

# Domestic Application Form



## 1. Course Information

<b>A. Intake</b>	February <input type="checkbox"/>	July <input type="checkbox"/>	<b>B. Location</b>	Invercargill <input type="checkbox"/>	Auckland <input type="checkbox"/>
<b>C. New Zealand Diploma in Aviation - Fixed Wing</b>					
Airline <input type="checkbox"/>	General Aviation <input type="checkbox"/>	Flight Instructor <input type="checkbox"/>			
<b>D. Theory only</b> <input type="checkbox"/>	<b>E. Instrument Rating only</b> <input type="checkbox"/>	<b>F. Instructor Rating only</b> <input type="checkbox"/>			
<b>G. Casual - Fixed Wing</b> <input type="checkbox"/>					

## 2. Personal Details

### Applicant

Family Name		Title	
Given Names			
Preferred Name			
Address			
IRD Number		NZQA Number	
Date of Birth			
Home Phone		Mobile Phone	
Email		Gender	
Nationality		Ethnicity	
Country of Citizenship		Iwi Affiliation	
Citizen of New Zealand <input type="checkbox"/>	Permanent Resident of New Zealand <input type="checkbox"/>		

### Next of Kin

Name		Relationship	
Address			
Home Phone		Mobile Phone	
Email			

What was your main activity or occupation in New Zealand at 1 October last year? (tick only one box)			
Secondary school student	<input type="checkbox"/>	House person or retired	<input type="checkbox"/>
Not employed or other beneficiary (excluding retired)	<input type="checkbox"/>	Overseas (irrespective of occupation)	<input type="checkbox"/>
Wage or Salary worker	<input type="checkbox"/>	Private training establishment student	<input type="checkbox"/>
Self employed	<input type="checkbox"/>	Wananga student	<input type="checkbox"/>
University student	<input type="checkbox"/>	Other (please specify)	<input type="checkbox"/>
Polytechnic student	<input type="checkbox"/>		
College of Education student	<input type="checkbox"/>		
<b>Will this be the first year you have ever enrolled in a University, Polytechnic, College of Education, Private Training Establishment, or Wananga either in New Zealand or overseas since leaving school? Do not include enrolments in Star, community or hobby classes.</b>			
Yes <input type="checkbox"/>	No <input type="checkbox"/>	If you answer no, please enter the year of your first enrolment	

### 3. Education

What was the name of the last secondary school you attended? (state "overseas" if applicable)

What was your last year at secondary school? (eg: 2005)

What is the highest level of achievement you hold from a secondary school? (tick only one box)

Your highest achievement may be a traditional award such as School Certificate or you may have achieved a number of credits. Please attach evidence of all transcripts/certificates obtained on previous study.

No secondary qualification/less than 12 credits level 1	<input type="checkbox"/>	University Scholarship	<input type="checkbox"/>
14 credits or more at any level	<input type="checkbox"/>	Overseas award (Includes INT. Bacc.)	<input type="checkbox"/>
School Cert (one or more subjects) 12 or more credits @ level 1 or above	<input type="checkbox"/>	None of the above	<input type="checkbox"/>
University Entrance/National Certificate level 2	<input type="checkbox"/>		<input type="checkbox"/>
A or B Bursary/National Certificate level 3	<input type="checkbox"/>		

What year did you attain your highest secondary qualification?

### NCEA 3 or Equivalent

Subject	Grade

### 4. Previous Flying Experience

<b>Licence held</b>	CPL	<input type="checkbox"/>	PPL	<input type="checkbox"/>
<b>Ratings held</b>	Night	<input type="checkbox"/>	Instrument	<input type="checkbox"/>
	Multi	<input type="checkbox"/>	Instructor	<input type="checkbox"/>
Aircraft Ratings				
Total Hours			PIC Hours	
Exam Credits				
CAA Client No.				
Previous Training Organisation				

### 5. Fit and Proper Declaration

Have you previously had an application for an aviation document rejected or have you been the holder of an aviation document which has been suspended or revoked (other than a licence that has been suspended by a replacement or higher licence)?

Yes  No

If answering "yes" please give details below:

Have you been convicted of any transport safety offence? Yes  No

Are you presently facing charges for a transport safety offence? Yes  No

Have you been convicted on any criminal charge or are you presently facing charges for an criminal offence? Yes  No

Have you had a history of physical or mental health or serious behavioral problems? Yes  No

If you have answered "yes" to any of the above, please provide details below:

## 6. Medical



Do you have a current Class 1 Medical Certificate? Yes  No

If you answered "no", all applicants will be required to get this medical clearance and forward this to Southern Wings prior to course commencement. If you answered "no" please indicate if you have any of the following conditions

Asthma  Migraines  Colour Blindness  Other

## 7. How Did You Hear About Us?

Internet  Publication/Magazine  Printed Newspaper  Agent

Career Seminar/Expo  Word of Mouth  Careers Advisor/School

## 8. Declaration

I declare that to the best of my knowledge, all the information supplied is true and correct. I give consent to the disclosure of the personal information above.

Signature of Applicant

Date

## 9. Please complete the statement on page 4

Please send the completed application form including:

- Passport/birth certificate (*verified by JP/Lawyer, Doctor or Police Officer*)
- Highest school results
- Class 1 Medical (*if held*)
- Adapt Pre Screen Result
- Two character references (*Include contact details*)
- Current C.V

To: Southern Wings Ltd  
P O Box 1171  
INVERCARGILL 9810

Or Email to [viv@southernwings.co.nz](mailto:viv@southernwings.co.nz)  
Phone 0800 284 283

