

2025 Tourism in School Student Enrolment Form

The Ministry of Education, NZQA, Industry Training Organizations and other government departments require the information in this enrolment form.

***Please take the time to complete the questions in full and in block letters**

FAMILY NAME: _____

FIRST NAME/S: _____

DATE OF BIRTH: _____ GENDER: _____

NATIONAL STUDENT NUMBER: _____

SCHOOL NAME: _____

TEACHER NAME: _____

TEACHER EMAIL: _____

TEACHER PHONE CONTACT: _____

Please tick this box if you wish to receive further information from the New Zealand School of Tourism. This will be in the form of Newsletters, course information etc.

Authority for release of papers for moderation

I (Name of Student) agree to have my assessment paper used for the purposes of moderation. I understand that I need to give this permission under the Privacy Act.

.....
(Signature)

.....
(Date)

Teacher Signature: _____

Date: _____

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