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# HOW TO COMPLETE YOUR APPLICATION FORM

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## SECTION ONE - PERSONAL DETAILS

The personal details must be filled out by you.

- 1.1 **Title:** Please choose the title appropriate to you. If "Other" please enter details e.g. Dr., Professor etc.
- 1.2 **Family Name:** Print your family name in full. If your family name on the form is different from the name on your supporting documents, then you must provide evidence of your change of name.
- 1.3 **First name(s):** Print all of your first names in full.
- 1.4 **Preferred name:** Print what you prefer to be called (e.g. Theo, Robbie, AJ).
- 1.5 **Date of birth:** Please complete day, month and year as on your evidence i.e. passport or birth certificate.
- 1.6 **Male or female:** Please tick the appropriate box.

## SECTION TWO - CONTACT DETAILS

- 2.1 **Permanent/home address:** If you would like your mail sent to a different address from the one you live at, please print the postal address on the form.
- 2.2 **Contact details:** Please print your mobile number, telephone number, e-mail address.
- 2.3 **Emergency contact person:** Please enter the name and telephone number of the best person to contact in the event of an emergency and/or when the *Incubator* is unable to contact you directly.

## SECTION THREE - CITIZENSHIP

- 3.1 Select which best describes your citizenship or status. If you select "Other", please write the details on the form. If you ticked New Zealand Permanent Resident, you will also need to indicate your country of citizenship.

## SECTION FOUR - SERVICE SELECTION

- 4.1 Please list the service(s) you wish to use at the *Incubator* and enter your intended start date e.g. February 2017.  
*Incubator* service categories, items, packages and fees are listed in the Services Table see [www.hbl-enterprise.co.nz/incubator](http://www.hbl-enterprise.co.nz/incubator)

## SECTION FIVE - PREVIOUS EDUCATION

- 5.1 **Secondary school:** Please list the secondary school(s) you have attended, and please specify in which country. If you have attended more than one secondary school, list the last two you attended. Please print the year that you last attended each school.
- 5.5 **Highest academic achievement from a secondary school:** Your highest achievement may be a "traditional" award such as School Certificate, or a number of credits/ NCEA at a certain level on the National Qualifications Framework. Your NZQA Record of Achievement shows you how many credits you have. If your answer is "Other", please identify the qualification on the form.
- 5.6 **Highest academic achievement from a**

**tertiary institution:** An institution could include Polytechnic, Institute of Technology, University, College of Education, Private Training Establishment or Wānanga. If you answered "Other", please enter the details on the form. Do not include applications in STAR, community or hobby classes.

## SECTION SIX - ETHNICITY

- 6.1 If you select "Other", please complete relevant details.
- 6.2 If you are of Māori descent please indicate the hapu(s) you have the affiliation to.
- 6.3 If your first language is neither English nor Māori, please specify if you have ever had your English language ability or proficiency tested. Please attach a certificate (see 6.6 on the Application form).

Clients currently in New Zealand who are applying for mainstream services may be eligible to have their English level assessed by the *Incubator* English language assessment. There will be a charge for this service.

## SECTION SEVEN - STATISTICAL INFORMATION

- 7.1 **Prior main activity:** Select from the list on the form your MAIN activity or occupation as at 1 October prior to the date on which your service commences.

## SECTION EIGHT - WORK AND RELEVANT EXPERIENCE

- 8.1 Please specify any work experience.

## SECTION NINE - IMPAIRMENT DETAILS

- 9.1 **Impairment:** If the effects of illness, injury and/or other impairment impact on or affect your performance while undertaking the service(s), please tick "yes" and complete the impairment section on the form.

## SECTION TEN - CRIMINAL CONVICTIONS

- 10.1 Please specify if you have ever been convicted of, or have a pending conviction, for any offence against the law (apart from minor traffic convictions).
- 10.2 If yes, please complete the consent to disclosure of information which can be found online at [www.hbl-enterprises.co.nz/incubator/forms](http://www.hbl-enterprises.co.nz/incubator/forms).

## SECTION ELEVEN - FEES

- 11.1 **Debit Credit –**  
Account Name: HOORI-BARSANTI LIMITED  
Bank: ANZ  
Bank Account Number: 06 0541 0687968 00  
Reference: First Name/Last Name/DOB
- 12.2 **Credit Card online payment –** log onto the *Incubator* with your log-on and password. Unfortunately we do not accept American Express or Diners Club cards.
- 12.3 The following information is a summary of the refund policy. For more information on the *Incubator* policies please refer to the Conditions of Contract for HBL Incubator Services.

