

Expression of Interest Form

Skilled Migrant Category

Making an Expression of Interest (EOI)

The easiest way to create an EOI for residence under the Skilled Migrant Category is to submit one electronically by logging into Immigration New Zealand's Online Services (www.immigration.govt.nz). However, if you wish to make a paper EOI instead, you need to complete this form and submit it along with the correct fee payment. See www.immigration.govt.nz/fees for fee and location details.

Before you begin

Familiarise yourself with the Skilled Migrant Category process and criteria:

- Go to our website (www.immigration.govt.nz) and view details of the Skilled Migrant Category Resident Visa,
- · Complete our online points indicator, and
- Download a copy of the Skilled Migrant Category Expression of Interest Guide (INZ 1101) ('the guide') to refer to while completing your EOI.

Throughout this form, you will see references to terms that are explained in more detail on the website or in the 'SMC terms' section of the guide—look for () See the guide for term(s): followed by the applicable term(s).

Completing this form

You must complete all the questions in the form, unless the form specifically directs you straight to another question or section further on. If a question does not apply to you, mark it 'N/A' or 'not applicable'.

Fill in the claimed boxes as you complete the form. Refer to the points schedule in the guide to see how many points you can claim. If you leave questions that qualify for the award of points blank, this will be interpreted as a 'no' answer. If you fail to answer any questions or to mark them clearly as 'N/A' or 'not applicable', we may send the incomplete form back to you and it will not be submitted into the EOI Pool until all the necessary information is provided.

Do not send supporting documentation with your EOI form. Include only any additional sheets required to complete questions in the form.

If you are found to have provided false information or to have omitted any relevant information in your EOI, any subsequent application may be declined and you will not have the right to appeal against any decision to decline your application.

After you submit your EOI

After you submit your EOI, we will check that you are eligible to be entered into the EOI Pool. You must meet the following prerequisites:

- character
- age
- health
- the minimum threshold of 100 points for
- English language
- employability and capacity building factors.

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.



Se	ction A Identity
In th	nis section we need to confirm that you are who you say you are.
	Name(s) as shown in passport
A1	Family/last name
A2	Given/first name(s)
A3	Provide all other names you are known by or have ever been known by
A 4	Preferred title Mr Mrs Ms Miss Dr Other (specify)
A5	Gender 🗌 Male 🗌 Female
A6	Points
AU	Date of birth DM_MY_Y_Y_Y_Y_ You are eligible for points for your age up to the age of 56. If you are aged 56 and over your EOI will not be accepted into the Pool and you should not complete any further questions.
A7	Town/city of birth
	Country of birth
A8	Birth certificate number
	Name of the issuing authority
A9	Main country of citizenship
A10	Details of all passports held.
	Passport 1
	Number Country
	Expiry date LDDMMMJYYYYY ISsue date DDDMMMJYYYYY Place of issue
	Family/last name as shown in passport Given/first name(s) as shown in passport
	Passport 2
	Number Country
	Expiry date DIDIMINITY I Issue date DIDIMINITY Place of issue
	Family/last name as shown in passport Given/first name(s) as shown in passport
	Passport 3
	Number Country
	Expiry date BID M M Y Y Y Y Y S Issue date BID M M Y Y Y Y Y P Place of issue
	Family/last name as shown in passport Given/first name(s) as shown in passport Image: shown in passport Image: shown in passport

11 List other citizensh	hips you hold						
2 Provide a national	ID number, or oth	ner unique ident	tifier iss	ued to you by a	ny goverr	iment.	
National ID numbe	ır						
Country							
B List all countries, in last 10 years. Inclu that you live in nov	de all countries w						
From MIMILY IY	To	Country					
From MIMILY Y	To	Country					
From MIMILY Y	To	Country					
From MIMILY Y	To	Country					
From MIMILY Y	To	Country					
From MIMILY IY	To	Country					
From MIMILY IY	To	Country					
From	To	Country					
From MIMILY Y	To	Country					
From	То	Country					
Please note: It is manda • the applicant's count • each country in which Provide your resid your permanent pl Address	rry (or countries) of cit h the applicant has live lential address an	izenship; and ed for 12 months or d contact detail	r more (wh ils (do no	ether on one visit c	or intermitte	ntly) in the las	t 10 years.
Telephone (daytim	ıe)			Telephone (eve	ning)		
Fax		Email					
lf different from your n If you are in New Zealar Immigration Act.							'ew Zealand
Number and stree	t name/PO Box						
Suburb	L						
City, PIN/ZIP code							
Country							

If your residential address is in New Zealand, also provide your last residential address in your main country of citizenship.

	Number and street name/PO Box
	Suburb
	City, PIN/ZIP code
	Country
A15	What is your current partnership status? (Select one only) Married/in civil union Single Partnership/De facto Separated Engaged Widowed Divorced
	Note: If you have a partner it is important to declare at 4η whether they are to be included in this EOI or not.
A16	If you have selected Married/in civil union, Partnership or Engaged, do you meet the minimum requirements for recognition of partnerships, as defined in the guide? (Please ensure you have read and understood these instructions before selecting yes.) Yes No
0	See the guide for term(s): Partner , Partnership
A17	Will your partner be included in your residence application? 🗌 Yes 🗌 No
	If no, please explain why your partner is not being included in your residence application?
A18	Have you received immigration advice on this EOI?
Ø	You can find a definition of immigration advice at www.immigration.govt.nz/advice.
	Ves. Make sure that your immigration adviser completes Section Q: Immigration adviser's details.
	L No
A19	Indicate who you would prefer INZ to communicate directly with. (Select one only)
	The person listed in Section R: Declaration by person assisting the applicant.
A20	What is your preferred means of communication in relation to this EOI? 🗌 Email 🗌 Letter
A21	Have you previously submitted an EOI? 🗌 Yes 🗌 No
	If you have previously submitted an EOI, please provide the EOI number here, if known.

