



# Golden Summit Immigration Consultancy

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## New Zealand Immigration for Nurses

Immigration Advisor \_\_\_\_\_

Date \_\_\_\_\_

### APPLICANT'S PERSONAL DATA PERSONAL INFORMATION:

Last Name:		Name of Spouse :	
First Name :		Age :	
Middle Name :		Occupation :	
<b>ADDRESS</b>			
House No. :		Street :	
Barangay :		City :	
Province :		Zip Code :	
<b>CONTACT DETAILS</b> Home : _____ Work : _____ Mobile : _____ Email : _____		Name of School and Degree Obtained:	
		Birthday : _____ Sex : _____ Age : _____ Civil Status : _____	
Total No. of years Working : _____ Have you been to NZ before? <b>YES</b> <b>NO</b>		Name and Age of Children: _____ Do you have any relative in NZ? <b>YES</b> <b>NO</b> Relationship : _____ No. of years in NZ : _____	
Purpose of Visit? _____ How long? _____		Have you applied for a visa to NZ before? <b>YES</b> <b>NO</b>	

### EDUCATION : (College, Post Graduate Degree/Units...)

INCLUSIVE MONTH/YEAR	NAME OF SCHOOL	DEGREE OBTAINED

### PROFESSIONAL EXAMINATIONS TAKEN : (e.g. : Civil Service, PRC, IELTS...)

INCLUSIVE MONTH/YEAR	NAME OF EXAMINATION	RATING OBTAINED

### WORK EXPERIENCE : (Starting from present employment to previous work experiences...)

INCLUSIVE MONTH/YEAR	NAME OF COMPANY	POSITION

### REFERRALS : (Professionals who might be interested in New Zealand Immigration...)

NAME	CONTACT DETAILS	DEGREE OBTAINED

**“ WE ARE NOT A RECRUITMENT AGENCY ”**