# **New Zealand Diploma in Enrolled Nursing (NZ2889)**

# **Additional Requirements**



Applicant's full name

Date of birth

# Satellite/Area

Please tick the satellite/area you are applying for:

Christchurch Timaru West Coast Ashburton

#### Personal statement

Please outline why you have chosen nursing as a career and describe personal qualities and relevant aspects from your life experiences which will enhance your application. Please include information on hobbies, interest and involvement in community activities eg sports groups, church, etc. (Approximately 300 words). Please include with your application.

# **English Language requirements**

Is English your first language? Yes No

If **NO**, provide evidence showing how you meet the English language requirements. Refer to **New Zealand Diploma in Enrolled Nursing** for the English language requirements.

#### Health

While health issues are not usually a barrier to acceptance into the enrolled nursing programme, the following questions help us to determine whether you have any health issues that may affect your ability to practice safely. As some health issues may make it difficult to manage clinical practice and/or full-time study, the selection committee may wish to discuss these with you to determine any support you may require if you are successful with your application.

Do you have any current or long-term physical health issues? Yes No If you answered **yes**, please provide details below:

Do you have any current or long-term mental health issues? Yes No If you answered **yes**, please provide details below:

Do you have any drug or alcohol related problems, or have you received treatment for either in the past?  If you answered <b>yes</b> , please provide details below:	Yes	No
Do you require regular or periodic treatment from medical/health practitioners? If you answered <b>yes</b> , please provide details below:	Yes	No
In the last five years, have you had any major illness requiring medication or other forms		
If you answered <b>yes</b> , please provide details below:	Yes	No
Do you have a learning disability?  If you answered <b>yes</b> , please provide details below:	Yes	No
I confirm I can read and write unassisted in English (because of the requirement to indepand write case notes and other documentation when in clinical practice).	endently	and accurately read
Signed:		
Clinical placement experience out of Christchurch		
Clinical placements may be in the wider Canterbury/West Coast region. You may be expeout of Christchurch and this will be for approximately four weeks. I understand I can expeof Christchurch, during the New Zealand Diploma in Enrolled Nursing programme. I agree	ect to have	e a clinical placement out
Signed: Date:		

## Life/work experience

Please attach a copy of your CV that includes a chronological summary of work history (part time, full time, voluntary, including care of own children) for the preceding five years.

#### Convictions against the law

At the completion of the New Zealand Diploma in Enrolled Nursing programme leading to registration as a registered nurse or enrolled nurse, students are required to sit and pass the Nursing Council State Final Examination.

The application for registration asks students to disclose if they have been convicted of any offence against the law.

It is therefore our policy to alert applicants to this requirement and to ask them to make a similar declaration when they first apply. This information is sought so potential problems regarding registration as a nurse and access to clinical experiences may be discussed.

As all accepted applicants are police vetted through the enrolment process, it is important this initial declaration is correct. If an applicant provides information that is proved to be false/misleading, the application/enrolment may be declined/withdrawn.

An interview may be arranged to discuss any conviction declared.

Have you ever been convicted of any offence against the law (apart from minor traffic convictions)? If <b>yes</b> , please provide details.		No
I hereby declare that the information I have given above is true and correct; no information which could have bearing on my registration as an enrolled nurse has been withheld; I understand that making a false declara offence under the Crimes Act 1961.		
l agree to notify the Faculty of Health, Science and Sustainability if there is any change to my situation through duration of the programme.	ghout the	
Full name:		
Signed:		
Dated:		
Have you ever been refused enrolment by a tertiary provider in New Zealand or overseas? If <b>yes</b> , please explain.	Yes	No
Have you ever been enrolled in a nursing programme in New Zealand or overseas? If <b>yes</b> , please explain.	Yes	No
Have you ever been refused registration as a health professional in New Zealand or overseas? If <b>yes</b> , please explain.	Yes	No
Have you been subject to a disciplinary investigation by any regulatory authority other than the Nursing Cou New Zealand (e.g., Social Workers Registration Board, Teachers Registration Board etc.) in New Zealand or o		No
Declaration		
I certify I have read and understood all information on this form and all information in this application is true I understand the material I have supplied becomes the property of the Faculty of Health, Science and Sustain as personal information, it is protected by the Privacy Act 1993.		
Signed:		
Dated:		

## **Application checklist**

An Admission & Enrolment Form (or I have applied online)

Evidence of how you meet the Academic Entry Requirements

- Verified transcript and award certificate, or
- NZQA Record of Achievement

If you are currently studying, please note below the qualification name, level and who you are studying this qualification with. If it is NCEA Level 3, please include the subjects.

A Personal Statement (see page 1)

TWO referee reports (not from a friend or relative)

Verified evidence of English Language results (if applicable)

Two forms of verified ID: a primary form of ID such as a New Zealand birth certificate, New Zealand passport or overseas passport with residency status, as well as a secondary form of ID such as a New Zealand driver's licence for police vetting purposes

## If selected for the programme

If you are selected for this programme, the following additional information will be required, details will be included with your confirmation of enrolment.

- 1 New Zealand Police Vetting Service Request and Consent Form
  - This form will be entered by Ara within the New Zealand Police Vetting Agency Portal and returned in confidence to the Faculty Head or delegated authority.
- 2 A current First Aid Certificate with evidence that the course was at least 8 hours in length and includes the NZQF unit standards 6401 and 6402.
- 3 Any relevant Health Authority requirements which may include providing evidence of immunity to nominated diseases.