Section B Character

	is section we need to confirm that you are of good character which is a prerequisite of the Skilled Migrant gory. Provide the following details about your character.
	stions 🖻 to 📧 relate to sections 15 and 16 of the Immigration Act. People described in sections 15 and 16 of the igration Act cannot ordinarily be granted residence in New Zealand.
	stions B7 to B15 relate to other character requirements. People described in questions B10 to B15 may require aracter waiver to be granted residence.
B1	Have you ever been sentenced to imprisonment for a term of five years or more (including any suspended sentences or any expunged criminal records)? 🗌 Yes 🗌 No
B2	Have you been sentenced to imprisonment for a term of 12 months or more within the last 10 years (including any suspended sentences or any expunged criminal records)? 🗌 Yes 🗌 No
B 3	Are you subject to a period of prohibition under the Immigration Act 2009? 🗌 Yes 🗌 No
B4	Have you ever been: • excluded
B5	Have you been involved in any terrorist activities or supported similar violent activities? 🗌 Yes 🗌 No
B6	Have you ever been a member of, or adhered to, any terrorist organisation? 🗌 Yes 🗌 No
B7	Have you been involved in any drug trading or trafficking? 🗌 Yes 🗌 No
B8	Have you been a member of, or belonged to, any group with criminal objectives? 🗌 Yes 🗌 No
B9	Have you been a member of, or belonged to, any group that has engaged in or supported criminal activities?
	If you answered Yes to any of questions B1 to B9, you must provide a full explanation about the surrounding circumstances. If, having considered your explanation, INZ assesses that you are a person to whom sections 15 and 16 of the Immigration Act applies, your EOI cannot be accepted into the Pool.
B10	Are you currently: • under investigation Yes No • wanted for questioning Yes No • facing charges Yes No for any offence in any country?
B11	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
B12	Have you ever been refused entry to any country, excluding New Zealand? 🗌 Yes 🗌 No

B13 Have you been (or are you currently) a member of an organisation or group which had/has objectives or principles based on hostility against people or groups on the basis of colour, race or ethnic/national origins; or an assumption that persons of a particular race or colour are inherently inferior or superior to other races or colours? Yes No

B14 Have you at any time in a public speech or public comments, or public broadcast, or in publicly distributing or publishing a document, argued that one race or colour is inherently inferior or superior to another race or colour; or used language intended to encourage hostility or ill will against any person or group of persons on the basis of colour, race, or ethnic or national origins of that person or group? U Yes U No

Bis Have you had (or do you 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? See Yes

If you answered 'yes' to any of the questions Bio to Bis, you must provide a full explanation about the surrounding circumstances. This includes full details of any charges, convictions and the sentence or penalty imposed. If your EOI is selected from the Pool, you may be asked to provide a police certificate or other relevant information to enable INZ to fully consider those circumstances.

Attach additional sheets if necessary.

Section C Health

In this section we need to confirm that you meet a minimum standard of health, which is a prerequisite of the Skilled Migrant Category. Providing accurate information about your health status is very important.

Questions 🖸 to 🖓 list medical conditions for which a medical waiver cannot be granted. People with these conditions cannot ordinarily be granted residence in New Zealand.

	Read the leaflet <i>Health Requirements (INZ 1121)</i> for more information.
C 1	Do you require or are you likely to require dialysis treatment in the immediate future? 🗌 Yes 🗌 No
C2	Do you have tuberculosis (TB)? 🗌 Yes 🗌 No
C3	Do you have severe haemophilia? 🗌 Yes 🗌 No
C 4	Do you have a physical incapacity that requires full-time care? 🗌 Yes 🗌 No
	If you answered Yes to any of questions 🔄 to 🔄, you must provide an explanation of your medical condition. If, having considered your explanation, we assess that your medical condition is one for which a medical waiver cannot be granted, your EOI cannot be accepted into the Pool.
C5	Have you been exposed to, or diagnosed with, any infectious or communicable diseases? Yes No

Do you have any condition that is likely to require ongoing treatment or medication?	🗌 Yes	🗌 No
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If you answered Yes to any of questions c_5 to c_7 , you must provide an explanation of your medical condition. If your EOI is selected from the Pool, you may be asked to provide a medical certificate to confirm this information to enable INZ to fully consider those circumstances.

Section D English language ability

C7

In this section we ask you to confirm that you meet the minimum standard of English language, which is a prerequisite of the Skilled Migrant Category. If you do not meet the minimum standard of English, your EOI cannot be accepted into the Pool.

🕖 Se	e the guide for term(s):	Minimum standard of English ,	Recognised qualification ,	New Zealand qualification	
D1	An English la English B2 F score of 79 c	neet the minimum standar anguage test with the requ irst (FCE) or B2 First for Sch or more, PTE Academic ove Reading, Writing and Speak	lired score (IELTS overall nools (FCE for Schools) o rall score o <u>f 5</u> 8 or more,	band score of 6.5 or mo verall score of 176 or mo	ore, TOEFL iBT overall
	•	of Canada, the United King ork or education in one or r	•		
	Canada, Nev	d qualification comparable v Zealand, the Republic of I dy undertaken for at least	reland, the United Kingd	lom or the United State	s of America as a
	in Australia,	d qualification comparable Canada, New Zealand, the a result of study undertake	Republic of Ireland, the	United Kingdom or the	United States of
	5	e statement you select, INZ may a mum standard of English, your EC	, , , ,	5 5 ,	
D2	relevant test detai	eted an English language te Is that will allow us to verif unique number assigned t	y your test results (e.g.	test report form numbe	er, candidate/test
D3	What was the date	you sat your test and the	score/s?	ΥΥΥΥ	

English language test score/s

Sections E and F

The following sections outline the factors which qualify for points. To submit your EOI, you must meet the minimum threshold of 100 points.

Se	ection E Skilled employment in New Zealand
	his section you qualify for points and bonus points if you have current skilled employment in New Zealand or offer of skilled employment in New Zealand.
E1	Are you claiming points for skilled employment, and declare that you meet the criteria? (Select one only)
	NO Go to E10 CLAIMED
E2	What is your main occupation in New Zealand? Provide the ANZSCO code and occupation most closely matching your employment or job offer
E3	Indicate whether your job is skilled because it meets the requirements for skilled employment.
	(Select one only)
	It is an ANZSCO Skill Level 1, 2 or 3 job (and meets associated requirements)
	It is not an ANZSCO Skill Level 1, 2 or 3 job (and meets requirements for jobs not at ANZSCO skill level 1, 2 or 3)
	Give a detailed explanation in support of your claim that your job is skilled. You should explain what is in your job description and your occupational tasks. Also explain how you are suitably qualified in terms of the training and/or experience requirements for your occupation. State what relevant recognised qualifications, relevant work experience or occupational registration you have.

Attach additional sheets if necessary.