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- Under all circumstances service variations to contract must be made formally in writing to the *Incubator*
- If the *Incubator* cancels a service, fees for that service will be refunded in full
- Service Categories begun before variations made formally in writing to the *Incubator* may not be refundable.

Refunds may be given outside of the normal criteria for extraordinary circumstances. This will require the approval of the Lead Coordinator. All requests must be made in writing.

## SECTION TWELVE - DECLARATION

- 12.1 **Privacy:** The *Incubator* collects and stores information from this form to comply with the requirements of Agencies who support particular Clients through scholarships and prizes, payment of fees or other awards (if you are a recipient of one of these awards). In addition, when required by statute, The *Incubator* releases information to Government agencies such as the New Zealand Police, Department of Justice, Ministry of Social Development, and the Accident Compensation Corporation (ACC).

## WHAT HAPPENS NOW?

We'll let you know when we receive your application, and contact you if we need further information.

## INTERVIEWS AND ADDITIONAL DOCUMENTATION

Depending on the service you have applied for, you may also need to supply additional information (portfolio, CV) or attend an interview.

## CHECKING THE STATUS OF YOUR APPLICATION

If you need to know anything about your application contact the *Incubator*.

## WHAT CAN DELAY AN APPLICATION

- Incomplete application form received
- The application form is not signed or dated
- Required documentation has not been supplied
- Required documentation has not been verified

## APPLICATION OFFER

If your application is successful you will receive a Conditions of Contract for HBL Incubator Services. It is important that you respond by the specified date as offers expire and you may lose your place on the service.

## FEES INFORMATION

By signing and returning the Conditions of Contract for HBL Incubator Services you are formally accepted for the service and therefore liable for the associated fees.

## FEES AND REFUND INFORMATION

The following information is a summary of the refunds policy. For more information on the *Incubator* policies please refer to [www.hbl-enterprises.co.nz/incubator](http://www.hbl-enterprises.co.nz/incubator).

- You can only withdraw from your service(s) by completing and returning a signed and dated Change to Application or Withdrawal form. The form can be found online at [www.hbl-enterprises.co.nz/incubator/forms](http://www.hbl-enterprises.co.nz/incubator/forms)
- The date of your withdrawal is the date your signed and dated Change to Application or Withdrawal form is received by the *Incubator*
- It is **your responsibility** to ensure a Change to Services or Withdrawal form is submitted
- If the *Incubator* cancels a service, remaining services fees will be refunded in full

## DOCUMENTS THAT YOU MUST SUPPLY

**If this is the first time you have applied for a service(s) at the *Incubator*, please attach to your Application Form a verified copy of either:**

- Your birth certificate or passport for New Zealand, Niue, Tokelau or the Cook Islands; or
- A certificate of citizenship for New Zealand, Niue, Tokelau or the Cook Islands

Clients may supply other evidence of their legal name, such as a marriage certificate, although evidence of citizenship will still be required.

A whakapapa statement may be provided by Students who identify themselves as Māori if they have a justifiable reason for not providing a birth certificate, for example, if the birth was not registered. In that case, Clients may provide an original or verified copy of a statement of whakapapa counter signed by a kaumatua as evidence of their identity and citizenship.

A verified copy is a photocopy of the original document, which is signed by a solicitor, Justice of the Peace or authorised *Incubator* person e.g. a Client consultant in the *Incubator*, as being a true copy of the original.

**To find what additional forms are required for your application go to [www.hbl-enterprises.co.nz/incubator](http://www.hbl-enterprises.co.nz/incubator).**

## CLIENT CHECKLIST - COMPLETE THE FOLLOWING...

Read the Application to Enrol Guide

Complete all appropriate sections in this form

Attach your **verified** copies of documents proving Legal Name, Date of Birth and Residency status? (DO NOT send originals, only **verified** copies)

Attach your results if required by service entry criteria

Attach additional documentation as required for your specific service of choice

Sign and date this form

## WHERE TO SEND THIS FORM

Please return this form to :

The Incubator  
PO BOX 106  
PAHIATUA 4941

## FOR MORE INFORMATION

If you need help or assistance in filling out this form, please contact the *Incubator*. Our friendly staff will be able to assist you through the application process and answer any queries you may have.

Phone: 06 3766 004  
Mobile: 027 949 6837  
Email: [incubator@hbl-enterprises.co.nz](mailto:incubator@hbl-enterprises.co.nz)  
Online: [www.hbl-enterprises.co.nz/incubator](http://www.hbl-enterprises.co.nz/incubator)

# APPLICATION FORM

APPLY ONLINE

Did you know that you can apply online instead of completing this form? Save time and paperwork by visiting [www.hbl-enterprises.co.nz/incubator](http://www.hbl-enterprises.co.nz/incubator)

WHO SHOULD COMPLETE THIS FORM?

