OFFICE USE ONLY | Client no.: | Date received: / / | Application no.

July 2019 INZ 1017



Visitor Visa Application

for a temporary stay in New Zealand

Apply for your visa online - it's faster & easier

The fastest and easiest way to apply for a visitor visa is online. Once you have your documents prepared, it should take less than 15 minutes to complete the online application form.

To apply online, go to www.immigration.govt.nz/visit

Who uses this form

You should use this form if you are applying for a visitor visa as:

- · A tourist or visiting family or friends
- · A business visitor
- The dependent child of a New Zealand citizen or resident
- The dependent child of a work or student visa holder
- The parent or grandparent of a New Zealand citizen or resident

You can use this form to apply for a visa for a single person or a family. Family may include a principal applicant, partner and dependent children under 20.

Documents required

Use the checklist on page 2 of this form to find out which documents you must provide. If you have not provided the correct documents, we will return your application.

Immigration Advisers Licensing Act 2007

Under the Immigration Advisers Licensing Act 2007 it is an offence to provide immigration advice without being licensed or exempt. If your immigration adviser is not licensed when they should be, Immigration New Zealand will return your application.

For more information and to view the register of licensed advisers, go to the Immigration Advisers Authority website www.iaa.govt.nz or email info@iaa.govt.nz.

Lawyers provide immigration advice and are exempt from licensing under the Immigration Advisers Licensing Act 2007.

For more information and to view the register of immigration lawyers, go to the New Zealand Law Society website **www.lawsociety.org.nz**.

Refer to the Visitor Visa Guide

The *Visitor Visa Guide (INZ 1018)* contains important information about the requirements for a visitor visa and how to complete this form. It can be downloaded from **www.immigration.govt.nz/forms**.

When filling in this form, please write clearly in English using CAPITAL LETTERS.



| Ap | plication check | klist | | | Guardians of | | Evidence that you are the |
|-----|---|------------|--|--|--|---|---|
| | All applicants must provide: Completed, signed application form. | | | students | | parent or legal guardian of the student you are | |
| | | | | | | accompanying and evidence | |
| | Appropriate fee a | nd le | vies | | | | you provided care for the student in your home country. |
| | | | lour photographs | | Dependent | | Evidence of your |
| | · | | in the application. ument* for everyone | | children of | | relationship with your |
| | included in the ap | | , | | New Zealand citizens, | | parent or legal guardian. |
| | by Section E: Hea the application. | lth fo | certificates if required or everyone included in | | residents, or temporary visa holders | | If you are a dependent child of an Essential Skills visa holder, evidence that your parent is eligible to |
| | | | upport consisting of: | | | | support your visa – see |
| | Entry (INZ 1025 |), or | rship Form For Temporary | | | | www.immigration.govt.nz/ work-support-child. |
| | evidence showing in your name to | | ou have sufficient funds | | | | If you are a dependent child of a Religious Worker visa |
| | | | e the means to leave | | | | holder, either: |
| | New Zealand con | sistir | ig of: | | | | evidence that your |
| | a completed Sp Entry (INZ 1025) | | rship Form For Temporary | | | | parent is eligible to support your visa – see |
| | , . | | l out of New Zealand, or | | | | www.immigration.govt.nz/ |
| | | | ou have sufficient funds in | | | | work-support-child, or |
| | your name to p | urchand/or | ase travel out of New Zealand. dependent children are | | | | • a completed Sponsorship Form For Religious Workers (INZ 1190) indicating that |
| | • evidence of you and/or | ır rela | ationship with your partner | | | | the religious organisation sponsoring my parent will support me. |
| | | | e the parent or legal guardian ded in this application | | Parents and grandparents | Sponsorship Form for Temporary Entry | |
| | | | | | of New Zealand | | (INZ 1025) completed by your New Zealand child |
| App | olicants who are | | Must provide | | citizens or | | or grandchild. |
| | Tourists or visiting family or friends | | Evidence that you are a bona fide visitor, for example: | | residents | | Evidence of your relationship with your child or grandchild. |
| | | | evidence that you intend to return to your home country at the end of your stay evidence that you are genuinely visiting for the purpose of holidaying, | above list, refer to the Immigration New Zealand website, www.immigration.govt.nz/visit, or the Immigration New Zealand Operational Manual, www.immigration.govt.nz/opsmanual, for | | | |
| | | | sightseeing or visiting | | | | |
| | | | family or friends | | | nts to | o me by secure post at the |
| | | | Evidence of onward travel arrangements out of | address given at: | | | |
| | Visiting for | | New Zealand. Evidence of your employment | | 32 | | |
| | business | H | Evidence of the business | Dynneric — R2 | | | |
| | | | you will undertake in New Zealand | | | | |

