissions@sobl.ac.nz

N.B. We do not courier your programme resources to you, as these are available online.

Intended start date: _____

Your programme start and end date will be confirmed in your enrolment confirmation letter.

Goals

Over–arching Programme Goals

What is your main reason/purpose for being at SOBL?
Example: *"To gain the skills and qualification I need to work in the fitness industry."*

_____

_____

_____

_____

_____

_____

_____

Which subject/area of interest would you like to explore?

N.B. Please itemise if there is more than one subject/area of interest.

_____

_____

_____

What is your intended career?

_____

_____

Will completing our programme assist you to meet your career and/or personal goals?

_____

_____

How did you first hear about us?

☐ **SOBL E-newsletter**

☐ **Facebook**

☐ **Google Search**

☐ **Instagram**

☐ **Word of mouth**

- ☐ Mentor/tutor
- ☐ Student/past student
- ☐ Family/friends

☐ **Poster or Flyer in Public place**

- ☐ Community Art Group
- ☐ Library
- ☐ Secondary School

☐ **Event**

- ☐ Creativity Workshop
- ☐ Exhibition
- ☐ Career Expo
- ☐ Open Day

☐ **Drove past campus**

☐ **Other – please specify**

_____

_____

_____

Personal Details - Please print clearly

Title

☐ Miss ☐ Ms ☐ Mrs ☐ Mr ☐ Other (specify)_____

Pronouns _____

Full legal family name _____

Legal given names _____

Preferred name _____

Maiden/Previous name _____

N.B. If you have studied previously under another name at our organisation or elsewhere (including school), what was that name?

Gender ☐ F (Female) ☐ M (Male) ☐ D (Diverse)

Date of birth _____

Is English your first language? ☐ No ☐ Yes

NSI or NZQA

☐☐☐ ☐☐☐ ☐☐☐ ☐☐☐

N.B. If unknown please leave blank.

Address in home country (cannot be a PO box number)

House/flat no. and street _____

Suburb _____

City _____

Postal code _____

Country _____

Phone number (include country and area code)

_____

Address (during term) in New Zealand (cannot be PO box number)

House/flat no. and street _____

Suburb _____

City _____

Postal code _____

Country _____

N.B. We will post all information to your term address during your programme

Contact details

N.B. Please print in BLOCK letters

Telephone

(Area Code) _____ (Number) _____

Mobile _____

Email address _____

Communication with SOBL will be by email unless you request that it be by post.

Emergency/alternative contact

N.B. Please print in BLOCK letters

Name _____

Address _____

Phone/mobile number _____

Email address _____

Relationship to you _____

Accommodation

Please indicate the type of accommodation you will be staying in for the duration of the programme.

N.B. SOBL does not offer accommodation, but is happy to assist students with information to help them to locate appropriate accommodation. Please contact the international student advisor for more information.

☐ Private
☐ Hostel
☐ Renting
☐ Boarding
☐ House owner
☐ Flatting
☐ Other (specify)

Health and Well-being

The following questions are intended to help us to identify gaps within our support systems. Your responses may enable us to address these gaps over time, or to offer alternative support options. Please note that the information you provide has no bearing on your application. Further, these questions are not intended to commit SOBL to providing the services mentioned.

Disability Status

Do you describe yourself as disabled, Deaf, neurodiverse, tangata whaikaha Māori, or living with a long-term physical or mental health condition?

☐ Yes ☐ No ☐ Prefer not to disclose

The information you provide is collected for statistical purposes and to help us understand our learners. Select one option only.

Disability Support Needs

Are there supports that would help you while learning at this tertiary institution? Your response allows us to let you know what assistance is available.

☐ No ☐ Yes

The information you provide is collected for statistical purposes and to help us understand our learners.

If you answered 'Yes', please select all of the supports you might need.

☐ Access to assistive technology (e.g. for reading, writing, communication)
☐ Accessible format resources for course content
☐ Mobility and transport (e.g. navigator support to help movement around campus, mobility carparks, personal emergency evacuation plan)
☐ New Zealand Sign Language Interpreter
☐ Support with reading, writing, and communicating in learning sessions, exams, and assessments
☐ Other learning or disability support
☐ No, I do not need support at this time

Travel and Medical Insurance

N.B. It is compulsory for all international students to have comprehensive travel and medical insurance.

Details of policy name

_____

Start date _____ **Expiry date** _____

Citizenship and Residency

Country of citizenship

_____

Do you have permanent residency in New Zealand?

☐ No ☐ Yes

Passport number _____

Passport expiry date _____

Please select your fee type

☐ Full fee-paying foreign student
☐ NZAID Scholarship (including Aotearoa short-term training and post-graduate) Exchange scheme approved by the Ministry of Education
☐ Foreign research-based post-graduate

Ethnicity

Which ethnic group(s) do you belong to?

You may identify up to six

- ☐ NZ European/Pakeha
- ☐ Māori**
- ☐ Australian
- ☐ Samoan
- ☐ Cook Island Māori
- ☐ Tongan
- ☐ Niuean
- ☐ Tokelauan
- ☐ Fijian
- ☐ Other Pacific Peoples*
- ☐ Filipino
- ☐ Cambodian
- ☐ Vietnamese
- ☐ Other Southeast Asian*
- ☐ Chinese
- ☐ Japanese
- ☐ Korean
- ☐ Indian
- ☐ Sri Lankan
- ☐ Other Asian*
- ☐ British/Irish
- ☐ Dutch
- ☐ Greek
- ☐ Italian
- ☐ German
- ☐ Other European*
- ☐ Middle Eastern
- ☐ Polish
- ☐ South Slavic
- ☐ Latin American
- ☐ African
- ☐ Other*

* Please specify your ethnic group if you have selected 'Other Pacific Peoples', 'Other European', 'Other Southeast Asian', 'Other Asian' or 'Other'.

_____

** If you identified your ethnicity as Māori, please state the name of your iwi (tribe) and/or rohe (iwi home area). You may identify up to six.

Iwi/Rohe 1 _____

Iwi/Rohe 2 _____

Iwi/Rohe 3 _____

Iwi/Rohe 4 _____

Iwi/Rohe 5 _____

Iwi/Rohe 6 _____

English Language Requirements

Is English your first language?

☐ No ☐ Yes

If 'No', what is your first language? _____

Have you ever undertaken English language study in New Zealand

☐ No ☐ Yes

N.B. If yes please complete the details below.

Name of school _____

Date started _____

Date finished _____

Applicants who have completed an academic qualification in a country where English is the first language can be considered for an exemption from providing English language test results.

☐ **I will take/have taken an English language proficiency test (Academic IELTS or TOEFL)**

Date to be taken _____

Name of test _____

Results if known _____

N.B. Please provide verified proof of recent results.

About You

What was your MAIN activity or occupation in New Zealand at the 1st of October preceding the start of this enrolment? Tick only one box.

- ☐ Secondary school student
- ☐ Non-employed or beneficiary (excluding retired)
- ☐ Wage or salary worker
- ☐ Self-employed
- ☐ University student
- ☐ Polytechnic student
- ☐ College of Education student
- ☐ House-person or retired
- ☐ Overseas (irrespective of occupation)
- ☐ Private Training Establishment student (e.*g.SOBL t/as Exercise Academy, Wananga student*)

N.B. If residing in a correctional facility please tick 'Non-Employed or beneficiary'.

Secondary School

What was the name of the last secondary school you attended? State 'Overseas' or 'Never attended' if applicable.

_____

When was your last year at secondary school? _____

What is the highest level of achievement you hold from secondary school? Tick only one box.

- ☐ No formal secondary qualification
- ☐ 14 or more credits at any level
- ☐ NCEA Level 1 or School Certificate
- ☐ NCEA Level 2 or 6th Form Certificate
- ☐ NCEA Level 3 or Bursary or Scholarship
- ☐ University Entrance
- ☐ Overseas qualification (Please specify overseas qualification)

_____

Tertiary Study

Have you ever enrolled in a tertiary institution since leaving school?

☐ No ☐ Yes

If 'Yes' please give the name of the institution.

_____

Please give the year of enrolment _____

If you have completed one or more tertiary qualifications, enter the name of the highest level qualification.

_____

Other

Will you be actively engaged in work/looking after a family while you are studying with us?

☐ No ☐ Yes

☐ Part-time work ☐ Full-time work

☐ Looking after family

Please describe your fitness background, including any sports, training experience, or short fitness courses you've completed.

_____

_____

_____

Please list any further information that you feel would benefit SOBL to know about you (optional).

_____

_____

_____

Identification

I understand that School of Business t/as Exercise Academy. needs to sight an original or *verified copy of my current passport and visa before my enrolment can be confirmed. Scanned and emailed copies are not acceptable.

If your name on your form of ID differs from the name you have now or have used on this application, please include proof of name change, e.g. marriage certificate. This must be the original document or a verified copy (see below). Scanned and email copies are not acceptable.

*Verified copy – This is a photocopy of your original document signed by an authorised person as being a true and accurate copy. This person could be a justice of the peace (JP), barrister or solicitor, court registrar or deputy registrar. For further information, please contact Immigration New Zealand.

Payment Options

Select payment type

☐ Money transfer

☐ Paypal

Fee Payment: Fee payment is to be arranged or paid in full to THE LEARNING CONNEXION LTD. before the programme start date. Please contact the accounts manager for information and assistance.

Protection Policy: All tuition fees (or funds of an equivalent value) are held in a NZQA approved Trust account.

N.B. Fees are subject to change without notice.

Use of Information and Privacy Statement

School of Business t/as Exercise Academy collects and stores information from this form to comply with government statutes and regulations. It is also used to manage the business of School of Business t/as Exercise Academy., including, but not limited to, internal reporting and administrative processes. School of Business t/as Exercise Academy may add your personal details (name, date of birth, gender and residency) to the National Student Index, which is managed by the Ministry of Education.

When necessary, by law, or to comply with the rules of School of Business t/as Exercise Academy., we will share information with government agencies such as the New Zealand Police, Department of Corrections, Ministry of Justice, Ministry of Social Development, Accident Compensation Corporation (ACC) and any other agencies that we are obliged to report to. Information may also be disclosed to other agencies, such as the Ministry of Education, Tertiary Education Commission and the New Zealand Qualifications Authority.

You may request to see any information held about you and request that any errors in that information be amended or noted. To do so, contact the enrolments officer.

School of Business t/as Exercise Academy. complies with the New Zealand Government's Privacy Act which requires us to collect, hold, handle, use, and disclose personal information in accordance with the twelve information privacy principles in the Act.

Go to privacy.org.nz

Declaration

By signing this enrolment form and enrolling with School of Business t/as Exercise Academy I agree that:

Fees

I undertake to pay all fees as they become due and to meet any late fees and collection charges associated with debt recovery. School of Business t/as Exercise Academy's policy on withdrawal and refund of fees may be obtained from the enrolment officer, or viewed on our website at: www.sobl.ac.nz/international-fees

Rules

I undertake to comply with the policies and published programme rules of School of Business t/as Exercise Academy with regard to attendance, academic integrity and progress, health and safety, conduct and use of information systems. These may be viewed on our website at: www.sobl.ac.nz/policies

Agent - By completing the 'agent' section in the enrolment form you are giving us permission to confer with your agent on your behalf.

Other

- I will receive School of Business t/as Exercise Academy email newsletter if I have provided an email address.
- Photos taken during my study may be reproduced by School of Business t/as Exercise Academy. for marketing, publicity and educational purposes.

SOBL t/as Exercise Academy - School Agreement

By signing this enrolment form I acknowledge I will abide by the agreement below:

1. Look after yourself. Look after others. Look after the environment.
2. Treat yourself with kindness and generosity. Take breaks as you need them. If you're getting stale, do something different. If you need support in any way, please ask.
3. Work with commitment and trust, even where things don't make sense or feel uncomfortable. Be aware that frustration always plays a part in good learning.
4. If a problem arises, tell someone who can take action (and if possible suggest a solution). If you don't communicate, it's your responsibility.
5. Focus on what works. Ask for what you want. Use your energy constructively. Avoid blame and justification.
6. Recognise that if you stay safe, nothing will ever change (learning demands risks and mistakes - view each mistake as a gift that will teach you something if you choose to own it and which will return if you reject it).
7. Work with patience, persistence and playfulness. Acknowledge that the only difference between success and failure is quitting.
8. If you feel you're not coping at any stage, talk about it with your tutor/mentor. Difficulties often signal that something useful is brewing.
9. Participate! The more you give, the more you will receive.
10. Be punctual.

I agree with the provisions set out above.

I agree that SOBL may use images of me or my work for educational purposes unless I request otherwise.

Sign Here

By signing this enrolment form I have received information to my satisfaction on the following:

- Cost of tuition and all other programme related costs
- Enrolment requirements and procedures

I confirm that I am the person named on this form.

I declare that, to the best of my knowledge, all of the information I have supplied with this enrolment form is true and complete. I agree to abide by the conditions described above and I consent to the disclosure of personal information as described above.

Name of applicant

_____

Applicant's signature

_____

Date _____

For those under the age of 18: SOBL has a policy to not enrol international students under the age of 18

Have You…?

☐ Filled in all of the required questions in this form?

☐ Attached your verified I.D. and any other documents if required?

☐ Prepared a portfolio to send to us with your application if you are enrolling for a Diploma level programme?

Confirmation of enrolment at School of Business t/as Exercise Academy. will be sent to you upon receipt of the above forms and documentation and once your enrolment has been processed.

If you have any questions, please do not hesitate to contact admissions.

I have provided or applied for the following documents

☐ Overseas passport

☐ Study visa and permit (required if studying in New Zealand)

☐ Document stating any name change (if applicable)

☐ Evidence of medical/health insurance (required if studying in New Zealand)

☐ Evidence of English language proficiency

Agent Details - If applicable

Agent ID

_____

Agent Name

_____

Agent Signature

_____

Agent Email

_____

Agent Telephone

_____

If you are completing this international Application Form as an international agent on behalf of a student, it is your responsibility to make the student aware and agree to the student declaration, refund policy and all the terms and conditions contained within this form. Your submission of this form is confirmation that this is understood and agreed by you. The student will be required to sign and agree to these declarations, terms and conditions as part of their enrolment process prior to the commencement of study.

Agent Stamp Here

Office Use Only

☐ Fee waived ☐ Restart fee applies

☐ Restart fee difference $ _____

☐ Scholarship _____

☐ Scholarship Amount $ _____

SOBL Ltd. representative

_____

Date _____

Once you have