- Applicants who are applying to The Incubator for the first time

WHO SHOULD NOT COMPLETE THIS FORM?

- International Applicants
- Current or returning clients or past applicants - please request a Returning Client Form from [www.hbl-enterprises.co.nz/incubator/forms](http://www.hbl-enterprises.co.nz/incubator/forms)

SECTION ONE - PERSONAL DETAILS

1.1 Title

☐ Mr

☐ Mrs

☐ Ms

☐ Miss

Other

1.2 Surname or Family Name (as it appears on your passport, birth certificate, marriage or civil union certificate) *Ingoa Whā nau*

1.3 First Name(s) *Ingoa tuatahi*

1.4 Preferred First Name

1.5 Date of Birth

d

d

m

m

y

y

1.6 Gender

Male

☐

Tā ne

Female

☐

Wahine

SECTION TWO - CONTACT DETAILS

Please ensure this is kept up-to-date at all times and advise us of any changes.

2.1 What is your **permanent/home address**?

Unit number/street number and name

Suburb

City/Town

Postcode

Tick if this is your main postal address

☐

2.2 What is/will be your **address while engaging services** if different to above? Unit number/street number and name

Suburb

City/Town

Postcode

Tick if this is your main postal address

☐

2.3 How can we contact you?

Home

Mobile

Work

Email

2.4 Who is your **emergency contact**?

Name

Relationship to you

Telephone

OFFICIAL USE ONLY

I

D

N

U

M

B

E

R

SECTION THREE - CITIZENSHIP

We require proof of citizenship and eligibility to study from all new applicants to The Incubator.

3.1 Please tick one from A, B or C. In the right hand column next to the box you have ticked, please indicate the document relevant to you.

A

☐

New Zealand Citizen

☐ New Zealand birth certificate

☐ New Zealand passport

☐ Certificate of NZ citizenship or letter of confirmation

☐ A statement of Whakapapa, stating your full name and date of birth

☐ Birth certificate with place of birth stated as Cook Islands, Niue or Tokelau

B

☐

New Zealand Permanent Resident

☐ Passport with New residence stamp

My country of residence is:

C

☐

Australian Citizen or Permanent Resident

☐ Australian birth certificate

☐ Australian passport

☐ Passport with Australian resident stamp

Note: Applicants whose name is different from that which is stated on a birth certificate or passport must also provide evidence of the legal name change.

SECTION FOUR - SERVICE SELECTION

4.1 Please state which service(s) you are applying for at the Incubator in order of preference. Service codes can be found in The Incubator's career and service guides, flyers or on the website.

PREFERENCE 1

SERVICE CATEGORY:

SERVICE ITEM:

PACKAGE/WORKSHOP:

START DATE:

month/year

PREFERENCE 2

SERVICE CATEGORY:

SERVICE ITEM:

PACKAGE/WORKSHOP:

START DATE:

month/year

PREFERENCE 3

SERVICE CATEGORY:

SERVICE ITEM:

PACKAGE/WORKSHOP:

START DATE:

month/year

Please check the website, [www.hbl-enterprises.co.nz/incubator](http://www.hbl-enterprises.co.nz/incubator) for additional requirements

SECTION FIVE - PREVIOUS EDUCATION

5.1 Please state the secondary schools you have attended while in New Zealand or overseas:

SECONDARY SCHOOL	START YEAR	END YEAR
1		
2		
3		

5.2 Did you attend **secondary school** within the last 10 years?

☐ Yes ☐ No - *go to question 5.5*

5.3 Are you currently waiting for results?

☐ Yes ☐ No

5.4 Please attach a verified copy of your last official school results

(NCEA, CIE, ID, School Certificate, Sixth Form Certificate and Bursary results if available).

5.5 What is the highest level of achievement you hold from a secondary school? Please tick one only

- ☐ No formal secondary school qualifications
- ☐ 14 or more credits at any level
- ☐ NCEA Level 1 or School Certificate
- ☐ NCEA Level 2 or Sixth Form Certificate
- ☐ University Entrance (prior to 1986)
- ☐ NCEA Level 3, Higher School Certificate, Bursary or Scholarship
- ☐ International Baccalaureate
- ☐ Cambridge International Examinations
- Please write your CIE candidate code (if known):
- 
- ☐ Other qualification (incl overseas):

5.6 Have you ever been enrolled in a **tertiary institution** in New Zealand or overseas?

☐ Yes ☐ No - *go to section 6*

5.7 Please state the tertiary institutions you have attended while in New Zealand or overseas including the start and finish dates, the name of the qualification and whether you successfully completed this qualification.