*While you can provide a certified copy of your passport with your application, we highly recommend you provide your original passport. This will enable us to process your application faster and it may be needed to complete your application. Please note during the processing of an application an immigration officer may request any document, including your original passport.

| □o = | ther | | | | | | |
|----------------|---|-----------------------------|------------------|-----------------------|---------------------|-------------|-----------|
| Se | ction A Principal app | licant's perso | onal details | | | | |
| here | ch two colour passport-size e. The photographs must be e your full name on the bac | less than six mo | onths old. | | | 1 | |
| 0 | For more information about the q Sections A, C, and D: Personal de | | | | | | |
| A 1 | Name as shown in passport | | | 4.5cm | | 4.5cm | |
| | Family/last name | | | | | | |
| | | | | | 3.5cm | 3.5 | 5cm |
| | Given/first name(s) | | | ₩ | | ₩ | |
| | | | | | | | |
| ۸۵ | Preferred title Mr Mr | - Ma Ma | cc Dr oth | | 1 | | |
| AZ | | S MS MIS MII | SS Dr otr | er (specify) | | | |
| | | | | | | | |
| A3 | Other names you are know | n by or have eve | er been known by | | | | |
| A3 | | | | | | | |
| A3 A4 | Gender Male Fema | | er been known by | | I Y | | |
| A3 A4 A6 | | | | | l A | | |
| A4 A6 | Gender Male Fema | | | | l Y | | |
| A4 A6 | Gender Male Fema Town/city of birth | | | | L Y | | |
| A4 A6 | Gender Male Fema Town/city of birth Country of birth | | | | LY | | |
| A4 A6 | Gender Male Fema Town/city of birth Country of birth Passport details | | | | | date DIDIIM | [M][Y]Y]Y |
| A4 A6 A7 | Gender Male Fema Town/city of birth Country of birth Passport details Number | e A5 D | | | | date DIDIIM | [M][Y]Y]Y |
| A4 A6 A7 | Gender Male Fema Town/city of birth Country of birth Passport details Number Country | e A5 D | ate of birth DID | | Expiry | r/De facto | □ Divor |
| A8 A9 | Gender Male Fema Town/city of birth Country of birth Passport details Number Country Other citizenships you hold | e A5 D Single Married/in | ate of birth DID | J[M]MJ[Y]Y]Y | Expiry | r/De facto | |
| A8 A9 | Gender Male Fema Town/city of birth Country of birth Passport details Number Country Other citizenships you hold Partnership status | e A5 D Single Married/in o | ate of birth DID | Separated Engaged | Expiry | r/De facto | |
| A8 A9 | Gender Male Fema Town/city of birth Country of birth Passport details Number Country Other citizenships you hold Partnership status Ction B Contact deta | e A5 D Single Married/in o | ate of birth DID | Separated Engaged | Expiry | r/De facto | |
| A8 A9 | Gender Male Fema Town/city of birth Country of birth Passport details Number Country Other citizenships you hold Partnership status Ction B Contact details We prefer to contact you using en | e A5 D Single Married/in o | ate of birth DID | Separated Engaged | Expiry | r/De facto | |
| A8 A9 | Gender Male Fema Town/city of birth Country of birth Passport details Number Country Other citizenships you hold Partnership status Ction B Contact deta We prefer to contact you using en | e A5 D Single Married/in o | ate of birth DID | Separated Engaged | Expiry | r/De facto | |
| A8 A9 | Gender Male Fema Town/city of birth Country of birth Passport details Number Country Other citizenships you hold Partnership status Ction B Contact deta We prefer to contact you using en | e A5 D Single Married/in o | civil union | Separated Engaged | Expiry Partne Widow | r/De facto | |

