

Tel: (800)345-6541



New Zealand Work visa Application

| | Please enter your contact information | | | |
|---------|--|---------------------|--------------------------------------|----------------|
| Name: | | | | |
| Email: | | | | |
| Tel: | | Mobile: | | |
| The lat | est date you need your passport returned in time fo | or your travel: | | |
| | | | | |
| | | | | |
| | New Zealand work visa checklist | | | |
| | Filled out and signed New Zealand work visa applic | ation form. The fo | orm is enclosed. | |
| | Original passport. Passport must have at least 6 month | s remaining validit | y and have at least 1 v | isa page. |
| | 2 Photographs. Standard passport photographs 2x2 incl | nes on a white bacl | <ground.< th=""><th></th></ground.<> | |
| | Payment. Credit Card Authorization form, Certified Check | <, or Money Order | payable to VisaHQ.com | l. |
| | Return mailer. Prepaid self-addressed return label or pa | yment for FedEx. | | |
| I | f you wish to prepay return shipping, please add the s | shipping fee to th | e total and provide re | eturn address: |
| | FedEx 2nd day delivery - From \$29 | Name: | | |
| 님 | FedEx Standard Overnight - From \$42 | Company: | | |
| H | FedEx Priority Overnight - From \$43 | Address: | | |
| П | FedEx Saturday delivery - From \$60 | | | |
| | FedEx First Overnight - From \$72 | City: | | |
| | Prepaid self addressed mailer - \$0 | State: | | Zip: |
| | Local pick up in Washington - \$0 | Juici | | |
| * | Actual prices may vary based on location per FedEx.com. | | | |



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Proof of status. Original evidence of your legal status in US (**Original** of Green card, US visa, I-20, H1B approval notice. VisaHQ cannot assist US **B1/B2 visa holders** at this time.)

Itinerary. Copy of round trip tickets or confirmed itinerary.

Hotel Reservations. Copy of hotel reservations (Applicant's name must be on Hotel Reservation).

Business Letter. A business letter from the sending company in the US. The letter should be printed on the company letterhead stationery, addressed to "The Consulate of New Zealand, Visa Section", and signed by a senior manager (an equivalent to Vice-President or

above). The business letter must adhere to the following guidelines:

• Briefly introduce the applicant (please specify employment status/position held in the company by applicant).

• State the nature of the business to be conducted (ie. business meetings, contract negotiations, etc.) and the names and addresses of companies to be contacted in New Zealand.

- Specify the Type and desired Validity of the visa (ie. a one year multiple entry business visa).
- Guarantee of sufficient funds for travel.

The sample format for this letter can be found here

Business Invitation. A business invitation letter from the sponsoring company in New Zealand. The letter should be printed on company letterhead stationery, addressed to "The Consulate of New Zealand, Visa Section", and signed by a senior manager (an

equivalent to Vice-President or above). The business letter must adhere to the following guidelines:

- Briefly introduce the applicant (please specify employment status/position held in the company by applicant).
- State the nature of the business to be conducted (ie. business meetings, contract negotiations, etc.) and the names and addresses of companies to be contacted in New Zealand.
- Specify the Type and desired Validity of the visa (ie. a one year multiple entry business visa).



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New Zealand work visa fees for citizens of Bahamas

| Type of visa | Validity | Processing time | Embassy fee | Service fee | Total |
|--------------|----------------|------------------|-------------|-------------|----------|
| Single entry | up to 365 days | 20 business days | \$275.00 | \$199.00 | \$474.00 |

This order is subject to Terms of Service, posted on VisaHQ website. All fees and requirements may change without notice.

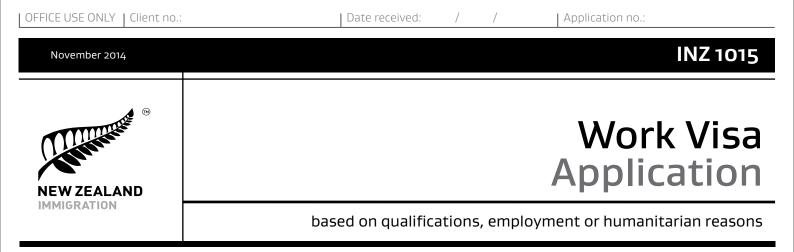


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Credit Card Authorization Form

| By signing this form i accept | VisaHQ.com Terms of | Service and authoriz | e to charge my credit car | d for the amount of \$ | | |
|---|---------------------|----------------------|-----------------------------|------------------------|--|--|
| Name on the Credit Card: | | | | | | |
| Credit Card number: | | - | - | - | | |
| Exp. date: | | / | | | | |
| Credit Card Billing Address: | | | | | | |
| | | | | | | |
| Signature: | | | | | | |
| Comments: | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| Thank you! We accept all major credit cards. | | | | | | |
| we accept an major credit cards. | | | | | | |
| | VISA | | GSA SmartPay [®] 2 | | | |



Refer to the Work Visa Guide

The Work Visa Guide (INZ 1016) contains important information about the requirements for a work visa and how to complete the form. It can be downloaded from www.immigration.govt.nz/forms.