E4	Provide the following details for the skilled employment listed above.
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	Employer contact name (manager)	
	Employer's job title/position	
	Business/organisation name	
	New Zealand Business Number	
	Number and street name	
	Suburb/City	
	County/Province/State PIN/ZIP	
	Country	
	Telephone	
	(Country code/Area code/Telephone number) (eg + 12 3 456 7890)	
	Email Website	
	When did you start working for this employer?	
E5	Provide details of your remuneration for this job.	
	What is the annual salary for this job in New Zealand dollars	
	What is the rate of pay per hour in New Zealand dollars	
	If you are paid on a per activity basis, what was your total remuneration in New Zealand dollars for a previous two year period in New Zealand in this job?	
E6	How many hours are you required to work for this employer per week?	
E7	Is your skilled employment outside Auckland? () See the guide for term(s): Employment outside Auckland	TC
E8	Is your salary at or above the high remuneration threshold? () See the guide for term(s): High remuneration	
E9	Is your skilled employment in one of the areas of absolute skills shortage? If yes, provide the absolute skills shortage occupation name. Refer to the Long Term Skill Shortage List (LTSSL): http://skillshortages.immigration.govt.nz.	
	Absolute skills shortage occupation name	
E10	To do your job in New Zealand, do you require full or provisional occupational registration? Refer term See the guide for term(s): Occupational registration	
		I
	New Zealand Occupational Registration Number (if applicable)	
	Name of the New Zealand Occupational Registration Body	

	ction F Recognised qualification(s)
n tl	nis section you qualify for points and bonus points if you have one or more recognised qualifications.
	recommended that you first read about which qualifications are recognised for the award of points under Skilled Migrant Category Expression of Interest Guide (INZ 1101).
F1	Are you claiming points for a recognised qualification(s) and declaring that you meet criteria?
	See the guide for term(s): Recognised qualification
	Yes No
	How many qualifications are you submitting?
	Answer questions F_2 to F_6 for each of your qualifications. You should attach additional sheets if necessary; you may wish to photocopy this section to use.
F2	Provide the details of the recognised qualification(s) for which you are claiming points. If claiming points for a postgraduate qualification, also add details of your undergraduate qualifications.
	Name of qualification (please enter the name of the qualification, exactly as it appears on the certificate)
	Date obtained Department Major area of study
	Date commenced studies DIDIMINIAN Date completed studies DIDIMINIAN DATE COMPLETED STUDIES
	Institution name
	New Zealand Business Number (if applicable)
	Number and street name
	Number and street name
	Number and street name Suburb City
	Suburb City
	Suburb City County/Province/State PIN/ZIP
	Suburb City County/Province/State PIN/ZIP Country
	Suburb City County/Province/State PIN/ZIP Country Telephone Student ID#
F3	Suburb City County/Province/State PIN/ZIP Country Telephone Telephone Student ID# (Country code/Area code/Telephone number) (eg + 12 3 456 7890)
F3	Suburb Suburb County/Province/State Country Country Telephone Student ID# (Country code/Area code/Telephone number) (eg + 12 3 456 7890) Attach additional sheets if necessary. You may wish to photocopy this section to use. Is this qualification on the List of Qualifications Exempt from Assessment (LQEA)? Or has an Occupational
F3	Suburb City County/Province/State PIN/ZIP Country Student ID# Telephone Student ID# (Country code/Area code/Telephone number) (eg + 12 3 456 7890) Attach additional sheets if necessary. You may wish to photocopy this section to use. Is this qualification on the List of Qualifications Exempt from Assessment (LQEA)? Or has an Occupational Registration Body assessed your qualification(s) as comparable to a New Zealand qualification?
F3	Suburb Suburb County/Province/State Country Country Country Telephone Student ID# (Country code/Area code/Telephone number) (eg + 12 3 456 7890) Attach additional sheets if necessary. You may wish to photocopy this section to use. Is this qualification on the List of Qualifications Exempt from Assessment (LQEA)? Or has an Occupational Registration Body assessed your qualification(s) as comparable to a New Zealand qualification? Image: Country code/free provides and comparable to a New Zealand qualification?
F3	Suburb City Suburb PIN/ZIP Country PIN/ZIP Country Student ID# Telephone Student ID# (Country code/Area code/Telephone number) (eg + 12 3 456 7890) Attach additional sheets if necessary. You may wish to photocopy this section to use. Is this qualification on the List of Qualifications Exempt from Assessment (LQEA)? Or has an Occupational Registration Body assessed your qualification(s) as comparable to a New Zealand qualification? See the guide for term(s): Recognised qualification Yes Provide the level of your qualification
F3	Suburb City County/Province/State PIN/ZIP Country PIN/ZIP Country Student ID# (Country code/Area code/Telephone number) (eg + 12 3 456 7890) Attach additional sheets if necessary. You may wish to photocopy this section to use. Is this qualification on the List of Qualifications Exempt from Assessment (LQEA)? Or has an Occupational Registration Body assessed your qualification(s) as comparable to a New Zealand qualification? See the guide for term(s): Recognised qualification Yes Provide the level of your qualification Occupational registration No No Note: If the qualification is on the LQEA all the requirements of the list must be met including the name of the qualification, the awarding institution and the date it was awarded.
	Suburb City County/Province/State PIN/ZIP Country Telephone Student ID# (Country code/Area code/Telephone number) (eg + 12 3 456 7890) Attach additional sheets if necessary. You may wish to photocopy this section to use. Is this qualification on the List of Qualifications Exempt from Assessment (LQEA)? Or has an Occupational Registration Body assessed your qualification (s) as comparable to a New Zealand qualification? Is the guide for term(s): Recognised qualification Ves Provide the level of your qualification Occupational registration No No Note: If the qualification is on the LQEA all the requirements of the list must be met including the name of the qualification, the awarding institution and the date it was awarded.
	Suburb City County/Province/State PIN/ZIP Country PIN/ZIP Country Student ID# (Country code/Area code/Telephone number) (eg + 12 3 456 7890) Student ID# Attach additional sheets if necessary. You may wish to photocopy this section to use. Is this qualification on the List of Qualifications Exempt from Assessment (LQEA)? Or has an Occupational Registration Body assessed your qualification(s) as comparable to a New Zealand qualification? See the guide for term(s): Recognised qualification Yes Provide the level of your qualification No Note: If the qualification is on the LQEA all the requirements of the list must be met including the name of the qualification, the awarding institution and the date it was awarded. Has your qualification been assessed by the NZQA? See the guide for term(s):
	Suburb City County/Province/State PIN/ZIP Country PIN/ZIP Country Student ID# (Country code/Area code/Telephone number) (eg + 12 3 456 7890) Student ID# Attach additional sheets if necessary. You may wish to photocopy this section to use. Is this qualification on the List of Qualifications Exempt from Assessment (LQEA)? Or has an Occupational Registration Body assessed your qualification(s) as comparable to a New Zealand qualification? If yes Provide the level of your qualification Occupational registration No Note: If the qualification is on the LQEA all the requirements of the list must be met including the name of the qualification, the awarding Institution and the date it was awarded. Has your qualification been assessed by the NZQA? See the guide for term(s): International Qualifications Assessment (IQA) Yes Provide assessment details below No Go to Fs.