| B3 | Name and address for communication about this application Same as address at B, Same as address at D, or as below Name of contact person | | | | | | | | |
|----|--|------------|-------------------|---------------------------------------|--|--|--|--|--|
| | Organisation name (if applicable) and address | | | | | | | | |
| | New Zealand Business Number (for New Zealand businesses only) For help search: www.nzbn.govt.nz | | | | | | | | |
| | Telephone (daytime) | ie (evei | ning) | | | | | | |
| | Email | | | | | | | | |
| B4 | Do you authorise the person stated at B3 to act on your behalf? | Yes | □No | | | | | | |
| B5 | Do you authorise all other licensed immigration advisers or persons organisation named at B3 to act on your behalf (if applicable)? | exempt | from licensing v | vho work for the | | | | | |
| | $oxedsymbol{oxed}$ Yes Note: the person identified at $oxed{	extst{B3}}$ will receive all communication from Immi | igration i | New Zealand. | | | | | | |
| | No Only the person indicated at B3 may act on my behalf. | | | | | | | | |
| В6 | Have you received immigration advice on this application? | | | | | | | | |
| 0 | You can find a definition of immigration advice at www.immigration.govt.nz/advice. | | | | | | | | |
| | $oxedsymbol{oxed}$ Yes Make sure that your immigration adviser completes Section J: Immigration a | adviser's | details. | | | | | | |
| | □No | | | | | | | | |
| В7 | Names and addresses of any friends, relatives, or contacts you have | e in Ne | w Zealand (if apı | olicable) | | | | | |
| | Name | | | | | | | | |
| | Address | | | | | | | | |
| | Relationship | Date | of birth (if know | n) DIDIMIMIKATA | | | | | |
| | Name | | | | | | | | |
| | Address | | | | | | | | |
| | Relationship | Date | of birth (if know | n) | | | | | |
| В8 | List all periods of employment, including self-employment | | | | | | | | |
| | Date from Date to Name of employer New Zeal (DD/MM/YY) (DD/MM/YY) Business N | | Location | Type of work/occupation/ iob title | | | | | |
| | | | | , | | | | | |

The New Zealand Business Number (NZBN) is for New Zealand businesses only. For help search: www.nzbn.govt.nz.

Section C Partner's personal details

If you selected 'Married/in civil union', 'Partner' or 'Engaged' in question [A9], you must complete this section, whether or not your partner is travelling with you.

If applicable, attach **two colour** passport-size photographs of your partner here. The photographs must be less than six months old. Write your partner's full name on the back of both photographs. Partner's name as shown in passport 4.5cm 4.5cm Family/last name 3.5cm Given/first name(s) Other names your partner is known by or has ever been known by For more information about this question, see 'Completing Sections A, C, and D: Personal details' in the Visitor Visa Guide. C4 Partner's date of birth DEDIMMINITY Y Partner's gender Male Female Partner's town/city of birth Partner's country of birth Partner's passport details Number Country For more information about this question, see 'Completing Sections A, C, and D: Personal details' in the Visitor Visa Guide. Other citizenships your partner holds

Section D Dependent children's personal details

You must complete this section with the details of each dependent child included in this application. If you wish to include more than four dependent children in your application, use the form *Additional Dependants for a Visitor Visa (INZ 1205)*.