Documents required

Use the checklist on page 2 of this form to find out which documents you must provide. If you have not provided the correct documents, we will return your application.

Including your family

You cannot include family members on this form. Your partner must use the *Partnership Visa Application (INZ 1198)*. Dependent children must use the *Student Visa Application (INZ 1012)* if they have reached school age or the *Visitor Visa Application (INZ 1017)* otherwise.

Who cannot use this form

This form cannot be used for some types of work visa. These work visas have separate forms that can be found at www.immigration.govt.nz/forms. Do not use this form to apply for a visa under the following categories:

- Partnership
- Working holiday scheme
- Recognised seasonal employer
- China Skilled Work
- Performing Artists, Entertainers and Entertainment Industry Personnel.

Immigration Advisers Licensing Act 2007

Under the Immigration Advisers Licensing Act 2007 it is an offence to provide immigration advice without being licensed or exempt. If your immigration adviser is not licensed when they should be, Immigration New Zealand will return your application.

For more information and to view the register of licensed advisers, go to the Immigration Advisers Authority website www.iaa.govt.nz or email info@iaa.govt.nz.

Lawyers provide immigration advice and are exempt from licensing under the Immigration Advisers Licensing Act 2007. For more information and to view the register of immigration lawyers, go to the New Zealand Law Society website www.lawsociety.org.nz.



| CAP | TAL LETTERS. | | ite clearly in English using | | Silver Fern Practical | | Completed Employer Supplementary Form (INZ 1113) | |
|--|--|--------|--|--|--|--|--|--|
| Ар | plication check | list | | | Experience visa Specific | | and associated documents. | |
| All applicants must provide: | | | | purpose or event work visa | | Description of the specific purpose or event for which I am coming to New Zealand. | | |
| | Completed, signed | | | | | | Evidence of the specific | |
| | Appropriate appli | catior | ı fee. | | | | purpose or event and if applicable, a completed | |
| | Two passport-size | | | | | | Employer Supplementary Form (INZ 1113). | |
| | Passport or travel | | | | Primary Sector | | Evidence as specified in the | |
| | Section C: Your he | alth. | certificates if required by | | Trainees visa | | primary sector trainee visa requirements of the <i>Work Visa</i> | |
| | Police certificates character. | if req | uired by Section D: Your | | Foreign crew of | | <i>Guide (INZ 1016)</i> Evidence as specified in 'Foreign | |
| App | olications for visas | based | d on employment | | fishing vessels work visa | | crew of fishing vessels visa requirements' on page 9 of the | |
| | | | ob description and the details f the proposed employment. | | | | Work Visa Guide (INZ 1016). | |
| | Evidence of qualif | icatio | ns relevant to my job offer. | | Religious worker visa | | Completed Sponsorship Form for Religious Workers | |
| | Evidence of work | exper | ience relevant to my job offer. | | | | (INZ 1190) and associated documents. | |
| | | | et or am able to meet any registration requirements. | | Work exchange visa | | Evidence of acceptance to approved work exchange. | |
| Visas based on employment include the following types: • Essential Skills | | | | | Evidence of medical and dental insurance. | | | |
| Work to Residence: Accredited Employer Work to Residence: Arts Culture and Sports Work to Residence: Long Term Skill Shortage List | | | | | Evidence I hold (or can purchase) outward travel from New Zealand. | | | |
| • S • F • W | pproved in Princip pecific Purpose or ree Trade Agreeme /ork exchange | Even | | | Post-study work visa - open | | Evidence I have completed a New Zealand qualification that would qualify for points under the Skilled Migrant Category. | |
| | eligious Worker rimary Sector Trair | 2005 | | | | | Evidence I have a minimum of | |
| Unl | | pplica | ations for these types of visas | | | | NZ\$4200 in funds available to maintain myself. | |
| | am applying for | | st also provide | | Post-study | | Evidence I have completed a | |
| | an Essential skills work visa | | Completed Employer Supplementary Form (INZ 1113) | | work visa - employer assisted | | New Zealand qualification that would qualify for points under the Skilled Migrant Category. | |
| | a Work to | | and associated documents. Completed <i>Talent (Arts,</i> | | | | Completed Employer Supplementary Form (INZ 1113) | |
| | Residence: Arts, culture and | | Culture and Sports) Sponsorship Form (INZ 1091) | | | | and associated documents. | |
| | sport work visa | | and associated documents. | | | | pout the type of documents t of your application | |
| | | | Evidence of my international reputation in my declared field and evidence I am still prominent in that field. | is available from the Immigration New Zealand branch where you will submit your application. Go to www.immigration.govt.nz/contactus and select the appropriate branch. | | | | |
| | a Work to Residence: Long Term Skill Shortage List | | Completed Employer Supplementary Form (INZ 1113) and associated documents. | abov webs Imm | site, www.immigra igration New Zeala | Immi ation. and O | gration New Zealand govt.nz/work, or the perational Manual, | |
| | work visa | | | | <i>it</i> the documents. | | psmanual, for information nust provide. | |

Date received:

/

/

Application no.:

What type of work visa are you applying for?

| Visas based on employment | 🗌 Religious Worker |
|--|--|
| Essential Skills | Other (specify) |
| Work to Residence: Accredited Employer | Visas based on qualifications gained in |
| Work to Residence: Arts Culture and Sports | New Zealand |
| Work to Residence: Long Term Skill Shortage List | 🗌 Post-study work visa - open |
| Approved in Principle | Post-study work visa - employer assisted |
| Specific Purpose or Event | Visas based on humanitarian reasons |
| Primary Sector Trainees | _ |
| Free Trade Agreement special work | Refugee or protection status claimant |
| Work exchange | Other (specify) |
| Foreign crew of fishing vessels | |

Section A Personal details

For more information about the questions in this section, see 'Completing Section A: Personal details' in the *Work Visa Guide*.

Attach **two** colour passport-size photographs of yourself here. The photographs must be less than six months old. Write your full name on the back of both photographs.

| A 1 | Name as shown in passport Family/last name | | | 4.5cm | | 4.5cm | |
|------------|---|-----------------------------|-------|------------------|------------|-------|-----------|
| | Given/first name(s) | | | 3.5cm - | | 3.5 | cm 🔶 |
| A2 | Preferred title Mr Mrs Other (specify) | ☐ Ms Miss Dr □ | | | | | |
| A3 | Other names you are knowr | n by or have ever been knov | vn by | | | | |
| A4 | Gender 🗌 Male 🗌 Female | A5 Date of birth | | ΜΙΥΥΥΥΥΥ | | | |
| A6 | Town/city of birth | | | | | | |
| | Country of birth | | | | | | |
| A7 | Passport details | | | | | | |
| | Number | | | | | | |
| | Country | | | | Expiry dat | e | мдүтүтүтү |
| A8 | Other citizenships you hold | | | | | | |
| A9 | Partnership status | Single | | oarated Jaged | Partne | | Divorced |

When filling in this form, please write clearly using CAPITAL LETTERS.

| Section B Contact details | |
|---|---|
| B1 Your current residential address: | |
| Address | |
| | |
| Telephone (landline) | Telephone (mobile) |
| | |
| | |
| B2 If you are currently in New Zealand, your most recent overs | seas address: |
| Address | |
| | |
| B3 Name and address for communication about this application | un. |
| ☐ Same as address at 團, or ☐ as below Name | |
| Company name (if applicable) and address | |
| | |
| Telephone (daytime) | Telephone (evening) |
| Telephone (daytime) | |
| | |
| | |
| B5 Have you received immigration advice on this application? | |
| You can find a definition of immigration advice at www.immigration.govt | |
| Yes Make sure that your immigration adviser completes 'Section H: Ir | mmigration adviser's details . |
| B6 Names and addresses of any friends, relatives, or contacts | you have in New Zealand (if applicable) |
| | |
| Name | |
| Address | |
| Relationship | Date of birth (if known) |
| Name | |
| Address | |
| Relationship | Date of birth (if known) |