	Provide level of qualification	
∐ No	Go to F6.	
What N	lew Zealand qualification was your qualification assessed as being comparable with?	
	have a bachelor degree gained in New Zealand following at least two years of full time study w Zealand university or other New Zealand-based tertiary training institution?	
🗌 Yes	□ No	
Framev	have a recognised postgraduate qualification (at levels 8, 9 or 10 on the New Zealand Qualifications vork) gained in New Zealand following at least one year full-time study at a New Zealand-based ity or other New Zealand-based tertiary training institution?	C
🗌 Yes	□ No	
Framev	have a recognised postgraduate qualification (at levels 9 or 10 on the New Zealand Qualifications vork) gained in New Zealand following at least two years of full-time study at a New Zealand-based ity or other New Zealand-based tertiary training institution?	Ċ
🗌 Yes	No	
at leve	started studying towards a New Zealand qualification or hold a New Zealand qualification Is 4 to 8 on the New Zealand Qualifications Framework as at 24 July 2011 and you have not d points under questions $\overline{F_7}$ to $\overline{F_9}$, you must complete questions $\overline{F_{10}}$ and $\overline{F_{11}}$.	
Have ye or more	ou studied full-time in New Zealand towards a New Zealand recognised qualification for two years e?	
		. 1
🗌 Yes	No	
Do you	L No have a recognised basic New Zealand qualification (at levels 4–8 on the New Zealand Qualifications vork) awarded from a New Zealand university or tertiary training institute?	C
Do you Framev	have a recognised basic New Zealand qualification (at levels 4–8 on the New Zealand Qualifications	
Do you Framev	have a recognised basic New Zealand qualification (at levels 4–8 on the New Zealand Qualifications vork) awarded from a New Zealand university or tertiary training institute?	
Do you Framev	have a recognised basic New Zealand qualification (at levels 4–8 on the New Zealand Qualifications vork) awarded from a New Zealand university or tertiary training institute?	
Do you Framev Yes Name o	have a recognised basic New Zealand qualification (at levels 4–8 on the New Zealand Qualifications vork) awarded from a New Zealand university or tertiary training institute?	
Do you Framev Yes Name o Date ol	have a recognised basic New Zealand qualification (at levels 4–8 on the New Zealand Qualifications vork) awarded from a New Zealand university or tertiary training institute?	
Do you Framev Yes Name o Date ol Date co	have a recognised basic New Zealand qualification (at levels 4–8 on the New Zealand Qualifications vork) awarded from a New Zealand university or tertiary training institute?	
Do you Framev Yes Name o Date ol Date co Institut	have a recognised basic New Zealand qualification (at levels 4–8 on the New Zealand Qualifications vork) awarded from a New Zealand university or tertiary training institute?	
Do you Framev Yes Name o Date ol Date co Institut	have a recognised basic New Zealand qualification (at levels 4–8 on the New Zealand Qualifications vork) awarded from a New Zealand university or tertiary training institute?	
Do you Framev Yes Name o Date ol Date co Institut	have a recognised basic New Zealand qualification (at levels 4–8 on the New Zealand Qualifications vork) awarded from a New Zealand university or tertiary training institute?	
Do you Framev Yes Name o Date ol Date co Institut	have a recognised basic New Zealand qualification (at levels 4–8 on the New Zealand Qualifications vork) awarded from a New Zealand university or tertiary training institute?	
Do you Framev Yes Name o Date ol Date ol Date co Institut New Ze Numbe Suburb	have a recognised basic New Zealand qualification (at levels 4–8 on the New Zealand Qualifications vork) awarded from a New Zealand university or tertiary training institute?	

Section G Skilled work experience

In this section we recognise the importance of skills and experience gained through your previous employment.

Note: If you do not have current skilled employment in New Zealand or an offer of skilled employment in New Zealand, or if your work experience is not in an area of absolute skills shortage, you can only qualify for points for your work experience if it was gained in a labour market that is comparable to New Zealand. Bonus points for skilled work experience (such as points for skilled work experience in New Zealand) can only be claimed if you are claiming points for at least 2 years of skilled work experience in total.

See the guide for term(s): Skilled work experience Comparable labour market

	LП	l
	-	

How many separate periods of work experience are you claiming points for?

Complete this section for each separate period of skilled work experience you are claiming points for. The periods of work your provide details for should match the total number of years of work experience claimed in G3. You should attach additional sheets if necessary; you may wish to photocopy this section to use.

Work experience

work experience		
From To To		
Occupation name Provide the ANZSCO	code and occupation most closely match	ing the employment
Your job title/position held		
Type of employment		
🗌 Volunteer	Self-employed	Independent contractor
Full-time employee	Part-time employee	
		gory is employment that amounts to, ess than 30 hours per week, confirm your
Business/organisation name		
New Zealand Business Number (if	applicable)	For help search: www.nzbn.govt.nz
Number and street name		
Suburb	City	
County/Province/State		PIN/ZIP
Country	Country employer is	domiciled in
Telephone	Contact	name
(Country code/Area code/Telephone numbe	er) (eg + 12 3 456 7890)	
Email	Website	
how the employment was consiste	ent with the description for that on the term of t	eriod of work experience, you should explain occupation as set out in the ANZSCO. ant work experience or occupational oyment.

Attach additional sheets if necessary.

G2	Are you claiming points for at least 1 year or more of skilled work experience in New Zealand? Ensure you hav captured the details of this work experience in जि.	'e
	Note: Bonus points for skilled work experience in New Zealand can only be claimed if you are claiming points for at least 2 years of skille experience in total.	d work
	Yes—1 year or more	POINTS
		CLAIMED
G3	Indicate the total number of years of skilled work experience. Include any New Zealand work experience indic in 62. Ensure you have captured the details of this work experience in 61.	ated
	See the guide for term(s): Skilled work experience in New Zealand	
	2 but less than 4 years 4 but less than 6 years 6 but less than 8 years	POINTS
	8 but less than 10 years 10 years or more None of these	
G4	Indicate the total number of years of work experience in an area of absolute skills shortage.	ULAINED
	See the guide for term(s): Area of Absolute Skills Shortage	
	🗌 2 but less than 6 years 🗌 6 years and over 🗌 None of these	POINTS
	Absolute skills shortage occupation name	CLAIMED
Se	ection H Partner's identity	
	this section we need to gather and confirm your partner's personal details. You must provide this informa	ation
	en if your partner is not intending to apply for residence with you. me as shown in passport	
H		
п	Family/last name	
H2	Given/first name(s)	
H3	Provide all other names you are known by or have ever been known by	
H4	Preferred title Mr 🗌 Mrs 🗌 Ms 🗌 Miss 🗌 Dr 🗌 other (specify)	
H5	Gender 🗌 Male 🗌 Female	
H6	Date of birth	
H7	Country of birth	
	Place of birth (ie town, city, or province)	
H8	Provide your partner's birth certificate number and the name of the issuing authority.	
	Birth certificate number	
	Name of the issuing authority	
H9		ںــــــــــــــــــــــــــــــــــــ
	······	

Details of all passports held by you	ur partner.
Passport 1	
Number	Country
Expiry date	Issue date Place of issue
Family/last name as shown in pass	sport Given/first name(s) as shown in passport
Passport 2	
Number	Country
Expiry date	Issue date DIDIMINICY Y Place of issue
Family/last name as shown in pass	sport Given/first name(s) as shown in passport
Passport 3	
Number	Country
Expiry dateM_M_LY_YYY	Issue date BIDIMINICY Y Place of issue
Family/last name as shown in pass	sport Given/first name(s) as shown in passport
List any other citizenships currentl	iv held.
,	
	ther unique identifier issued to your partner by any government.
National ID number	Country
List all countries, including all cour in the last 10 years. Include all cour country that you live in now.	ntries of citizenship, your partner has lived in for a total of 12 months or Intries where their stay has been broken by any departures. Start with th
From MINITY To Now	Country
	Country
	Country
	Country
From $\left[M \right] M \right] M \left[M$	Country
From $\begin{bmatrix} M & M & T \\ M & M \end{bmatrix} \begin{bmatrix} Y & Y \\ Y \end{bmatrix}$ To $\begin{bmatrix} M & M & T \\ M & M \end{bmatrix} \begin{bmatrix} Y & Y \\ Y \end{bmatrix}$	Country
	Country
	Country
From $\left[\begin{array}{c} M \\ M \\ M \end{array} \right] \left[Y \\ Y $	
	Country
From MINICIP TO MINICIP	Country

Please note: It is mandatory requirement for applicants for a residence class visa aged 17 and over to obtain a police or similar certificate from:

- the applicant's country (or countries) of citizenship; and
- each country in which the applicant has lived for 12 months or more (whether on one visit or intermittently) in the last 10 years.

H14	Has your partner previously submitted an EOI? 📋 Yes 📋 No If your partner has previously submitted an EOI, please provide the EOI number here, if known
Se	ection I Partner's character
	his section we need to confirm that your partner is of good character, which is a prerequisite of the Skilled rant Category.
	estions \boxed{h} to $\boxed{16}$ relate to sections 15 and 16 of the Immigration Act. People described in sections 15 and 16 he Immigration Act cannot ordinarily be granted residence in New Zealand.
	estion 17 to 185 relate to other character requirements. People described in questions 100 to 185 may require naracter waiver to be granted residence.
h	Has your partner ever been sentenced to imprisonment for a term of five years or more (including any suspended sentences or any expunged criminal records)?
	Yes No
12	Has your partner been sentenced to imprisonment for a term of 12 months or more within the last 10 years (including any suspended sentences or any expunged criminal records)?
	Yes No
13	Is your partner subject to a period of prohibition under the Immigration Act 2009? 🗌 Yes 🗌 No
14	Has your partner ever been: • excluded
l5	Has your partner ever been involved in any terrorist activities or supported similar violent activities?
16	Has your partner ever been a member of, or adhered to, any terrorist organisation? 🗌 Yes 🗌 No
I 7	Has your partner been involved in any drug trading or trafficking? 🗌 Yes 🗌 No
18	Has your partner been a member of, or belonged to, any group with criminal objectives? 🗌 Yes 🗌 No
19	Has your partner been a member of, or belonged to, any group that has engaged in or supported criminal activities?
	If you answered Yes to any of questions h to 9, you must provide a full explanation about the surrounding circumstances. If, having considered your explanation, INZ assesses that you are a person to whom sections 15 and 16 of the Immigration Act applies, your EOI cannot be accepted into the Pool.

110	Is your partner currently: • under investigation Pres No • wanted for questioning Pres No • facing charges Pres No for any offence in any country:
 11	Has your partner 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.
12	Has your partner ever been refused entry to any country, excluding New Zealand? 🗌 Yes 🗌 No
I 13	Has your partner been (or are they currently) a member of an organisation or group which had/has objectives or principles based on hostility against people or groups on the basis of colour, race or ethnic/national origins; or an assumption that persons of a particular race or colour are inherently inferior or superior to other races or colours? Yes Yes No
 14	Has your partner at any time in a public speech or public comments, or public broadcast, or in publicly distributing or publishing a document, argued that one race or colour is inherently inferior or superior to another race or colour; or used language intended to encourage hostility or ill will against any person or group of persons on the basis of colour, race, or ethnic or national origins of that person or group? Yes No
l15	Has your partner had (or does your partner 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? 🗌 Yes 📄 No
	surrounding circumstances. This includes full details of any charges, convictions and the sentence or penalty imposed. If your EOI is selected from the Pool, you may be asked to provide a police certificate or other relevant information to enable INZ to fully consider those circumstances.
	Attach additional sheets if necessary.
Se	ection J Partner's health
of t	his section we need to confirm that your partner meets a minimum standard of health, which is a prerequisite he Skilled Migrant Category. Providing accurate information about your partner's health status is very portant.
	estions h to 4 list medical conditions for which a medical waiver cannot be granted. People with these ditions cannot ordinarily be granted residence in New Zealand.
J1	Does your partner require or are they likely to require dialysis treatment in the immediate future? 🗌 Yes 🗌 No
J2	Does your partner have tuberculosis (TB)? 🗌 Yes 🗌 No
lo.	Does vour partner have severe haemophilia? 🗌 Yes 🗌 No

J4	Does your partner have a physical incapacity that requires full-time care? 🗌 Yes 🗌 No
	If you answered Yes to any of questions n to 4, you must provide an explanation of your partner's medical condition. If, having considered your explanation, we assess that your partner's medical condition is one for which a medical waiver cannot be granted, your EOI cannot be accepted into the Pool.
J5	Has your partner been exposed to, or diagnosed with, any infectious or communicable diseases? 🗌 Yes 🗌 No
J6	ls your partner receiving, or have they received, any treatment for any psychiatric condition or developmental disorder? 🗌 Yes 🔲 No
J7	Does your partner have any condition that is likely to require ongoing treatment or medication? 🗌 Yes 🗌 No
	If you answered Yes to any of questions 15 to 17, you must provide an explanation of your partner's medical condition. If your EOI is selected from the Pool, you may be asked to provide a medical certificate to confirm this information to enable Immigration New Zealand to fully consider those circumstances.
Se	ction K Partner's English language ability
he	information you provide in this section will give us an indication of your partner's English language ability. Meeting minimum standard of English language will assist your partner to settle successfully in New Zealand. Provide the owing details about your partner's English language ability.
) S	ee the guide for term(s): Minimum standard of English , Recognised qualification , New Zealand qualification
K1	Indicate how your partner meets the minimum standard of English. (Select one only)

] An English language test with the required score (IELTS overall band score of 5 or more, Cambridge English B2
First (FCE) or B2 First for Schools (FCE for Schools) overall score of 154 or more, TOEFL iBT overall score of 35
or more, PTE Academic overall score of 36 or more, OET grade C or higher in all four skills (Listening, Reading,
Writing and Speaking)) Go to K3

An English language test with the required score if claiming points for your partner's skilled employment or offer
of skilled employment or recognised qualification (IELTS overall band score of 6.5 or more, Cambridge English
B2 First (FCE) or B2 First for Schools (FCE for Schools) overall score of 176 or more, TOEFL iBT overall score
of 79 or more, PTE Academic overall score of 58 or more, OET grade B or higher in all four skills (Listening,
Reading, Writing and Speaking)) Go to K3

🗌 Citizenship of Canada, the United Kingdom	, the Republic of Ireland or the United States of America and
5 years in work or education in one or more	e of those countries or Australia or New Zealand Go to 🛯

A recognised qualification comparable to a New Zealand level 7 bachelor's degree and gained in Australia,
Canada, New Zealand, the Republic of Ireland, the United Kingdom or the United States of America as a result
of study undertaken for at least two academic years in one or more of those countries Go to κ_2

A recognised qualification comparable to a New Zealand qualification at level 8 or above and gained in
Australia, Canada, New Zealand, the Republic of Ireland, the United Kingdom or the United States of America
as a result of study undertaken for at least one academic year in one or more of those countries Go to K_2

Note: Partners must pre-purchase English for Speakers of Other Languages (ESOL) tuition if they do not meet the minimum standard of English. They will need to attend English language classes once they arrive in New Zealand. Your partner must meet the minimum standard of English for principal applicants to claim points for skilled employment or recognised qualifications.

K2	Provide details explaining why your partner meets the minimum standard of English.
K3	If your partner has completed an English language test, please confirm which test they have taken, and provide the relevant test details that will allow us to verify their test results (e.g. test report form number, candidate/test taker ID, any other unique number assigned to them (e.g. secret number, registration number)).
V/	
Ν4	What was the date that your partner sat their test and the score/s? English language test score/s
60	ction L Dartnarks skilled employment
ln th New	ction L Partner's skilled employment his section you can qualify for bonus points if your partner has current ongoing skilled employment in y Zealand or an offer of ongoing skilled employment in New Zealand. You can only claim these points if r partner meets the English language requirements for principal applicants.
-	our partner has an offer of employment in an occupation which requires registration, you can only claim se points if they have the required registration.
() Se	ee the guide for term(s): Minimum standard of English , Occupational registration , Skilled employment
LI	Are you claiming points (and declaring that your partner meets the criteria) for your partner's current skilled employment or offer of skilled employment in New Zealand? (Select one only)
	Ves No Go to M.
L2	What is your partner's main occupation in New Zealand? Provide the ANZSCO code and occupation most closely matching your partner's employment or job offer
L3	Indicate whether your partner's job is skilled because it meets the requirements for skilled employment.
	L It is an ANZSCO Skill Level 1, 2 or 3 job (and meets associated requirements)
	 It is not an ANZSCO Skill Level 1, 2 or 3 job (and meets requirements for jobs not at ANZSCO skill level 1, 2 or 3). See the guide for term(s): Skilled employment
	See the guide for term(s): Skilled employment Give a detailed explanation in support of your claim that your partner's job is skilled. You should explain what is in the job description and the occupational tasks. Also explain how your partner is suitably qualified in terms of the training and/or experience requirements for that occupation. State what relevant recognised qualifications, relevant work experience or occupational registration your partner has.

	Employer contact name (manager)
	Employer's job title/position
	Business/organisation name
	New Zealand Business Number (if applicable)
	Number and street name
	Suburb/City
	County/Province/State PIN/ZIP
	Country
	(Country code/Area code/Telephone number) (eg + 12 3 456 7890)
	Email Website
	When did your partner start working for this employer?
L5	Provide details of the remuneration for your partner's job.
	What is the annual salary for this job in New Zealand dollars
	What is the rate of pay per hour in New Zealand dollars
	If your partner is paid on a per activity basis, what was their total remuneration in New Zealand dollars for a previous 2 year period in New Zealand in this job?
Se	ection M Partner's recognised qualification(s)
	nis section you can provide information about whether your partner's qualification(s) will be recognised in
	<i>v</i> Zealand. recommended that you first read about which qualifications are recognised for the award of points under the
	led Migrant Category and the partner English language requirements in the Skilled Migrant Category Expression interest Guide (INZ 1101).
Note	: Your partner will only be able to claim points for their qualification(s) if they meet the English language requirements for principal applicants. ide the following details about your partner's recognised qualification(s).
M 1	Are you claiming points for your partner's recognised qualification(s) and declaring that they meet the criteria?
	See the guide for term(s): Recognised qualification
	Yes No
	How many qualifications are you submitting?
M2	Provide the details of the recognised qualification for which you are claiming points. If claiming points for your partner's postgraduate qualification, also add details of your partner's undergraduate qualifications.
	Name of qualification (please enter the name of the qualification, exactly as it appears on the certificate)

Date obtained DIDIMINICYTYTY Major area of study	
Date commenced studies DIDIMINIALY Date completed studies DIDIMINIALY PROVIDENT	
Institution name	
New Zealand Business Number (if applicable)	

	Number and street name
	Suburb
	County/Province/State PIN/ZIP
	Country
	Telephone Student ID#
	(Country code/Area code/Telephone number) (eg + 12 3 456 7890)
М3	Is this qualification on the List of Qualifications Exempt from Assessment (LQEA)? Or has an Occupational Registration Body assessed your qualification(s) as comparable to a New Zealand qualification?
	1 See the guide for term(s): Recognised qualification , Occupational registration
	Yes Provide the level of your partner's qualification No
	Note: If the qualification is on the LQEA all the requirements of the list must be met including the name of the qualification, the awarding institution and the date it was awarded.
M4	Does your partner hold a report from the New Zealand Qualifications Authority assessing the level of their qualification?
	Yes Provide details below No Go to N1.
	Note: If you have answered No to questions M3 and M4, you cannot claim points for your partner's qualification.
М5	What is the reference number and type assessed by the NZQA?
	Reference number
	Type 🗌 Preliminary (Pre-Assessment) 🗌 Interim 🗌 Full
	Level
	Note: if your partner has only obtained a Pre-Assessment Result (PAR) for your EOI, and you are invited to apply for residence, the level of your partner's qualification will have to be confirmed through a full International Qualifications Assessment (IQA) by the NZQA before points can be awarded.
Se	ction N Other family
hil	dren
N1	How many children do you have? This includes biological, adopted and stepchildren from previous marriages/relationships.
	Provide the following details for your children (including biological, adopted and stepchildren from previous marriages/relationships).
	Child one
	Full name
	Gender Male Female Date of birth
	Partnership status
	Married/in civil union Single Partnership/De facto Separated Engaged Widowed Divorced
	Country of residence
	Will this child be included in your application for residence? 🗌 Yes 🗌 No

Child two

•

Full name		
Gender Ale Female Date of birth		
Partnership status		
Married/in civil union Single Partnership/De facto Separated Engaged Widowed Divorced		
Country of residence		
Will this child be included in your application for residence? 🗌 Yes 🗌 No		
Child three Full name		
Gender 🗌 Male 🗌 Female Date of birth 📴 🖂 🖂 🖓 🖉		
Partnership status		
Married/in civil union Single Partnership/De facto Separated Engaged Widowed Divorced		
Country of residence		
Will this child be included in your application for residence? 🗌 Yes 🗌 No		
Child four		
Full name		
Gender 🗌 Male 🗌 Female Date of birth 📴 📴 🕅 🕅 🖉 🖓 🖓 🖓 Date of birth		
Partnership status		
Married/in civil union Single Partnership/De facto Separated Engaged Widowed Divorced		
Country of residence		
Will this child be included in your application for residence? 🗌 Yes 🗌 No		
Child five Full name		
Gender Male Female Date of birth		
Partnership status Married/in civil union Single Partnership/De facto Separated Engaged Widowed		
Country of residence		
Will this child be included in your application for residence? 🗌 Yes 🗌 No		
Child six Full name		
Gender Ale Female Date of birth		
Partnership status		
Married/in civil union Single Partnership/De facto Separated Engaged Widowed Divorced		
Country of residence		
Will this child be included in your application for residence? 🗌 Yes 🗌 No		

	Child seven
	Full name
	Gender 🗌 Male 🗌 Female Date of birth 📴 💷 💷 💷 💷 💷
	Partnership status
	Married/in civil union Single Partnership/De facto Separated Engaged Widowed Divorced
	Country of residence
	Will this child be included in your application for residence? 🗌 Yes 🗌 No
	Attach additional sheets if necessary.
	You may only include dependent children in your application. If you are separated or divorced and bringing a child under 16 years of age with you to New Zealand, we will need to see proof of their right to leave their home country and your right to remove them. For each dependent child included in your residence application, complete an <i>Expression of Interest Form</i> <i>Child Supplement (INZ 1103)</i> . Refer to the Skilled Migrant Category term 'Dependent Children' in the <i>Skilled</i> <i>Migrant Category Expression of Interest Guide (INZ 1101)</i> .
N2	Give details of all your family members (not just those living in New Zealand), including those adopted legally or by custom. Include: parents (whether biological or adoptive), brothers and sisters (whether full, half, step and adopted), and children (whether biological, adopted, or stepchildren, including those from previous marriages/ relationships.) It is not necessary to list deceased family members or family included elsewhere in this form.
	Family member one
	Full name
	Gender 🗌 Male 🗌 Female Date of birth 📴 💷 💷 💷 💷 💷
	Partnership status
	Married/in civil union Single Partnership/De facto Separated Engaged Widowed Divorced
	Country of residence
	Relationship to you
	Family member two
	Full name
	Gender Ale Female Date of birth DIDIMINICYTYTY
	Married/in civil union Single Partnership/De facto Separated Engaged Widowed Divorced
	Country of residence
	Relationship to you
	Family member three
	Full name
	Gender Male Female Date of birth
	Partnership status
	Married/in civil union Single Partnership/De facto Separated Engaged Widowed Divorced
	Country of residence
	Relationship to you

Family member four
Full name
Gender 🗌 Male 🗌 Female 🛛 Date of birth 📴 💷 💷 💷 💷 💷 💷
Partnership status
Married/in civil union Single Partnership/De facto Separated Engaged Widowed Divorced
Country of residence
Relationship to you
Family member five
Full name
Gender 🗌 Male 🔲 Female Date of birth 📴 💷 📖 Manager Variation and State St
Partnership status
Married/in civil union Single Partnership/De facto Separated Engaged Widowed Divorced
Country of residence
Relationship to you
Family member six
Full name
Gender 🗌 Male 🗌 Female Date of birth 📴 💷 🕅 🕅 🔲 🖉 🖉
Partnership status
Married/in civil union Single Partnership/De facto Separated Engaged Widowed Divorced
Country of residence
Relationship to you
Family member seven
Full name
Gender 🗌 Male 🔲 Female Date of birth 📴 💷 📖 Martin Ma
Partnership status
Married/in civil union Single Partnership/De facto Separated Engaged Widowed Divorced
Country of residence
Relationship to you
Family member eight
Full name
Gender 🗌 Male 🔲 Female Date of birth 📴 🖂 🖂 🖉 🖉
Partnership status
Married/in civil union Single Partnership/De facto Separated Engaged Widowed Divorced
Country of residence
Relationship to you

Family member nine
Full name
Gender Male Female Date of birth
Partnership status
Married/in civil union Single Partnership/De facto Separated Engaged Widowed Divorced
Country of residence
Relationship to you
Family member ten
Full name
Gender Male Female Date of birth
Partnership status
Married/in civil union Single Partnership/De facto Separated Engaged Widowed Divorced
Country of residence
Relationship to you
Section 0 Partner's family
Children
How many children does your partner have? This includes biological, adopted and step-children from previous marriages/relationships. Do not include children already listed under [N].
Provide the details below for each of your partner's children (including biological, adopted and step-children from previous
marriages/relationships).
\square None Go to $\boxed{02}$.
Child one
Full name
Gender Male Female Date of birth
Partnership status
Married/in civil union Single Partnership/De facto Separated Engaged Widowed Divorced
Country of residence
Will this child be included in your application for residence? Yes No
Will this child be included in your application for residence? 🗌 Yes 🗌 No
Will this child be included in your application for residence? Yes No Child two Full name Conden Nale Contents Data of birth
Will this child be included in your application for residence? Yes No Child two Full name
Will this child be included in your application for residence? Yes No Child two Full name Gender Male Female Date of birth DIFT
Will this child be included in your application for residence? Yes No Child two Full name Gender Male Female Date of birth DIDIMINICYIVITY Partnership status Married/in civil union Single Partnership/De facto

Child three

Full name	
Gender Male Female Date of birth	
Partnership status	
Married/in civil union Single Partnership/De facto Separated Engaged Widowed Divorced	
Country of residence	
Will this child be included in your application for residence? $\hfill \square$ Yes $\hfill \square$ No	
Child four	
Full name	
Gender 🗌 Male 🗌 Female Date of birth 📴 🔲 Man Martinership status	
Married/in civil union Single Partnership/De facto Separated Engaged Widowed Divorced	
Country of residence	
Will this child be included in your application for residence? 🗌 Yes 🗌 No	
Child five	
Full name	
Gender 🗌 Male 🗌 Female Date of birth 📴 💷 💷 🖂 🛛 🗠 🖂 🗠 Date of birth	
Partnership status	
Married/in civil union Single Partnership/De facto Separated Engaged Widowed Divorced	
Country of residence	
Will this child be included in your application for residence? $\hfill \ensuremath{Yes}$ No	
Child six	
Full name	
Gender Ale Female Date of birth	
Married/in civil union Single Partnership/De facto Separated Engaged Widowed Divorced	
Country of residence	
Will this child be included in your application for residence?	
Attach additional sheets if necessary.	
You may only include dependent children in your application. Refer to the requirements for 'dependent children' in the guide. If your partner is separated or divorced and bringing a child under 16 years of age	

children' in the guide. If your partner is separated or divorced and bringing a child under 16 years of age with them to New Zealand, we will need to see proof of their right to leave their home country and your partner's right to remove them.