INSTITUTION	START	FINISH
1	yyyy	yyyy
QUALIFICATION ENROLLED IN:		
DID YOU COMPLETE THE ABOVE QUALIFICATION? <input type="checkbox"/> YES <input type="checkbox"/> NO		

INSTITUTION	START	FINISH
2	yyyy	yyyy
QUALIFICATION ENROLLED IN:		
DID YOU COMPLETE THE ABOVE QUALIFICATION? <input type="checkbox"/> YES <input type="checkbox"/> NO		

INSTITUTION	START	FINISH
3	yyyy	yyyy
QUALIFICATION ENROLLED IN:		
DID YOU COMPLETE THE ABOVE QUALIFICATION? <input type="checkbox"/> YES <input type="checkbox"/> NO		

5.8 What was the first year that you were enrolled in a tertiary institution?

5.9 What is the highest tertiary qualification you hold? (please tick one)

- ☐ No tertiary qualification
- ☐ Vocational qualification (Trade, NZ Certificate)
- ☐ Certificate
- ☐ Diploma
- ☐ Graduate certificate/diploma
- ☐ Bachelors degree
- ☐ Postgraduate qualification
- ☐ Masters
- ☐ Other

5.10 Will you be applying for a Transfer of Credit?

☐ Yes ☐ No

SECTION SIX - ETHNICITY AND LANGUAGE

6.1 Please indicate which ethnic group(s) you belong to. You may tick up to three options:

- |  |  |   |
|--|--|---|
| <input type="checkbox"/> NZ European   | <input type="checkbox"/> New Zealand Maori | <input type="checkbox"/> Cook Island    |
| <input type="checkbox"/> Mā ori Samoan | <input type="checkbox"/> Tongan            | <input type="checkbox"/> Niuean         |
| <input type="checkbox"/> Tokelauan     | <input type="checkbox"/> Fijian            | <input type="checkbox"/> African        |
| <input type="checkbox"/> British/Irish | <input type="checkbox"/> Dutch South       | <input type="checkbox"/> Greek          |
| <input type="checkbox"/> Polish        | <input type="checkbox"/> South African     | <input type="checkbox"/> Italian        |
| <input type="checkbox"/> German        | <input type="checkbox"/> Australian        | <input type="checkbox"/> Filipino       |
| <input type="checkbox"/> Cambodian     | <input type="checkbox"/> Vietnamese        | <input type="checkbox"/> Chinese        |
| <input type="checkbox"/> Indian        | <input type="checkbox"/> Sri Lankan        | <input type="checkbox"/> Japanese       |
| <input type="checkbox"/> Korean        | <input type="checkbox"/> Middle Eastern    | <input type="checkbox"/> Latin American |

Other

6.2 If you are of Maori descent, please state the hapu(s) you have the affiliation to.

  
  

6.3 Is English, Mā ori or New Zealand Sign Language your first language?

☐ Yes - *go to section 7* ☐ No

6.4 If you answered **no above**, what is your first language?

6.5 Have you gained any qualifications taught in English from a New Zealand secondary school or tertiary institution?

☐ Yes ☐ No

6.6 If English, Mā ori or New Zealand Sign Language is **not** your first language and you have **not** gained a qualification at a New Zealand secondary school or tertiary institution, you will need to have completed one or more of the following tests within the last two years: IELTS (academic), TOEFL or Cambridge Certificate.

6.7 If you have completed one of the above tests please attach a verified copy of your results (not required if applying for an English Language service).

SECTION SEVEN - STATISTICAL INFORMATION

7.1 Which activity best describes your activity as at 1 October prior to the year you commence study? (please tick one)

- |  |   |
|--|---|
| <input type="checkbox"/> Secondary school Student                  | <input type="checkbox"/> Wage/salaried worker |
| <input type="checkbox"/> College of Education Student              | <input type="checkbox"/> University Student   |
| <input type="checkbox"/> Non-employed/beneficiary<br>(not retired) | <input type="checkbox"/> Houseperson/retired  |
| <input type="checkbox"/> Wananga                                   | <input type="checkbox"/> Self employed        |
| <input type="checkbox"/> Polytechnic Student                       | <input type="checkbox"/> Overseas             |
| <input type="checkbox"/> Private Training Establishment Student    |   |

7.2 Why did you decide to study at The Incubator? (please tick one)

- ☐ Visit to school by The Incubator Student Recruitment
- ☐ Representative The Incubator website
- ☐ Information from a secondary school
- ☐ Information from a family member or friend
- ☐ The Incubator Huge Day Out (Open Day)
- ☐ Advertising (e.g Billboard, newspaper, radio etc)
- ☐ Expo
- ☐ Career and service guide(s)

## SECTION EIGHT - WORK AND RELEVANT EXPERIENCE

- 8.1 Please state any relevant employment experience that may support your application, e.g. volunteer work.

