



▶ Enrolment - Personal Details

Family Name _____

Given Name(s) _____

Preferred Name _____

Date of Birth _____ Male Female

Home Address _____

_____ Postcode _____

Rural Delivery Rapid Number _____

(Please note that you must have your own contact phone number)

Home Phone (0) _____ Mobile (02) _____

Ethnicity

- European, Pakeha or NZ European
 NZ Maori Tribe/Iwi _____
 Samoan
 Cook Island Maori
 Tongan
 Chinese
 Tokelauan
 Asian
 Other (please specify) _____

Course Selection

- Karoro Certificate in Computing
 Karoro Certificate in Computing Level 2
 Karoro Certificate in Computing Level 3
 Karoro Certificate in Business Skills
 Special Course _____

Work & Income Client No _____

- DPB Widows Invalids

Special Requirements _____

Please enter the name, address and phone details of a close relation who is not living with you (these details will be used in the event that we have difficulty contacting you).

The Fine Print - Please read carefully.

- I authorise and consent to Work and Income New Zealand disclosing my contact details to Karoro Learning upon request by them throughout the duration of the course, and until the Satisfactory Return of any computer, printer, hardware, software or other equipment provided to me by them for the purpose of the course, or until such time as I have fully paid to them such sum as included in this form as being the value of the equipment supplied.
- I consent to Karoro Learning disclosing any information regarding my participation, progress and attendance at the course to Work and Income New Zealand at any time.
- I acknowledge and consent to the fact that I will be liable for the amount of \$750 being the value of equipment supplied to me, including a computer and printer, if the computer, the printer and other equipment provided is not returned by me, or by courier to Karoro Learning within ten (10) days of the final day of my course or ten (10) days after my withdrawal from this course, whichever date is earlier.
- I acknowledge that if the computer is not returned as per this agreement, then my debt with Karoro Learning will be registered with a Credit Agency for enforcement, and I shall be liable for any costs incurred in relation to the collection of this account.

Declaration

I declare that I have read and accept the terms of "The Fine Print" (above) and wish to be enrolled in the Learn@Home Computer Programme with Karoro Learning.

Student Signature _____

Date _____

NZ Qualifications Authority

Have you completed any computer unit standards? Yes No

NZQA NSI identity number (if known) _____

Are you known by any other name? _____

Student Check List

- Filled out all personal and contact details?
- Fire print section signed?
- Have a phone or mobile phone for contact?

Case Manager Details / Programme Co-ordinator

Name _____

Work & Income Branch _____

P.O. Box _____

Postcode _____

Direct Dial _____

Fax _____

Email _____

Would you like to receive a progress report for this client? Yes No

If payment is made under a name different from above please state: _____

Check List

- Hologram letter or letter of confirmation to verify funding of \$2350.00 attached or faxed?
- Signed enrolment?

Signature _____

Date _____

Office use: Assigned student ID number: _____