



Application for Admission as a

NGĀ POU AMORANGI STUDENT

WHICH PROGRAMME ARE YOU APPLYING FOR?

- Ngā Pou Amorangi Certificate (One Year part-time)
- Ngā Pou Amorangi Certificate (Three Years part-time)
- Ngā Pou Amorangi Diploma (3 years of full-time theological study along with 3 years of Ngā Pou Amorangi)

Please return this form to Sandy Kerr
 Kaiārahi-Rangahau Māori
 sandy.kerr@carey.ac.nz
 or post to: Carey Baptist College
 PO Box 12149 Penrose, Auckland 1642

FOR NGĀ POU AMORANGI DIPLOMA STUDENTS ONLY:

Do you already have a theological qualification? Please specify:
 qualification, date gained, institution...

Are you enrolling in a theological qualification concurrent with Ngā Pou Amorangi?

- Carey's Intermission Programme (NZQA Level 4/5, one year)
- Carey's Diploma in Christian Studies full-time (NZQA Level 5, one year)
- Carey's Diploma in Christian Studies part-time (NZQA Level 5, up to 3 years)
- Carey's Bachelor of Applied Theology full-time (NZQA Levels 5-7, 3 years)
- Carey's Bachelor of Applied Theology part-time (NZQA Levels 5-7, up to 6 years)
- Carey's Masters of Applied Theology full-time (NZQA Levels 8-9, 2 years)
- Carey's Masters of Applied Theology part-time (NZQA Levels 8-9, up to 4 years)
- PhD with Carey supervision
- Other theological study. Please specify:
 Qualification:
 Expected completion Date:
 Theological Institution:

SECTION 1 : PERSONAL

1.0 Title Mr Mrs Ms Miss Other

1.1 Gender Male Female

1.2 First Name

1.3 Preferred Name

1.4 Middle Name(s)

1.5 Surname / Family Name
 (as on your passport, birth certificate, marriage or civil union certificate)

1.6 Other names you have been legally known by
 (maiden name, birth name)

1.7 Date of Birth
day month year

1.8 Age

1.9 Ethnicity Identified with (as many as applies)

1.10 Town and Country of birth

Contact Details

1.11 Mobile Phone

1.12 Email Address

1.13 Present Residential Address:
 Street number and name

 Suburb Town/City

1.14 Marital Status:
 Single Married Other:

1.15 Name of Spouse (if applicable)

1.11 Spouse's Mobile Phone

1.12 Spouse's Email Address

SECTION 2 : WHAKAPAPA

2.0 Iwi (as many as applies)

2.1 Whakapapa (include as much detail as applies)

2.2 Name of Spouse (if applicable)

2.3 Name(s) of Child(ren) / Date of Birth (if applicable)

SECTION 3 : INVOLVEMENT IN TE AO MĀORI

INEXPERIENCED → COMPETENT
1 2 3 4 5

3.0 What is your level of involvement with te ao māori?

3.1 What is your level of te reo māori?

3.2 What is your level of knowledge of tikanga?

3.3 Current service/leadership roles within te ao māori:
(role, where/who with, number of years)

3.4 List previous service/leadership roles within te ao māori:
(role, where/who with, number of years)

SECTION 4 : INVOLVEMENT IN CHURCH LIFE/CHRISTIAN MINISTRY

4.0 Current church Years

4.1 Current involvement in church leadership Years

4.2 List previous involvement in Christian ministry (other than church leadership) (e.g. youth ministry leadership, life group participant, worship leading, etc)

Ministry Organisation

Ministry Roles / Years

SECTION 5 : GENERAL BACKGROUND

5.0 Are you entitled to reside in New Zealand? Yes No

5.1 Do you have a police record? Yes No

If yes, please specify:

5.2 Do you have any physical, intellectual or learning disabilities that might impact your training?

Yes No

If yes, please specify:

5.3 Do you have any medical issues that we should be aware of?

Yes No

If yes, please specify:

5.4 Are you aware of any behaviour issues that may affect your training?

Yes No

If yes, please specify:

5.5 Do you have any mental health or addictions that might impact your training?

Yes No

If yes, please specify:

SECTION 6: EDUCATIONAL BACKGROUND

6.0 List all institutions in which you have been educated or through which you have undertaken any course of study.

I. Secondary School

Name of Institution	Years of Study	Qualifications (or subjects) gained

II. Tertiary Institution (University, Polytech etc.)

Name of Institution	Years of Study	Qualifications (or subjects) gained

III. Trade or Professional course (not listed above)

Name of Institution	Years of Study	Qualifications (or subjects) gained

IV. Bible College or Theological Education (not listed above)

Name of Institution	Years of Study	Qualifications (or subjects) gained

SECTION 7: EMPLOYMENT BACKGROUND

7.0 Present Occupation/Role:

7.1 Present Employer:

7.2 List 2 most recent positions of employment (other than present employment) and the period of time spent in each.

Name of Institution	Years	Occupation/Role

SECTION 8: REFERENCES/ENDORSEMENTS

8.0 Kaumatua/kuia/whānau leader endorsing your application

Name:

Role/Relationship

Address:

Mobile:

Email:

8.1 I give permission for my referees to be contacted:

Yes No

8.2 Please also provide the name and contact details for your pastor and one other referee (preferably an employer)

Pastor's Name:

Mobile:

Email:

Referee Name:

Mobile:

Email:

SECTION 9: DECLARATION

Declaration

I declare that to the best of my knowledge all the information supplied on, and with, 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

signature

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
day	month	year			