EMPLOYER	START DATE	FINISH DATE
1		
POSITION/NATURE OF WORK:		
2		
POSITION/NATURE OF WORK:		
3		
POSITION/NATURE OF WORK:		

- 8.2 Please state any relevant workshops, courses or seminars you have attended that may support your application.

NAME OF COURSE/WORKSHOP	START DATE	FINISH DATE
1		
2		
3		

## SECTION NINE - IMPAIRMENTS

In order for The Incubator to provide the appropriate information and support to Clients with impairments, Clients are asked to disclose any impairment which may impact their service.

- 9.1 Do you live with the effects of a significant injury, long term illness, or disability?

☐ Yes ☐ No - go to section 10

- 9.2 If yes, please indicate by ticking the appropriate box below:

<input type="checkbox"/> Deaf	<input type="checkbox"/> Hearing impairment
<input type="checkbox"/> Blind	<input type="checkbox"/> Vision impairment
<input type="checkbox"/> Specific learning disability	<input type="checkbox"/> Medical
<input type="checkbox"/> Head injury	<input type="checkbox"/> Mental health
<input type="checkbox"/> Mobility/physical impairment	<input type="checkbox"/> Speech
<input type="checkbox"/> Temporary impairment	
<input type="checkbox"/> Other - please state:	

## SECTION TEN - CRIMINAL CONVICTIONS

The Incubator must make you aware that if you have a criminal record, and you are unable to complete a practical component of the service. Any Students enrolling with a criminal record should contact the Lead Co-ordinator. See [www.hbl-enterprises.co.nz/incubator](http://www.hbl-enterprises.co.nz/incubator) for contact details.

- 10.1 Have you ever been convicted of or have a pending conviction for any offence against the law (apart from minor traffic convictions)?

☐ Yes ☐ No

- 10.2 If yes, please complete the consent to disclosure of information which can be found online at [www.hbl-enterprises.co.nz/incubator/forms](http://www.hbl-enterprises.co.nz/incubator/forms).

## SECTION ELEVEN - FEES

If the Incubator confirms your application you must pay ALL fees (service fees as set by the Incubator and service costs) in full prior to the start date of your service.

Even if you do not participate in the services you are still liable to pay all fees to the Incubator, unless the Incubator receives a completed and signed Variation of Contract.

- 11.1 How do you intend to pay your fees? (please tick one)

☐ Cheque/EFTPOS/Cash

☐ Direct Credit

☐ Training Incentive Allowance

Contact your local Work and Income office. You must complete the application first and submit your Incubator invoice to Work and Income for payment. If your TIA application is not approved by WINZ, you are still liable for all fees.

☐ Credit Card or Credit Card online

For online payments log onto Student at The Incubator then using your log-on and password, go to online finance/online payment. (Unfortunately we do not accept American Express or Diners Club cards).

☐ Visa ☐ Mastercard

Card Number

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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Card Holder's Name

Card Holder's Signature

Expiry date  /

Amount \$

☐ Organisation/Company paying

If for any reason the organisation/company does not pay your fees, then you are still liable and must pay the fees yourself.

Organisation/Company Name

Authorised Contact Person

Postal Address

  

Telephone Number

Purchase Order Number

Signature

## SECTION TWELVE - STUDENT DECLARATION - ALL CLIENTS MUST READ THE FOLLOWING INFORMATION AND SIGN

- 12.1 I will make myself familiar and comply with provisions of the Conditions of Contract for HBL Incubator Services obtainable from The Incubator website.
- 12.2 I authorise disclosure on the understanding that The Incubator will observe the general conditions governing the release of information, as set out in the Privacy Act 1993 (refer to 12.1 in the Application Guides.) You may see any information held about you and amend any errors in that information, to do so contact The Incubator.
- 12.3 I authorise any agency holding the source of any information I have provided on this form to release that information to The Incubator upon request.
- 12.4 I declare that the information I have supplied in this form and any attached documentation is true and complete and I acknowledge that the Incubator may suspend my application if false information has been supplied or required information is not supplied by the due date.
- 12.5 I understand that The Incubator may contact me via telephone, post, email and/or text message regarding my application or The Incubator's services, news or events.

Note: The Incubator does not accept photocopied, scanned or faxed signatures

Your signature:

Date: