

PRELIMINARY ASSESSMENT QUESTIONNAIRE

Instructions: Fill out this form completely with true and correct information. All fields must be filled out. You must answer "NA" (Not Applicable) if a question does not apply to your situation.

PERSONAL DETAILS

First name:	Middle name:		Last name:	
Date of Birth (day/month/yr):		Age: Gender: (male, female)		
		Marital Status: (Choose from - Never Married/Single, Married, Separated,		
Religion: (optional)		Divorced, Widowed, Partnership/live-in)		
Main Citizenship/Nationality:		Other Citizenships	\$?	

CONTACT DETAILS:

Home Address in home country:					
Postcode:	Phone:		Mobile:		
Your address if you are in New Zealand now:					
Postcode:	Phone:		Mobile:		
Email Address: Alternate Email Address (if any):			s (if any):		
If you are not living at your home address (home country), and if you are not in New Zealand, what is your current residential address?					

FAMILY DETAILS

Number of Children:	Male:	Female:	Ages:
Citizenship/Nationality(s):			

EDUCATION

Education: State any and all qualifications finished (Courses, or Certificates, or Diplomas, or Degrees, or Masters)

Name of Completed Course/Degree/Certificate	Name of School/College and Address	Date Started (month/year)	Date Completed (month/year)

PRESENT EMPLOYMENT

Occupation:	Date started:	Ph	one(s):				
If work or offer of work is in NZ, state your wage/salary per hour:							
Number of hours work per week based	d on Employment Contract:						
Company Name and Address:							
Your Main Tasks:							
How long in present job: Do you hold an occupational license or registration? (Yes or No):							
If yes, what occupation:							
Name of issuing authority: Date Issued:							
Are you self-employed? (Yes or No):							
If yes, name on business registration p	papers:						
Nature of Business: Number of Employees:							
If interested in Work or Residence Visa, what is your current salary or wage?							

PAST EMPLOYMENT (add pages if necessary)

Employment details since leaving school: (Include only those for which you can obtain certificates of employment when asked for.)

From/To (Month/Year)	Name and Address of Employer	Type of Business	Title/Position	Reason for Leaving

LANGUAGE DETAILS

Do you speak English? Choose: Speak Well / Fair / Little / N					Have you taken the IELTS exam? (Yes or No)		
If Yes, General or Acade	emic IELTS?		Date exam	m wa	ıs taken:		
Your score in all areas.	Reading:	Writing:	Speaking:		Listening:	Overall Band Score:	
Other English test(s) taken for visa purposes in last 2 years and respective score:							

PASSPORT DETAILS

Passport Number:	Place of Issue:
Date Issued:	Valid Until:

If you have been in countries apart from your country of citizenship in the past 10 years, please list them here and the dates you were there:

If you are now in New Zealand, what visa type are you holding?

NZ Visa Expiry Date:

If you had previously applied for a New Zealand visa, please state what visa, when, and outcome(s)?

SPOUSAL/PARTNER/FIANCÉ DETAILS

Given First nan	ne/s:		Middle name:		ast name:			
Date of Birth (c	lay/month/y	rr):	Age:		G	ender: Male / Female		
Country of Birt	y of Birth:			Town/City of Birth:				
Religion:	Religion:				Citizenship/Nationality(s):			
Current residen	Current residential address if different from yours:							
Email Address:								
Does your spou If Yes, how ma	-	ïancé have a ge range:	my childre	n of his	/her own? (no	t to you)): (Yes or No))
Has your spous If Yes, please st	-	-	• • •			visa? (Y	es or No)	
Has your spous (Yes or No) If	-	-	• • •		•		ry apart from	New Zealand?
If he/she is now Date current NZ			visa type i	s he/she	holding?			
Education Of Diplomas, Deg	-		Write belo	w the na	ume of all qua	lificatio	ns finished (C	ourses, or Certificates,
	of Complete egree/Certif		Na		chool/College Date Starte Address (month/year		1	
	-				-	-		ment: (Include only ld extra page/s as
From/To (Month/Year)	ar) Name and Address of Employer Type		Туре	of Business Title/ Position		Reason for Leaving		
Does your spouse/partner speak English? Choose: Speak Well / Fair / Little / No								
Has your partner/spouse taken the IELTS exam? (Yes or No): If Yes, General or Academic:								
Date exam was taken:								
His/her score in all areas:Reading:Writing:Speaking:Listening:			Listening:					
Overall Band S	core:							
Spousal/Partn	er Passport	Number:						
Place Of Issue:	Issue: Date Issued:			ed:	Expiration Date:			

OTHER DETAILS

How did you find out about this agency? Choose: Friend / Relative / Internet / Other If Other, please specify:

Describe any health problems that you or any additional applicant coming with you, may have now, or have had in the past, if any:

Have you or any additional applicant coming with you, ever been convicted, imprisoned, or have any criminal case? If so, please describe briefly:

Have you or any additional applicant coming with you been involved in terrorist activities? Choose: Yes / No

Do you intend to start or acquire a business in New Zealand? Choose: Yes / No	
If yes, how much financing are you willing to commit to the business? US\$	or NZ\$

Declaration (Please Read Carefully):

I declare that all the information provided in this application is true and correct. I understand that if I make any false statements, provide any false or misleading information, or omit to provide any relevant information, that I may be committing an offense and be liable to prosecution. I understand that this pre-assessment questionnaire is solely for the use of Asian And Philippine Immigration Assistance (NZ) Ltd. I further understand that all information provided shall be kept in confidence in accordance with the Privacy Act '2020

Agree (Write "yes" to agree):	Submit Date:
Print Name:	Signature (Only if completed in ink):