

STCW MARITIME BASIC TRAINING COURSE ENROLMENT FORM

Welcome to the Vertical Horizonz (VHNZ) STCW training course.

The purpose of this enrolment form is to get the information we need to enrol you into our STCW course. All information collected is treated with confidentiality. If you need any further information/clarification, contact VHNZ by phone on 04 9392669 or email at kylie.harrison@vhnz.co.nz

Please complete the enrolment process by:

- Completing all sections of the form
- Printing your answers clearly in pen
- Signing the form
- Returning the form to VHNZ via mail or scan and email to kylie.harrison@vhnz.co.nz

STUDENT PROFILE

Surname: _____ Birth Date: ___/___/_____

First Name(s): _____

Preferred Name: _____

Mailing Address: _____

Email Address: _____

Your contact Phone Number: _____

Emergency Contact Person: _____

Phone Number: _____

Gender (please circle): **Male** **Female**

Ethnicity (please circle):

Māori **Pasifika** **Asian** **NZ European/European/Pakeha** **Not specified**

Disability/Medical condition/Illness: Components of the training are physically demanding in nature. Therefore, we need to be aware of any impediments to you completing these components.

Do you live with the effects of any significant injury, long term medical condition, illness, or disability that may affect your ability to complete the training?

Yes No

If yes, please give brief details:

Dietary Requirements: Do you have any dietary requirements? ie. Vegan, Vegetarian or food allergies.

Yes No

If yes, please give brief details:

Water / Fire / Heights:

Components of the training require the student to deal with real scenarios involving firefighting, survival in water, righting an upturned liferaft and entering water from a height. It is a requirement to be able to swim a small distance and you must be able to stay afloat unaided for at least 60 seconds. If we know of any issues prior to the training, we can work with you to overcome those problems and achieve a successful outcome.

Can you swim 25metres unaided?

Yes No

Do you have any issues with being in or under water, in water which you cannot stand on the bottom of, or working at height?

Yes No

Working in darkness/small spaces, wearing a breathing apparatus mask, or dealing with fire?

Yes No

If yes, please give brief details:

Reading / Writing: The theory components of the training require the successful completion of written assessments. These assessments are not difficult and are designed simply to confirm understanding of the topic. To assist us in planning our training sessions we need to be aware of student's capabilities.

Do you have any issues with reading / writing or English as second language?

Yes No

If yes, please give brief details:

Privacy - VHNZ collects and stores information from this form to comply with the requirements of the Ministry of Education, NZ Qualifications Authority, and Maritime NZ. The information is also used to manage internal administrative processes and for internal reporting. Information about students about students may be supplied to, and sought from, other educational institutions for the purposes of verifying academic records.

In signing this enrolment form you authorise such disclosure on the understanding that VHNZ will observe the general conditions governing the release of information, as set out in the Privacy Act 1993. You may see any information held about you and amend any errors in that information. To do so contact the VHNZ administration officer.

Fees - This section applies to those who are independent students only (not those whose fees are being paid for by their employer). In signing this enrolment form you undertake to pay all fees when due and to meet any late fees collection charges and associated debt recovery.

Rules - In signing this enrolment form you undertake to comply with all rules and policies of VHNZ with regard to attendance, academic progress, standard of dress, health and safety, and behaviour.

Declaration – I declare that to the best of my knowledge all the information supplied on this enrolment form is true and complete, I agree to abide by the conditions described above and I consent to the disclosure of personal information as described above.

Student Signature: _____

Date: ___/___/___