

Enrolment Application and Agreement Leadership and Business qualifications

Please type or write details clearly. All sections must be completed.

SECTION A: Applicant Details (State your full LEGAL name as it appears on your birth certificate or passport)

First name: _____

Middle name/s: _____

Surname: _____

Preferred name: _____

Previous full legal name: _____

If you have changed your name by marriage, civil union, deed poll, or statutory declaration, you may be registered with the New Zealand Qualifications Authority under your previous name.

Gender: Male Female Other Prefer not to say

Date of birth: _____ Country of Birth: _____

NZQA NSN: *(If known)* _____

Street address: _____ Suburb: _____

Town/City: _____ Postcode: _____

Have you lived in this address in the last 12 months? Yes No

If not, please provide the previous address:

Email: *(Please print clearly)* _____

Mobile: *(Please print clearly)* _____

Ethnicity: (Select the ethnic group that you identify with – for statistical purposes only. You can choose up to 3 ethnicities.)

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

*Iwi – If you selected Māori above, please state the name(s) of your Iwi: *(This information may be shared with your Iwi, if stated)*

I don't know I don't identify with an Iwi

Residency and Citizenship: (Please tick one)

Proof of Identity: *(Clear copies of documentation as per below must be attached)*

NZ Citizen – NZ Born – Driver Licence or Birth Certificate or NZ Passport

NZ Citizen – Overseas Born – NZ Passport or Birth Certificate AND Proof of Citizenship

NZ Resident/Permanent Resident – Passport AND Proof of Residency

Australian Citizen – Australian Passport

Australian Permanent Resident – Passport AND Proof of Residency

MAST Training Advisor or your company Workplace Trainer have sighted the original copy of the documents.

SECTION B: Applicant History (Required for TEC statistical purposes)

Last secondary school attended in NZ: _____

Last calendar year at NZ secondary school: _____

Please specify the country if you attended school outside of New Zealand: _____

First tertiary study year _____

Highest secondary school qualification achieved (tick one):

No formal secondary school qualification NCEA Level 2 or 6th Form Certificate

14 or more credits at Level 1 NCEA Level 3 Bursary or Scholarship

NCEA Level 1 or School Certificate University Entrance

Overseas Qualification *(Please specify and provide copies of qualification/results)*

Highest tertiary qualification achieved (tick one):

No Qualification Master's Degree

Certificate Level: _____ Post Graduate Diploma/Certificate, Bachelor Honours

Diploma Level: _____ Doctorate

Bachelor's Degree

Learning Skills Assessment:

(Your programme will contain knowledge and skill assessment that may include numeracy and literacy)

If English is not your primary language - please specify your first language:

Do you have a physical disability that may affect you in the workplace? Yes No

If yes, please specify:

Are you aware of anything that may have impacted your learning at school? This could be a literacy or numeracy issue or other learning disability. Yes No

If yes, please specify your learning challenge or issue:

Are there any cultural needs that MAST may need to be aware of to support your learning? Yes No

If yes, please specify:

Previous Employment or Activity:

Secondary School student

Self employed

College of Education student

Overseas

Wage or salary worker

Private Training Establishment student

House person or retired

University student

Polytechnic student

Non-employed or beneficiary

Wānanga student

SECTION C: Employer Details

Company

Name: _____

Trading as: *(If applicable)* _____

Street Address: _____

Suburb: _____

Town/City: _____ Postcode: _____

Phone: _____

Primary contact details (Senior Manager or Business Owner)

Name: _____

Job Title: _____

Mobile Phone: _____

Direct Email: *(NOT a generic company email)* _____

Workplace trainer details

Name: _____

Job Title: _____

Mobile Phone: _____

Email: *(Preferably not a generic business email, but a direct email for yourself)* _____

SECTION D: Training Fees (Check the last page for the common name of the programme)

Name of Programme: _____

Programme Fee: _____

Block Course Fee: _____

SECTION E: Payments

The Programme fees are outlined on the last page of this document.

MAST Academy will invoice these fees prior to the start of each course/programme to the employer for work-based programmes.

The employer and the learner acknowledge this is a work integrated programme of learning. The programme includes workshops and the employer agrees the learner must attend the workshops and that the learning can be applied in the workplace.

Employer: Agrees to pay Programme/Apprenticeship costs as outlined on the last page of this document.

Employer name: *(Accounts in-charge)*

Company name:

Email address: *(Accounts in-charge)*

Employer signature:

Date:

SECTION F: Withdrawal and Fee Refund Policy

All withdrawals must be in writing and signed by both the employer and apprentice.

Within 30 days of enrolment	Full refund less 20% administration fee.
After 30 days of enrolment up to 12 months	Pro-rata on monthly rate plus 20% administration fee
Post 12 months of enrolment	No refund

For short courses of under 6 months duration, the following withdrawal and refund policy applies.

Within 30 days of enrolment	Full refund less 20% administration fee.
After 30 days of enrolment up to 12 months	Pro-rata on monthly rate plus 20% administration fee
No show at course with no legitimate reason	No refund

Learner and employer agree that any programme of learning/course where there is an expected duration/end date, any assessments/ assignments not completed within a 90-day period of the designated duration will attract a \$100 + GST per month over-duration fee. This applies while you are active in the programme.

MAST Academy agrees to discuss and provide the learner and the employer with an individual learning plan outlining the programme to be completed to gain the qualification.

MAST Academy agrees to register any credits and course completion with NZQA within 90 days of the assessment being marked as competent/achieved.

The learner agrees to complete satisfactorily 70 credits (minimum) per year. Failure to do so may result in withdrawal from the programme with no refund being applicable.

The learner/apprentice declares that all work they complete in the workplace as part of any assessment/assignment is their own work.

SECTION G: Intellectual Property – Training Resources and Assessments (Digital or hard copy)

All training resources and assessments whether in digital or hard copy remain the property of MAST Academy and cannot be reproduced in any format without written permission from the MAST Academy Training Manager.

Plagiarism in any form is not acceptable. Plagiarism includes the use of AI or copying from a source document without fully referencing. Use your own words to answer questions. Failure to use your own words or cite/reference properly may result in misconduct and may mean immediate cancellation from the programme with no refund of fees.

I declare that all work produced will be my own
(Name of learner):

I agree to MAST Academy collecting and sharing my personal information with NZQA, TEC, facilitator engaged by MAST Academy, the employer and any other government department as required by law. I agree that my name and image may be published in MAST Academy promotional material on completion of the qualification.

Learner signature: _____ Date: _____

Employer signature: _____ Date: _____

Consultation Approval

If you are under the age of 16 you must gain approval from a parent, guardian or lawyer to enrol in a training programme with MAST Academy.

Parent/Guardian name: _____

Parent/Guardian signature: _____ Date: _____

Email your completed enrolment application to enrolments@mastacademy.com

When your enrolment has been processed your designated MAST Training Advisor will be in contact with you to get you started. Enrolment is subject to approval.

FOR MAST ONLY

MAST Academy Training Advisor:

Photo ID received _____

NSI Verified _____

Immigration/Visa confirmation received *(if applicable)* _____

Enrolment processed _____

Start date _____

Projected end date *(if known)* _____

Confirmation sent

Learner: _____

Employer: _____

Programmes and Fees

Programme	Level	Credits	Duration (Months)	Total Programme Fee (+GST)* Subject to change
Learning To Lead - NZ Certificate in Business - Introduction to Leadership	3	45	6 months	\$1125.00

* Total programme fee includes workshop delivery and any course material..

Revised October 2024.