| Visitor Visa (INZ 1205). | ise the form <i>Additional</i> | Dependants for a |
|---|--|------------------------|
| Dependent child one | | |
| Attach two recent colour passport-size photographs of the child here. The photographs must be less than six months old. Write the child's full name on the back of both photographs. | | |
| Child's name as shown in passport | 4.5cm | 4.5cm |
| Family/last name | | |
| Given/first name(s) | 3.5cm | 3.5cm |
| D2 Child's gender | | |
| D4 Child's country of birth | | |
| D5 Child's passport details | | |
| Number | | |
| Country | Expiry o | late DIDJ[M MJ[Y Y Y Y |
| Other citizenships child holds | | |
| f For more information about this question, see 'Completing Sections A, C, and D | : Personal details' in the <i>Visito</i> | r Visa Guide. |
| Dependent child two | | <u> </u> |
| Attach two recent passport-size photographs of the child here. The photograph must be less than six months old. Write the child's full name on the back of both photographs. | | |
| Child's name as shown in passport | 4.5cm | 4.5cm |
| Family/last name | | |
| | | |
| Given/first name(s) | 3.5cm | 3.5cm |
| D8 Child's gender | | |
| D10 Child's country of birth | | |
| D11 Child's passport details | | |
| Number | | |
| Country | Expiry | date |
| Other citizenships child holds | | |

| Dependent child three | A - | |
|--|-------------------|-------|
| Attach two recent passport-size photographs of the child here. The photographs must be less than six months old. Write the child's full name on the back of both photographs. | | |
| Child's name as shown in passport | 4.5cm | 4.5cm |
| Family/last name | | |
| Given/first name(s) | 3.5cm | 3.5cm |
| D14 Child's gender Male Female D15 Child's date of bird | th DIDIIMIMICATA | |
| D16 Child's country of birth | | |
| Di7 Child's passport details | | |
| Number | | |
| Country | Expiry | date |
| Other citizenships child holds | | |
| Dependent child four | A ~ | |
| Attach two recent passport-size photographs of the child here. The photograph must be less than six months old. Write the child's full name on the back of both photographs. | | |
| Child's name as shown in passport | 4.5cm | 4.5cm |
| Family/last name | | |
| Given/first name(s) | 3.5cm | 3.5cm |
| D20 Child's gender Male Female D21 Child's date of birt | th DIDIMIMICATATA | |
| Child's country of birth | | |
| D23 Child's passport details | | |
| Number | | |
| Country | Expiry | date |
| Other citizenships child holds | | |

| Se | ection E Health |
|------------|--|
| 0 | For more information about the questions in this section, see 'Completing Section E: Health' in the Visitor Visa Guide. |
| E 1 | Do you or any person included in this application have tuberculosis (TB)? \square Yes \square No |
| E2 | Do you or any person included in this application have any medical condition that requires, or may require, one of the following during your stay in New Zealand? |
| | Renal dialysis |
| E3 | If you have answered Yes to any of the questions in 🗈 and 🔁, please provide details. |
| | |
| E 4 | Are you or any person included in this application pregnant? |
| | Yes Date the pregnant applicant is due to give birth DDDMMMJYJYJY Go to E5 NO Go to E6 |
| E 5 | If the applicant who is pregnant intends to give birth in New Zealand, please indicate how the cost of maternity health services will be paid for and provide the relevant evidence. |
| | \square Not applicable as the applicant who is pregnant does not intend to give birth in New Zealand. |
| | The applicant who is pregnant is, or will be eligible for publicly funded maternity health services and has provided evidence of her eligibility. |
| | ☐ The applicant who is pregnant will cover the cost of maternity health services and has attached copies (not originals) that they have at least NZ\$9000 of funds available. |
| | ☐ The sponsor of the applicant who is pregnant has guaranteed to cover the cost and a completed <i>Sponsorship</i> Form for Temporary Entry (INZ 1025) is attached. |
| Me | dical certificates you must provide |
| to p | ect the appropriate option to indicate whether you and the other people included in this application are required provide medical certificates. Medical certificates must be less than three months old when you submit them to nigration New Zealand. |
| E6 | Are you applying for a parent/grandparent visitor visa? |
| | Yes You must complete a General Medical Certificate (INZ 1007) and Chest X-Ray Certificate (INZ 1096). Go to F10. |
| | No Go to E7. |
| E 7 | Will you be in New Zealand for more than six months in total? |
| | Yes You may have to provide a General Medical Certificate (INZ 1007) or Chest X-ray Certificate (INZ 1096) if indicated at E8. |
| | No You do not have to provide a chest X-ray certificate or a medical certificate. Go to Section F: Character |
| E8 | How long do you intend to stay in New Zealand? If you are in New Zealand, this includes time you have already spent here. |
| | More than six months but not more than 12 months. You must provide a Chest X-ray Certificate (INZ 1096) if you are from a place that is not listed as having a low incidence of tuberculosis. See notes below [59], then go to [510]. |
| | More than 12 months. You must provide a General Medical Certificate (INZ 1007) and a Chest X-ray Certificate (INZ 1096). |