| Se | ction C Your health |
|------------|---|
| 0 | For more information about the questions in this section, see 'Completing Section C: Your health' in the <i>Work Visa Guide</i> . |
| C 1 | Do you have tuberculosis (TB)? 🗌 Yes 🗌 No |
| C2 | Do you have any medical condition that requires, or may require, one of the following during your stay in New Zealand? • Renal dialysis Yes No • Hospital care Yes No • Residential care Yes No |
| | Residential care is defined as in-patient care for people with psychiatric, sensory or intellectual disabilities or live- in facilities for the aged. |
| С3 | If you have answered Yes to any of the questions in ଦ and ଢ, provide details. |
| C4 | Are you pregnant? |
| | Yes Date you are due to give birth DIDIMINICY YOU GO to C5 |
| | NO Go to CG |
| C5 | If you intend to give birth in New Zealand, please indicate how the cost of maternity health services will be paid for and provide the relevant evidence. |
| | Not applicable as I do not intend to give birth in New Zealand. |
| | I am, or will be eligible for publicly-funded maternity health services and have provided evidence of my eligibility. |
| | □ I will cover the cost myself and have attached copies (not originals) that I have at least NZ\$9000 of funds available. |
| | My sponsor has guaranteed to cover the cost and I have attached a completed Sponsorship Form for Temporary Entry (INZ 1025). |
| Me | dical certificates you must provide |
| C 6 | Will you be in New Zealand for more than six months in total? |
| | No You do not have to provide a chest X-ray certificate or a medical certificate. Go to Section D: Your character. |
| | Yes You may have to provide a chest X-ray certificate and a medical certificate if indicated at C7. |
| C7 | How long do you intend to stay in New Zealand? If you are in New Zealand, this includes time you have already spent here. |
| | More than six months but not more than 12 months. You must provide a Chest X-ray Certificate (INZ 1096) if you are from, or have visited for more than three months, a place that is not listed as having a low incidence of tuberculosis unless the notes below apply to you. Then go to CB. |
| | More than 12 months. You must provide a Chest X-ray Certificate (INZ 1096) and a General Medical Certificate (INZ 1007). See notes below, then go to C8. |
| | Notes: |
| | Refer to 'Completing Section C: Your health' in the Work Visa Guide (INZ 1016) for the 'List of countries, areas and territories with a low incidence of tuberculosis'. |
| | Pregnant women are not required to have an X-ray, unless a special report is required. You do not need to provide a chest X-ray certificate if you have provided one which was issued less than 36 months ago, with a previous Immigration New Zealand application, unless your health has deteriorated since your previous certificate was issued, or unless you have spent six consecutive months since your previous certificate was issued, in a place not listed as having a low incidence of tuberculosis. You do not need to provide a medical certificate if you have provided one which was issued less than 36 months ago, with a previous Immigration New Zealand application, unless your health has deteriorated since your previous certificate was issued. |

| |] I am required to provide both a Chest X-ray Certificate (INZ 1096) and a General Medical Certificate (INZ 1007). Go to $[$ |
|----|--|
| | I am required to provide only a <i>Chest X-ray Certificate (INZ 1096)</i> because: I am staying between six to 12 months and I am from, or have visited for more than three months, a place that is not listed as having a low incidence of tuberculosis, <i>go to</i> [9]; or I have previously provided a chest X-ray certificate; however: |
| | it was dated by the radiologist more than 36 months ago <i>go to</i> [3], or |
| | \square my health has deteriorated since my last certificate was issued, or |
| | I have spent six consecutive months since my previous certificate was issued, in a place not listed as having a low incidence of tuberculosis. Go to C9. |
| | I am required to provide a <i>Chest X-ray Certificate (INZ 1096)</i> , however, as I am pregnant I am not required to have an X-ray; and: |
| | I am not required to provide a <i>General Medical Certificate (INZ 1007</i>) at this stage; or |
| | I have therefore provided only a <i>General Medical Certificate (INZ 1007).</i> Go to C9. |
| |] I am required to provide a <i>General Medical Certificate (INZ 1007)</i> because: I have provided a chest X-ray certificate which was issued less than 36 months ago with a previous Immigration New Zealand application, or |
| | \Box I have previously provided a medical certificate, however: |
| | \Box it was dated by the examining physician more than 36 months ago; or |
| | \Box my health has deteriorated since my last certificate was issued. Go to [9]. |
| | I do not have to provide a <i>Chest X-ray Certificate (INZ 1096)</i> or a <i>General Medical Certificate (INZ 1007)</i> at this stage because: I have provided a medical certificate and chest X-ray certificate which were issued less than 36 months ago with a previous Immigration New Zealand application; and |
| | my health has not deteriorated; and |
| | I have not spent six consecutive months in a place which is not listed as having a low incidence of tuberculosis since my previous certificate was issued. Go to Section D: Your character. |
| | ck the option that applies to you: Is a physician submitting your medical and/or chest X-ray certificate to nmigration New Zealand on your behalf? |
| |] Yes Has your physician supplied you with an eMedical Reference Code (NZER)? |
| | Yes Enter your eMedical Reference Code here: |
| | No Enter the name of the clinic that is submitting your health information: |
| | No If the physician has returned the medical and/or chest X-ray certificate to you, then you will need to submit these with your visa application. |
| ct | ion D Your character |
| CL | plicants must complete this section. If your application is declined for character reasons, Immigration |

Have you been convicted at any time of any offence, including any driving offence? Please note that this includes any conviction(s) outside of New Zealand subsequently cleared or wiped by 'clean slate' legislation.

🗌 Yes 🗌 No

D1

| D2 | Are you currently: • under investigation Yes No • wanted for questioning Yes No • facing charges Yes No for any offence in any courty: |
|-------------|--|
| D3 | Have you ever been: • excluded Yes • refused entry Yes No • removed or deported Yes No from any country, including New Zealand? |
| D4 | Have you ever been refused a visa/permit to visit, work, study or reside in any country? 🗌 Yes 🗌 No |
| D5 | Have you ever been a member of, or adhered to, any terrorist organisation? 🗌 Yes 🗌 No |
| D6 | Have you had (or currently have) an association with, membership of, or involvement with, any government, regime, group or agency that has advocated or committed war crimes, crimes against humanity and/or other gross human rights abuses? \Box Yes \Box No |
| | If you have answered yes to any of the questions above give full details. This includes full details of any charges, convictions and the sentence or penalty imposed. Continue on a separate piece of paper if necessary. |
| | |
| Pol | ice certificates you must provide |
| Sele app | ect the appropriate option to indicate whether you are required to provide a police certificate with this lication. Police certificates must be less than six months old when you submit them to Immigration New land. |
| D7 | You must provide police certificates from your country of citizenship and any country you have lived in for five years or more since the age of 17 if: |
| | U you are applying for a work to residence visa, or |
| | U you plan to be in New Zealand for 24 months or longer (including any time you have already spent in New Zealand), and, either |
| | \Box you have not provided police certificates to Immigration New Zealand with a previous visa application, or |
| | you have provided police certificates to Immigration New Zealand but those certificates were issued more than 24 months ago. |
| D8 | You do not have to provide police certificates if: |
| | you are not intending to be in New Zealand for 24 months or longer , or |
| | you have already provided police certificates to Immigration New Zealand with a previous visa application and those police certificates were issued less than 24 months ago. |
| | |

Section E Employment and qualifications

| pplicants who hold a cu omplete this section. | rrent New Zeala | and work visa may go to Sec | tion F: Job offer. A | ll other applicants must |
|--|---------------------|---|--------------------------|-----------------------------------|
| E1 If you are currently e | mployed, provid | e details | | |
| Employer's name | | | | |
| Employer's address | | | | |
| - | | | | |
| Telephone | | Email | | |
| Your position: | | | | |
| List all periods of pre | vious employme | ent, including self-employmer | nt and employment | outside New Zealand. |
| Date from | Date to | Name of employer | Location | Type of work/occupation/job title |
| (DD/MM/YY) | (DD/MM/YY) | | | |
| | / / | | | |
| / / | / / | | | |
| / / | / / | | | |
| | | old. If you have no qualification | | |
| Name | of qualification | Date obtained (DD/MM/YY) | Institi | ution where gained |
| | | / / | | |
| | | / / | | |
| | | | | |
| | | 1 1 | | |
| Section F Job offe | r | | | |
| F1 Do you have a job off | er in New Zealar | nd? Yes No Go to 'S | Section G: Declaration b | y applicant'. |
| Name and address of | f employer who h | nas offered you a job. | | |
| Employer's name | | | | |
| Employer's address | | | | |
| | | | | |
| Telephone | | Email | | |
| B Name of position off | ered | | | |
| | | (eg 321212 Diesel Motor Mecha | anic) if known | |
| - | and New Zealand Sta | andard Classification of Occupations. | | ZSCO by going to |
| E4 Do you hold a valid S assessment, for the p | | tegory (SMC) Invitation to Ap bove? Yes No | ply, or have a SMC | application currently under |

Section G Declaration by applicant

I have provided true and correct answers to the questions in this form.

I agree to tell Immigration New Zealand about any changes to my circumstances (including a change in my employment or partnership status) that occur after making this application.

I agree to leave New Zealand before my visa expires. If I remain in New Zealand after my visa has expired, I may be deported by Immigration New Zealand.

I agree that if I am not entitled to free health care in New Zealand, I will pay for any health care or medical assistance I may require in New Zealand.

I understand that if I have received immigration advice from an immigration adviser and if that immigration adviser is not licensed under the Immigration Advisers Licensing Act 2007 when they should be, Immigration New Zealand will return my application.

I understand that Immigration New Zealand may provide information about my entitlement to work to potential employers via the online VisaView system. VisaView is authorised by legislation.

I authorise Immigration New Zealand to provide information about my health and my immigration status to any health service agency. I authorise any health service agency to provide information about my health to Immigration New Zealand.

I authorise Immigration New Zealand to make any necessary enquiries about information on this form and/or accompanying documentation. I authorise any agency whether in New Zealand or overseas, including but not limited to border or immigration agencies, education providers, financial institutions, foreign embassies, government authorities, healthcare providers, police or other law enforcement agencies, that holds information (including personal information) related to information on this application form and/or accompanying documentation to disclose that information to Immigration New Zealand so that they can:

- make a decision on this application
- answer enquiries about my immigration status once my application has been decided.

I have provided all the documents required by the checklist on page 2.

Signature of principal applicant

| Signature of parent or | quardian if principa | l annlicant is under 18 | vears of ane |
|------------------------|----------------------|-------------------------|--------------|
| Signature of parent of | guaraian'n principa | applications under 10 | ycarsorage |

| Date DIDIMIMIC | YTYTYTY |
|----------------|---------|
|----------------|---------|

Section H Immigration adviser's details

This section must be completed by the applicant's immigration adviser. If the applicant does not have an immigration adviser, this section does not have to be completed.

| H1 | If you are a licensed adviser, please provide your licence details. |
|----|---|
| | Licence type full provisional limited List conditions specified in the register |
| | |
| | Licence number 2 0 Go to Section I: Declaration by person assisting the applicant |
| H2 | If you are exempt from licensing, tick one box below to show why you are exempt from licensing then go to Section I: Declaration by person assisting the applicant. |
| | I provided immigration advice in an informal or family context only, and I did not provide the advice systematically or for a fee. |
| | □ I have provided immigration advice in the course of my work (employed or volunteer) and that work exempts me from the requirement to be licensed. Indicate the reason for your exemption below. |
| | 🗌 Lawyer with current New Zealand practicing certificate 🔲 Community Law Centre 🗌 Citizens Advice Bureau |
| | 🗌 New Zealand Member of Parliament or staff 🗌 New Zealand public servant 🔲 Foreign Diplomatic/ Consular |
| | <i>f</i> See www.immigration.govt.nz/adviserlicensing for more information about who is exempt from licensing. |

Section I Declaration by person assisting the applicant

This section must be completed and signed by the applicant's immigration adviser, or by any person who has assisted the applicant by providing immigration advice, explaining, translating, or recording information on the form for the applicant. If the applicant does not have an immigration adviser, and no one helped the applicant to fill in this form, this section does not have to be completed.

If you are not exempt under the Immigration Advisers Licensing Act 2007, it is an offence for you to provide immigration advice without holding a license, and Immigration New Zealand will refuse to accept your client's application. More information about immigration adviser licensing can be obtained from the Immigration Advisers Authority website www.iaa.govt.nz, via email info@iaa.govt.nz or by telephone on 0508 422 422.

Name and address of person assisting applicant. 🗌 Same as address given at 🖪, or 🛛 as below.

Given/first name(s)

Company name (if applicable) and address

| Telephone | Email | |
|-----------|-------|--|

I understand that after the applicant has signed this form it is an offence for me to change or add further information, or change or add any documents attached to the form, without making a statement identifying what information or material has been changed, added or attached and by whom. If I make these changes or additions, I must state on the form what they were, who made them and the reason they were made.

I understand that the maximum penalty for this offence is a fine of up to NZ\$100,000 and/or a term of imprisonment of up to seven years.

I certify that the applicant asked me to help them complete this form and any additional forms. I certify that the applicant agreed that the information provided was correct before signing the declaration.

I have **assisted** the applicant as an interpreter/translator

I have **assisted** the applicant with recording information on the form

I have assisted the applicant in another way. Specify

] I have **provided immigration advice** (as defined in the Immigration Advisers Licensing Act 2007) and my details in Section H: Immigration adviser's details are correct.

Signature of person assisting

Deciding whether you are eligible for a visa

Immigration New Zealand collects the information about you on this form to decide whether you are eligible for a work visa. We may also use the information to contact you for research purposes or to advise you on immigration matters.

Collecting the information is authorised by the Immigration Act 2009 and the Immigration Regulations made under that Act. You do not have to provide the information, but if you do not we are likely to decline your application.

Deciding whether you are eligible to board a flight to New Zealand

The information we collect may also be used to determine whether you are allowed to board a flight to New Zealand. We will not share your personal information with airline check-in agents; however, we will send a boarding message to the airline check-in agent based on the information you have provided in this form.

Immigration New Zealand may also share the information you have provided with other government agencies that are entitled to it by law, or with other agencies (as you have agreed in the declaration).

You are able to ask for the information we hold about you and have any of it corrected if you think it is necessary. The address of Immigration New Zealand is PO Box 3705, Wellington, New Zealand. **This is not** where your application should be sent.

Other documents we may need

Sometimes we may ask for additional documents or information so that we can consider it with this application.

Other documents you may wish to send

You may wish to send other documents or information so that we can consider it with this application. Send photocopies only (not original documents), as these documents will not be returned to you. If we need to see an original document, you will be asked to produce it later.

VisaView

It is an offence to employ a person who is not entitled to work in New Zealand. One way for employers to avoid committing this offence is to check a person's entitlement to work with Immigration New Zealand's online VisaView system. Disclosure of information through VisaView is authorised by legislation.

If you believe that an employer has been given the wrong entitlement information about you via VisaView, you may contact the Immigration Contact Centre (0508 558 855) to request correction of that information.

Section J Paying your application fee

To find out how much the fee is and where to send your application, use our office and fees finder at www.immigration.govt.nz/fees.

Note: some offshore offices do not accept credit cards. The office and fees finder contains information about alternative methods of payment.

Your application fee

Amount you are paying:

Currency

Application number (office use only)

Preferred methods of payment

We recommend that you use one of the following methods of payment for better security and faster processing:

| Visa

SWITCH card Issue number

Bank cheque/bank draft

Credit card (choose one)

Mastercard

SWITCH card (UK only)

Name of cardholder

Card number

CVC/CVV number

Note: your CVC/CVV number is the three-digit number found on the signature strip on the back of your credit card.

Signature of cardholder

Date DIDIMINICYTYTY

Other methods of payment

- Personal cheque. Note that we will hold your application for 10 working days to allow the cheque to be cleared.
- **Cash.** Our New Zealand offices do not accept cash. Most of our offices outside New Zealand do not accept cash.
- EFTPOS. Note this option is only available for applications lodged in person in one of our New Zealand offices.

We do not accept money orders.

| Returning your documents | |
|---|--|
| Please tick one of the following options | |
| Please return all documents to me by secure post at the address given at B3. | |
| I wish to collect my documents when ready. Note: This option is not available in all branches, see your branch website at www.immigration.govt.nz/contactus to check if you can collect your documents. | |

New Zealand Government

INZ 1113



Employer Supplementary Form

for employers who have offered a position to a person from overseas who is applying for a work visa

Information for employers

Complete this form if you are an employer who has offered a position to a person from overseas who is applying for a work visa (refer to the *Immigration Guide for Employers (INZ 1031)*) or varying the conditions of a work visa.

This form **must** be used for:

- Essential Skills work visa applicants; and
- Work to Residence: Long Term Skill Shortage List (LTSSL) work visa applicants; and
- Graduate Work Experience work visa applicants; and
- Silver Fern Practical Experience work visa applicants; and
- Specific Purpose work visa applicants, where a job offer is required; and
- Variation of Condition work visa applicants

This form is not required for any other work visa category.

This form must be submitted by the person you have offered a position to with the *Work Visa Application (INZ 1015)* form or the *Application for a Variation of Conditions or Variation of Travel Conditions [INZ 1020]* form.

Note: If you are an Accredited Employer, you do not have to complete this form to support a work visa holder applying to vary the conditions of their work visa.

Providing this information will help us to process the application, however we may need to contact you for more information.

Submit photocopies only. **Do not submit original documents** as they will not be returned to you. If we need to see an original document we will ask you to produce it at a later time.

Work entitlement

It is an offence under the Immigration Act 2009 to employ a person who is not entitled to work in New Zealand. One way for employers to avoid committing this offence is to check a person's entitlement to work through Immigration New Zealand's online VisaView system. For more information or to register please visit www. immigration.govt.nz/visaview. Disclosure of information through VisaView is authorised by legislation.

When filling in this form, please write clearly in English using CAPITAL LETTERS.

About the information you provide

Immigration New Zealand collects the information about you on this form to determine your request to recruit overseas workers. We may also use the information to contact you for research purposes or to advise you on immigration matters.

The address of Immigration New Zealand is PO Box 3705, Wellington, New Zealand. **Do not send your application to this address.**

Collecting the information is authorised by the Immigration Act 2009 and the Immigration Regulations made under that Act. You do not have to provide the information, but if you do not we are likely to decline your application. Immigration New Zealand may also share the information you have provided with other government agencies that are entitled to it by law, or with other agencies (as you have agreed in the declaration).

You have the right to access the information we hold about you and have any of it corrected if you think it is necessary.

