Please fill in all the required details\*. Do not fill this form in on behalf of anyone else. Please PRINT your details clearly in the boxes provided.

Student / Temporary Visitor or P/Resident to New Zealand

|  |  |  |  |
| --- | --- | --- | --- |
| \*First Name | Click or tap here to enter text. | \*Date of Entry into NZ | Click or tap to enter a date. |
|  |  |  |  |
| \*Surname | Click or tap here to enter text. | Length of Stay in NZ | Click or tap here to enter text. |
|  |  |  |  |
| \*Date of Birth | Click or tap to enter a date. | Name of Spouse (if any) | Click or tap here to enter text. |
|  |  |  |  |
| \*Home Province | Click or tap here to enter text. | Other Dependents (if any) | Click or tap here to enter text. |
|  |  |  |  |
| Contact Address in PNG | Click or tap here to enter text. | \*Postal Address in NZ | Click or tap here to enter text. |
|  |  |
|  |  |  |  |
| E-mail Address | Click or tap here to enter text. | Phone number in NZ | Click or tap here to enter text. |
|  |  |  |  |
| Name of Sponsor (if applicable) | Click or tap here to enter text. | Type of Course Undertaken (if student) | Click or tap here to enter text. |

Please tick one of the following:

I would like my details put on list of “Papua New Guineans residing in New Zealand” to be available for fellow Papua New Guineas to view.

Please do not display or give out any of my details without my consent

Signature Current Date Click or tap to enter a date.

Any Comments

Email your completed form or changes to any information you supplied previously to ***office@png.org.nz***