| E 9 | Are you applying for a visitor visa as the dependent child of a New Zealand citizen or resident? |
|------------|--|
| | Yes You may be able to provide a Limited Medical Certificate (INZ 1201) rather than a General Medical Certificate (INZ 1007). |
| | Refer to the Visitor Visa Guide (INZ 1018) for further information. See notes below, then go to 10. |
| | No See notes below, then go to [510]. |
| | Notes: • Refer to Completing Section E: Health in the Visitor Visa Guide (INZ 1018) for the 'List of countries, areas and territories with a low |
| | incidence of tuberculosis'. |
| | Pregnant women and children under the age of 11 are not required to have an X-ray, unless a special report is required. You do not need to provide a chest X-ray certificate if you have provided one which was issued less than 36 months ago, with a previous |
| | Immigration New Zealand application, unless your health has deteriorated since your previous certificate was issued, or unless you have spent six consecutive months since your previous certificate was issued, in a place not listed as having a low incidence of tuberculosis. |
| | • You do not need to provide a medical certificate if you have provided one which was issued less than 36 months ago, with a previous |
| | Immigration New Zealand application, unless your health has deteriorated since your previous certificate was issued. |
| E10 | Tick the option below which applies to you: |
| | I am required to provide both a <i>Chest X-ray Certificate (INZ 1096)</i> and a <i>General Medical Certificate (INZ 1007)</i> |
| | or a Limited Medical Certificate (INZ 1201). Go to En |
| | I am only required to provide a <i>Chest X-ray Certificate (INZ 1096)</i> because: |
| | \square I am staying between six to 12 months and I am from, or have visited for more than three months, |
| | a place that is not listed as having a low incidence of tuberculosis, <i>Go to</i> [En] or |
| | ☐ I have previously provided a chest X-ray certificate; however: |
| | \square it was dated by the radiologist more than 36 months ago Go to $[En]$, or |
| | \square my health has deteriorated since my last certificate was issued, or |
| | \square I have spent six consecutive months since my previous certificate was issued, in a place not listed |
| | as having a low incidence of tuberculosis. Go to En . |
| | I am required to provide a <i>Chest X-ray Certificate (INZ 1096)</i> , however, as I am pregnant or under 11 years of age, I am not required to have an X-ray; and: |
| | \square I am not required to provide a <i>General Medical Certificate (INZ 1007)</i> at this stage; or |
| | \square I have therefore provided only a <i>General Medical Certificate (INZ</i> 1007) or a <i>Limited Medical Certificate</i> |
| | (INZ 1201). Go to E ^{II} |
| | ☐ I am required to provide a <i>General Medical Certificate (INZ 1007)</i> or a <i>Limited Medical Certificate (INZ 1201)</i> because: |
| | I have provided a chest X-ray certificate which was issued less than 36 months ago with a previous Immigration New Zealand application, or |
| | \square I have previously provided a medical certificate, however: |
| | $\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ $ |
| | my health has deteriorated since my last certificate was issued. Go to En |
| | I do not have to provide a Chest X-ray Certificate (INZ 1096) and either a General Medical Certificate (INZ 1007) or a Limited Medical Certificate (INZ 1201) at this stage because: |
| | I have provided a medical certificate and chest X-ray certificate which were issued less than 36 months ago, with a previous Immigration New Zealand application; and |
| | my health has not deteriorated; and |
| | • I have not spent six consecutive months in a place which is not listed as having a low incidence of tuberculosis since my previous certificate was issued. Go to Section F: Character |

