



PRELIMINARY ASSESSMENT

Please use CAPITAL letters

Name as shown in passport

Family/last name

Given/first name(s)

Gender Male Female

Date of birth

Town/city of birth

Country of birth

Email address

Passport number

Country

Expiry date

- Age
- 20 to 29
 - 30 to 39
 - 40 to 44
 - 45 to 49
 - 50 to 55

Do you have a close family member living in New Zealand (adult brother or sister, adult child or parent) who is a resident or citizen of New Zealand?

- Yes
- No

- Do you have a
- Job offer
 - Working in a skilled job in New Zealand for less than 12 months
 - Working in a skilled job in New Zealand for more than 12 months

Years of experience in skilled employment _____

Years of work experience in New Zealand _____

State the name of your qualification/s (i.e. trade, diploma, certificate, bachelors degree etc.)
