NEW ZEALAND VISA APPLICATION FORM

PERSONAL INFORMATION Section A A1 FAMILY NAME: ______ A2 MIDDLE NAME:_____ A3 FIRST NAME: ______ A4 GENDER: _______ A5 DATE OF BIRTH A6 TOWN/CITY OF BIRTH: A7 PASSPORT NUMBER: _____ A8 COUNTRY OF PASSPORT : A9 DATE OF EXPIRY: _____ A10 MARITAL STATUS: CONTACT INFORMATION Section B B1 CURRENT RESIDENTIAL ADDRESS: B2 CELL PHONE NUMBER: B3 TELEPHONE NUMBER: **B4 EMAIL ADDRESS:** NAMES /ADDRESSES OF FRIENDS.RELATIVES OR CONTACTS (IF APPLICABLE) B5 FAMILY NAME: B6 FIRST NAME: B7 HOME ADDRESS: B8 RELATIONSHIP: B9DATE OF BIRTH: **EMPLOYMENT** B10 CURRENT OCCUPATION: B11 EMPLOYER'S NAME: B12 EMPLOYER'S ADDRESS: B13 DATE FROM(DD/MM/YY): B14 DATE TO (DD/MM/YY): _____ FOR STUDENT 23.NAME OF SCHOOL: 24.NAME OF ADDRESS: PARTNER'S PERSONAL DETAILS Section C C1 FAMILY NAME: C2 FIRST NAME: C3 GENDER: ______ C4 DATE OF BIRTH: C5 TOWN/CITY OF BIRTH: C6 COUNTRY OF BIRTH:

C7 PASSPORT NUMBER:	
C8 COUNTRY OF PASSPORT:	
C9 EXPIRY DATE:	
C10 IS YOUR PARTNER INCLUDED IN THIS APPLICATION?YES	NO
DEPENDENT CHILDREN'S PERSONAL INFORMATION	
Section D: If travelling with parents below 18 years old	
DEPENDENT CHILD ONE	
D1 FAMILY NAME:	
D2 FIRST NAME:	
D3 GENDER:	
D4 DATE OF BIRTH:	
D5 COUNTRY OF BIRTH:	
D6 PASSPORT NUMBER:	
D7 COUNTRY OF PASSPORT:	
D8 EXPIRY DATE:	
DEPENDENT CHILD TWO	
D9 FAMILY NAME:	
D10 FIRST NAME:	
D11 GENDER:	
D12 DATE OF BIRTH:	
D13 COUNTRY OF BIRTH:	
D14 PASSPORT NUMBER:	
D15 COUNTRY OF PASSPORT:	
D16 EXPIRY DATE:	
DEPENDENT CHILD THREE	
D17 FAMILY NAME:	
D18 FIRST NAME:	
D19 GENDER:	
D20 DATE OF BIRTH:	
D21 COUNTRY OF BIRTH:	
D22 PASSPORT NUMBER:	
D23 COUNTRY OF PASSPORT:	
D24 EXPIRY DATE:	
DEPENDENT CHILD FOUR	
D17 FAMILY NAME:	
D18 FIRST NAME:	
D19 GENDER:	
D20 DATE OF BIRTH:	
D21 COUNTRY OF BIRTH:	
D22 PASSPORT NUMBER:	
D23 COUNTRY OF PASSPORT:	
D24 EXPIRY DATE:	

Section E	
E25 ESTIMATED DATE OF ARRIVAL IN NZ:	
E26 ESTIMATED DATE OF DEPARTURE FROM NZ:	
FINANCIAL SUPPORT	
Section F	
F26 ARE YOU USING OWN FUNDS OR BEING SPONSORED:	
☐ OWN FUNDS	
☐ SPONSORED	
VISA VERIFICATION PROCESS:	
1.DO YOU HAVE PENDING TRAVEL ABROAD? YES NO	
2.DO YOU HAVE URGENT DOCUMENTS TO COMPLY NEEDING THIS VISA? YES NO	
3.ARE YOU FLEXIBLE TO TRANSIT YOUR PASSPORT/DOCUMENTS THRU COURIER? YES NO	
4.ARE YOU WILLING TO PAY ADDITIONAL FEES FOR AN EXPEDITE PROCESSING? YES NO	
5.DO YOU HAVE ANY TRANSACTION OF YOUR PASSPORT DURING YOUR APPLICATION? YESNO	-
SIGNATURE OVER PRINTED NAME	

NOTE: PLEASE DON'T LEAVE ANY SPACE BLANK. WRITE N/A IF NOT APPLICABLE