| E11 | Tick the option that applies to you: Is a physician submitting your medical and/or chest X-ray certificate to Immigration New Zealand on your behalf? |
|-------|---|
| | Yes Has your physician supplied you with an eMedical Reference Code (NZER)? |
| | Yes Enter your eMedical Reference Code here: |
| | NO Enter the name of the clinic that is submitting your health information: |
| | No If the physician has returned the medical and/or chest X-ray certificate to you, then you will need to submit these with your visa application. |
| Se | ection F Character |
| All a | applicants must complete this section. |
| 0 | For more information about the questions in this section, see 'Completing Section F: Character' in the Visitor Visa Guide. |
| F1 | Have you, or anyone included in this application, been convicted at any time of any offence, including any driving offence? Please note that this includes any conviction(s) outside of New Zealand subsequently cleared or wiped by 'clean slate' legislation. Yes No |
| F2 | Are you currently: |
| | under investigation Yes No wanted for questioning Yes No facing charges Yes No for any offence in any country? |
| F3 | Have you, or has anyone included in this application, ever been: |
| | excluded |
| | from any country, excluding New Zealand? |
| F4 | Have you, or has anyone included in this application, ever been refused a visa/permit to visit, work, study or reside in any country, excluding New Zealand? \square Yes \square No |
| F5 | Have you, or has anyone included in this application, ever been a member of, or adhered to, any terrorist organisation? Yes No |
| F6 | 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? |
| | Yes No |
| | If you have answered yes to any of the questions above give full details. This includes full details of any charges, convictions and the sentence or penalty imposed. Continue on a separate piece of paper if necessary. |
| | |
| | |
| | |

| Pol | e certificates you must provide | _ |
|-----|--|---|
| | the appropriate option to indicate whether you are required to provide a police certificate with this application certificates must be less than six months old when you submit them to Immigration New Zealand. You must provide police certificates from your country of citizenship and any country you have lived in for five ears or more since the age of 17 if: You plan to be in New Zealand for 24 months or longer (including any time you have already spent in New Zealand), and either | |
| | you have not provided police certificates to Immigration New Zealand with a previous visa application, or you have provided police certificates to Immigration New Zealand and those certificates were issued mor than 24 months ago. | |
| F8 | ou do not have to provide police certificates if: | |
| | you are not intending to be in New Zealand for 24 months or longer, or you have already provided police certificates to Immigration New Zealand with a previous visa application an those police certificates were issued less than 24 months ago. | d |
| Se | tion G Visa type | |
| G1 | re you outside New Zealand? | |
| | Yes Estimated date of arrival in New Zealand DDDDMMJCYTYTY Estimated date of departure from New Zealand DDDMMJCYTYTYTY | |
| | No Estimated date of departure from New Zealand DIDIMIMINITY Y | |
| G2 | f you are applying for a visitor visa, what is the purpose of your visit to New Zealand? Visiting family/friends Holiday/vacation Conference/convention Short term study Sports, music or other event | |
| | Other (Please explain below) | _ |
| G3 | f you are applying for a limited visa, what is the 'express purpose' for visiting New Zealand? If you are applying or a further limited visa, also give the reasons why you need to stay in New Zealand for longer. | |
| | Data your formers numbered starts/started | _ |
| | Date your 'express purpose' starts/started DIDIMIMINITIALLY DISTRIBUTION OF THE PROPERTY OF TH | |
| A | Sate your 'express purpose' will be completed [D]D][M]M][Y]Y]Y]Y | |
| U | הכב נהב עופונטו עופם טעועפ (וועב וטוס) וטו וווטוב ווויטווומנוטוו מטטענ נהפ רפטנונגנוטווט ווווףטטפע טוו ווווווונפע עוסמט. | |

