



Golden Summit Immigration Consultancy

Unit 303 Cebu CL Properties Bldg., 14 Juana Osmeña corner J.Llorente Streets, Cebu City 6000 Philippines
 Telefax No. : (6332) 255-4370 • (6332)412-5446

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

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 ”