For more information

If you have questions about completing this form:

- see our website www.immigration.govt.nz
- telephone our call centre on 0508 558 855 (within New Zealand).



| ction A Employm | ient details | | |
|---|--|------------------------|-------------------------------------|
| ch a copy of the full en | nployment agreement and | d complete the foll | lowing. |
| State the name of the p Family/last name | person to whom you have c | | n your business rst name(s) |
| Full name of person off | ering employment. | | |
| Company name (if appl | icable) and physical and po | stal addresses. | |
| Telephone (daytime) Fax | Email | Telephone | e (evening) |
| Website | | | Mobile |
| □ No | ess you operate (for examp | on by employer' | |
| | | | |
| How long has your com | npany been in operation? | | |
| How many people do ye | ou currently employ? | | |
| Have you made anybod | dy redundant from this com ople and their positions. | ıpany or business ir | n the last six months? |
| | | | |
| Have you recently beer redundancies? | ו through, or are you currer | ntly in, a consultatic | on process in relation to potential |
| Yes State how many em | ployees could be affected, and the | eir positions. | |
| | | | |
| | | | |

| | e the names of any other companies or businesses you operate. |
|--------|--|
| | |
| | |
| | |
| | |
| ction | B Position details |
| vide d | etails of the position you have offered to the potential employee named in this application. |
| Job ti | itle |
| New | 5CO occupation title, occupation code (if known), and skill level (if known). (ANZSCO is the Australian and Zealand Standard Classification of Occupations. Most New Zealand occupations are listed in the ANZSCO a six-digit occupation code and a skill level. For more information see www.immigration.govt.nz/anzsco.) |
| ANZS | SCO occupation title |
| ANZS | SCO occupation code ANZSCO skill level (if known) |
| The a | address of the place of employment (if different from that stated in question A_2). |
| | |
| | |
| | |
| The t | ype of work, duties and responsibilities. |
| | |
| | |
| Deta | ils of pay and conditions of employment (for example, holidays). |
| | |
| | |
| | |
| Hour | s of work. |
| The c | luration of the job. |
| Quali | ifications required. |
| 1 | |
| | |
| | |
| | of experience required |
| Туре | of experience required. |
| | |
| Leng | of experience required. th of experience required. |

| B11 Does t | he worker require occupational registration in New Zealand? |
|----------------------------|--|
| Yes | The applicant will need to produce evidence that this has been obtained at the time of submitting the work visa application. |
| No | |
| Section | Overseas recruitment based on non-availability of New Zealand residents |
| | n must be completed if the person you have offered employment to is applying under the Essential category unless: |
| | on has been invited to apply under the Skilled Migrant Category, or |
| - | pation is on the Essential Skills in Demand Lists and the person meets the qualification and/or work ce requirements of the list. |
| | ttempts you have made to recruit New Zealand citizens or residence class visa holders to fill the position ng the questions set out below. |
| C1 Have y | ou listed the vacancy with the Ministry of Social Development (MSD) – Work and Income? |
| Yes | You need to attach any correspondence you have had with a work broker, copies of any listings and the outcome of those listings. |
| No | This may delay the application of the person you have offered employment to. |
| C2 Have y | ou used other advertising media such as national newspapers, internet etc? |
| Yes | You need to attach dated copies of the advertising and receipts for paid advertising. The evidence needs to show the duration and frequency of advertising. You also need to attach evidence of the outcome of your advertising. |
| No | This may delay the application of the person you have offered employment to. |
| C3 Did yo | u list the vacancy with a recruitment agency? |
| 🗌 Yes | Attach a dated letter from the recruitment agency, outlining any recruitment they undertook, including why any New Zealand applicants were not suitable. |
| No | |
| C4 Have y | ou made efforts as an employer to train New Zealanders to fill the positions available? |
| Yes | Attach documents outlining the types of training provided and the outcome of that training. |
| No | Provide a written statement outlining why you have not made efforts to train New Zealanders. |
| (see B2), yo New Zealar | of employment is in the Canterbury region and the position is an ANZSCO skill level 3–5 occupation ou must engage with the Canterbury Skills and Employment Hub when attempting to recruit nd citizens or residence class visa holders to fill the position. To contact the Canterbury Skills and nt Hub, see www.opportunitycanterbury.org.nz or phone 0800 CanHub (0800 226 482). |
| C5 Have y | ou engaged with the Canterbury Skills and Employment Hub? |
| Yes | You must attach the final letter from the Canterbury Skills and Employment Hub showing the outcome of your engagement with them. |
| No | This may delay the application of the person you have offered employment to. |
| | ment is in the Canterbury region if the entire or principal place of work is within the territorial authorities of Christchurch City Council, t Council and Waimakariri District Council. |
| Section I | D Declaration by employer |
| l understan | d the questions in, and contents of, this form, and the information I have provided is true and correct. |
| |) INZ seeking information concerning my compliance with New Zealand's immigration and employment ny records held by the Ministry of Business, Innovation and Employment. |
| Signature | Date D D M M Y Y Y Y |
| Name | |
| Job title or (| position |
| | New Zealand Government |