

Declaration and signature

I supply the information on this form and in support of this application on the understanding: (a) that it may be used for purposes relating to my enrolment as a student by members of the academic and administrative staff of the University of Canterbury; (b) that I have the right to see and correct, if necessary, the information I have provided and my personal record; (c) that my application cannot proceed without my consent to the foregoing conditions.

I declare that all the information submitted on this application form and in the attached document/s is, to the best of my knowledge, correct and complete in every detail. I acknowledge that if I provide incorrect or incomplete information this may result in the cancellation of any offer made to me, and (if appropriate) disciplinary action by the University. I understand that it is my responsibility to provide all necessary documentary evidence. I authorise the University to obtain whatever further information is necessary in relation to the documents I have submitted.

Signed		Date	
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I wish to have the original academic record returned: Yes No

Application fee

I enclose the fee of \$60.00

Method of Payment: Cheque Visa Mastercard

Card Number

Signature		Expiry date	
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Application checklist

Have you included:

- Payment?
- Original or certified copy of Transcript(s)?
- Summary of learning outcomes for courses for the appropriate year of study?

Send this form to:

Student Advisor
College of Education
University of Canterbury
Private Bag 4800,
Christchurch 8140, New Zealand