| G4 | Is your visa application dependent on another pe New Zealand? | son who is e | ither in New Zealand or holds a visa to be in |
|----|--|------------------|--|
| | No Go to Section H: Financial support while you are in N | w Zealand. | |
| | Yes Indicate the relationship with the other person. Not | you must provi | de evidence of that relationship. |
| | $\hfill\Box$ I am the guardian of a student visa holder. | | |
| | \square I am the parent or grandparent of a New Ze | aland citizen | or resident who has sponsored me. |
| | \square I am the dependent child of a New Zealand | itizen, reside | nt or temporary visa holder. |
| | Other (specify) | | |
| | Please provide details of the other person: | | |
| | Family/last name | Give | en/first name(s) |
| | | | |
| | Date of birth DIDIMIMICY IN IN | | |
| Se | ection H Financial support while you are | in New Ze | aland |
| 0 | For more information about this section and acceptable evic New Zealand' in the <i>Visitor Visa Guide</i> . | nce of funds, se | e 'Completing Section H: Financial support while you are in |
| H1 | Are you using your own funds for your visit to Ne | v Zealand or | are you being sponsored? |
| | | | funds* to support yourself and evidence you either d or have sufficient funds to leave New Zealand. |
| | Sponsored – attach completed <i>Sponsorship F</i> | orm for Temp | orary Entry (INZ 1025). |
| Se | ection l Declaration by applicant | | |

All of the people included in this application must complete this section.

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 will inform Immigration New Zealand of any relevant fact or change of circumstances (including a change in my employment or partnership status) that may (i) affect the decision on my application for a visa, or (ii) affect the decision to grant entry permission based on the visa for which I am applying.

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 return my application.

If I undertake a course of study while in New Zealand, I authorise Immigration New Zealand to provide information about my immigration status to my education provider, 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.

^{*}Sufficient funds for support means at least NZ\$1000 per month you intend to stay in New Zealand per person included in your application, or NZ\$400 if you have accommodation. Funds must be in your own name.

I authorise Immigration New Zealand to make any necessary enquiries about information on this form and/or accompanying documentation. 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, health care 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.

If my partner is included in this application, we declare we are living together in a genuine and stable partnership.

If I am granted a visa with the condition that I accompany a student, I agree to live with that student. I understand that both the student and I may be liable for deportation if I do not meet this condition.

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 provided all the documents required by the checklist on page 2. Signature of principal applicant Date DIDIMIMINIAN Date DIDIMIMITY Y Signature of partner Signature of parent or quardian if principal applicant is under 18 years of age Date DIDIMIMINITY Y Signature of accompanying dependent children over 18 years of age (if applicable) Child one Date DIDIMIMICALA Child two Child three Date DIDIIMIMILYIYIYI Child four Date DIDIMIMINITY IN IN Section J Immigration adviser's details This section must be completed by the applicant's immigration adviser. If the applicant has authorised all advisers within an organisation to act on their behalf at Bs, only the person named at B3 must complete this section. If the applicant does not have an immigration adviser, this section does not have to be completed. If you are a licensed adviser, please provide your licence details. **Licence type** full provisional limited List conditions specified in the register Licence number | 2,0, , , , , , , , , Go to Section K: Declaration by person assisting the applicant If you are exempt from licensing, tick one box below to show why you are exempt from licensing then go to Section K: Declaration by person assisting the applicant. I provided immigration advice in an informal or family context only, and I did not provide the advice systematically or for a fee. ☐ I have provided immigration advice in the course of my work (employed or volunteer) and that work exempts me from the requirement to be licensed. Indicate the reason for your exemption below. Lawyer with current New Zealand practicing certificate Community Law Centre Citizens Advice Bureau ☐ New Zealand Member of Parliament or staff ☐ New Zealand public servant ☐ Foreign Diplomatic/Consular (f) See www.immigration.govt.nz/adviserlicensing for more information about who is exempt from licensing.

Section K Declaration by person assisting the applicant

This section must be completed and signed by the applicant's immigration adviser, or by any person who has assisted the applicant by providing immigration advice, explaining, translating, or recording information on the form for the applicant. If the applicant does not have an immigration adviser, and no one helped the applicant to fill in this form, this section does not have to be completed.

If you are not exempt under the Immigration Advisers Licensing Act 2007, it is an offence for you to provide immigration advice without holding a license, and Immigration New Zealand will refuse to accept your client's application. More information about immigration adviser licensing can be obtained from the Immigration Advisers Authority website **www.iaa.govt.nz**, via email info@iaa.govt.nz or by telephone on 0508 422 422.

| Name and address of person assisting applic | ant. 🗌 Same as name and address given at 🖪, or 🔲 as below. |
|--|--|
| Family/last name | Given/first name(s) |
| | |
| Organisation name (if applicable) and address | 5 |
| | |
| New Zealand Business Number (for New Zeal For help search: www.nzbn.govt.nz | and businesses only) |
| Telephone (daytime) | Telephone (evening) |
| Fax | Email |
| or change or add any documents attached to | ned this form it is an offence for me to change or add further information, o the form, without making a statement identifying what information or ed and by whom. If I make these changes or additions, I must state on the ne reason they were made. |
| l understand that the maximum penalty for t of up to seven years. | this offence is a fine of up to NZ\$100,000 and/or a term of imprisonment |
| l certify that the applicant asked me to help th applicant agreed that the information provide | nem complete this form and any additional forms. I certify that the ed was correct before signing the declaration. |
| \square I have assisted the applicant as an interpr | eter/translator |
| \square I have assisted the applicant with recordir | ng information on the form |
| \square I have assisted the applicant in another wa | ay. Specify |
| I have provided immigration advice (as described in the section of the sec | efined in the Immigration Advisers Licensing Act 2007) and my details in e correct. |
| Signature of person assisting | Date DIDJIMIMJIYIYIY |

About the information you provide

Deciding whether you are eligible for a visa

Immigration New Zealand collects the information about you on this form to decide whether you are eligible for a visitor visa or a limited visa. We may also use the information to contact you for research purposes or to advise you on immigration matters.

Collecting the information is authorised by the Immigration Act 2009 and the Immigration Regulations made under that Act. You do not have to provide the information, but if you do not we are likely to decline your application.

Deciding whether you are eligible to board a flight to New Zealand

The information we collect may also be used to determine whether you are allowed to board a flight to New Zealand. We will not share your personal information with airline check-in agents; however, we will send a boarding message to the airline check-in agent based on the information you have provided in this form.

Immigration New Zealand may also share the information you have provided with other government agencies that are entitled to it by law, or with other agencies (as you have agreed in the declaration).

You are able to ask for the information we hold about you and have any of it corrected if you think it is necessary. The address of Immigration New Zealand is PO Box 1473, Wellington 6140, New Zealand. This is not where your application should be sent.

Other documents we may need

Sometimes we may ask for additional documents or information to consider with an application.

You may wish to send other documents or information so that we can consider it with this application. Send photocopies only (not original documents), as these documents will not be returned to you. If we need to see an original document, we will ask you to produce it later.

For more information

If you have questions about completing the form:

- see our website www.immigration.govt.nz/ contactus
- phone our call centre on 0508 558 855 (within New Zealand).

Section L

Paying your application fee and levies

To find out much to pay, where to send your application, and how long a decision may take, see www.immigration.govt.nz/fees.

Your application fee and levies

| Amount you are paying: |
|---|
| Amount |
| Currency |
| (e.g. NZD, USD, RMB) |
| Application number (office use only) |
| Preferred methods of payment |
| We recommend that you use one of the following methods of payment for better security and faster processing: |
| Bank cheque/bank draft |
| Credit card (choose one) |
| ☐ Mastercard ☐ Visa |
| SWITCH card (UK only) SWITCH card issue number |
| Name of cardholder |
| |
| Card number |
| |
| CVC/CVV number |
| Note: Your CVC/CVV number is the three-digit number found on the signature strip on the back of your credit card. |
| Expiry date DIDIMIMICALLY AND |
| Signature of cardholder |
| |
| Date DIDIMIMICALA AND THE DIDIMINATION OF THE |
| Other methods of payment |
| Personal cheque. Note that we will hold your application for 10 working days to allow the cheque to be cleared. |
| We do not accept money orders. |



