

## Application Checklist

Programme code: **NZ2853**

Programme name: **New Zealand Certificate in Skills for Living for Supported Learners  
Level 1 with optional strand in Skills for Working  
FULL TIME**

Please check you have supplied all the required information

- Completed an Admission & Enrolment form
- Signed your declaration/disclosure
- Attached referee report/s

Signed

Date

- Please tick if you would like the Programme Leader to contact you or your caregiver if you require specific learning or other support needs.
- Are you happy for us to contact your referee?

# **General Information**

## **Financial Assistance**

You can apply through Ara to the Department of Work & Income (WINZ) for a training incentive allowance. To qualify you must be on the Supported Living payment.

## **To Apply**

### **Full Time**

For the full time New Zealand Certificate in Skills for Living for Supported Learners Level 1 Programmes ONLY.

Complete an application form and have the enclosed referee report completed and attached.

Return to:

Enrolment Support  
Ara Institute of Canterbury  
PO Box 540  
Christchurch

Early applications are encouraged.

## **Contact**

Phone 0800 24 24 76 for more information and to pre enrol for part time courses.

Email: [info@ara.ac.nz](mailto:info@ara.ac.nz)

## **Student Support**

The programme team prides itself in supporting and encouraging all willing students in these courses through the use of tutor, student and Ara resources.



# Referee report

THIS MUST BE A PERSON OTHER THAN A FAMILY MEMBER

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Applicant's name \_\_\_\_\_

Address \_\_\_\_\_

The above details are completed by the applicant. This report must be attached to the Admission & Enrolment form.

**PLEASE SEE THE NOTE ON THE REVERSE OF THIS PAGE BEFORE COMPLETING THIS FORM.**

Please comment about suitability of this applicant to:

- undertake a full time, one-year course
- It would be helpful if you covered the following information: personal qualities, interpersonal relationships, attitudes towards work and study, team work, leadership potential, outstanding abilities, and any other information you consider relevant.

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Signed  Date

**Referee's name**

Address

Phone

Position/role

**Note:** The information and opinion provided in this report constitute “personal information” in terms of the Privacy Act 1993. The person about whom this information and opinion are provided (the applicant) is entitled to have access to this report under IPP6 and to seek correction of this report under IPP7. Information or opinion provided in this report may be disclosed under IPP11 to the applicant and members of the selection committee.

Thank you for taking the time to complete this report.  
 Please return this form after completion to the applicant who is responsible for its return to Ara.

Are you happy for us to share information in this report with the applicant?