O2 Give details of **all** your partner's family members (not just those living in New Zealand), including those adopted legally or by custom. Include: **parents** (whether biological or adoptive), **brothers and sisters** (whether full, half, step and adopted), and **children** (whether biological, adopted, or step children, including those from previous marriages/relationships). It is **not** necessary to list deceased family members or family included elsewhere in this form.

Family member one		
Full name		
Gender 🗌 Male 🔲 Female Date of birth 📴 💷 💷 💷 Date of birth		
Partnership status		
Married/in civil union Single Partnership/De facto Separated Engaged Widowed Divorced		
Country of residence		
Relationship to you		
Family member two		
Full name		
Gender 🗌 Male 🗌 Female Date of birth 📴 🕅 🕅 🖉 🖓 🖓 🖓 🖓 🖓 🖓 🖓 🖓 🖓 🖓 🖓 🖓 🖓		
Partnership status		
Married/in civil union Single Partnership/De facto Separated		
Engaged Widowed Divorced		
Country of residence		
Relationship to you		
Family member three		
Full name		
Gender 🗌 Male 🗌 Female Date of birth 📴 💷 🕅 🕅 🕅 🕅 🕅 🕅 🕅 🕅 🕅 🕅 🕅 🕅 🕅		
Partnership status		
Married/in civil union Single Partnership/De facto Separated Engaged Widowed Divorced		
Country of residence		
Relationship to you		
Family member four		
Full name		
Gender 🗌 Male 🗌 Female Date of birth 📴 💷 💷 💷 💷 💷 💷		
Partnership status		
Married/in civil union Single Partnership/De facto Separated Engaged Widowed Divorced		
Country of residence		
Relationship to you		

Family member five				
Full name				
Gender 🗌 Male 🗌 Fem	ale Date of birth			
Partnership status				
Married/in civil union Engaged	Single	Partnership/De facto Divorced	Separated	
Country of residence				
Relationship to you				
Family member six				
Full name				
Gender 🗌 Male 🗌 Fem Partnership status	ale Date of birth	DIDIMIMILYIYIYIY		
Married/in civil union Engaged	Single Uidowed	Partnership/De facto Divorced	Separated	
Country of residence				
Relationship to you				
Family member seven				
Full name				
Gender 🗌 Male 🗌 Fem	ale Date of birth			
Partnership status				
Aarried/in civil union	Single	Partnership/De facto	Separated	
Engaged	Uidowed	Divorced		
Country of residence			CLA	AIMED
Relationship to you				
Family member eight				
Full name				
Gender 🗌 Male 🗌 Fem	ale Date of birth			
Partnership status				
Aarried/in civil union	Single	Partnership/De facto	Separated	
Engaged	Uidowed	Divorced		DINTS
Country of residence			CLA	AIMED
Relationship to you				
Family member nine				
Full name				
Gender 🗌 Male 🗌 Female Date of birth 📴 🖂 🖓 🖓 🖓 🖓 🖓 🖓 Date of birth				
Partnership status				
Married/in civil union	Single	Partnership/De facto	Separated	DINTS
Engaged	Uidowed	Divorced		AIMED

Country of residence	
Relationship to you	

Attach additional sheets if necessary.

Assessment of your residence application

In order to be granted residence under the Skilled Migrant Category, you must be awarded points for skilled employment in New Zealand, or have a Doctorate or Master's degree awarded following at least two years of full-time study in New Zealand.

If you do not have skilled employment in New Zealand or a New Zealand Doctorate or Master's degree, but you otherwise meet the Skilled Migrant Category requirements, you will be able to apply for a Skilled Migrant Category Job Search work visa. This visa is granted for the purpose of obtaining skilled employment in New Zealand. If the temporary work visa is granted, the decision on your residence will be deferred. If you obtain skilled employment during the deferral period your residence application may be approved. If you do not obtain skilled employment during the deferral period your residence application will be declined.

Section P Declaration of principal applicant

This section must be signed by the principal applicant on behalf of all the people included in this Expression of Interest. Make sure you understand the declarations below before you sign and agree to them.

Important

I understand that if I make any false statements, or provide any false or misleading information, or have changed or altered this form (including the Child Supplement form) in any material way, my Expression of Interest may not be accepted, any resident visa application may be declined and I may lose any right of appeal. I may become liable for deportation. I may also be committing an offence and liable to prosecution. \Box Yes

I understand the notes and questions in this form (including the Child Supplement form), and I declare the information given about myself, my partner and any children is true and complete. \Box Yes

I declare that I have listed all my family members, including any adopted by law or by custom and my grandparents or legal guardians (if any) if both my parents are deceased, and understand that the non-declaration of any family members may result in that family member not being recognised as part of my family in future applications. \Box Yes

I will inform Immigration New Zealand of any relevant fact or change of circumstances that may (i) affect the decision on my application for a visa, or (ii) affect the decision to grant entry permission based on the visa for which I am applying. \Box Yes

I declare that there are no matters or warrants outstanding, or investigations of any kind, which could have any current or future effect on the assessment of my good character, or the good character of any other persons included in this Expression of Interest. \Box Yes

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, INZ will return my application.

🗌 Yes

I authorise INZ to make any enquiries it deems necessary regarding the information provided on this form (including the Child Supplement form), and to share this information with other Government agencies (including overseas agencies) to the extent necessary to make decisions about my immigration status. I also consent to any organisation providing relevant information to INZ about me. \Box Yes

I authorise INZ to provide information about my state of health and my immigration status to any health service agency. I authorise any health service agency to provide information about my state of health to INZ. \Box Yes

I accept that any advice given to me by INZ before expressing interest and submitting this form (including the Child Supplement form) was intended to assist me, and acting on that does not mean that any later application for residence will be granted. \Box Yes

I understand that in order to work in certain occupations in New Zealand, registration is required by law. I accept that the grant of residence does not guarantee that registration will be granted. \Box Yes.

I have not included any documents with this Expression of Interest. 🗌 Yes.

Signature of principal applicant

Date DIDIMIMICY Y Y

Section O	Immigration	adviser's	details
occuron q	in gracion		u c cuilb

this section does not have to be completed.

Qı	Tick the one option that applies to you.
	I am a licensed immigration adviser under the New Zealand Immigration Advisers Licensing Act 2007. Go to Q2.
	I am exempt from licensing under the New Zealand Immigration Advisers Licensing Act 2007. Go to Q3.
	If you are unlicensed when you should be licensed under the Immigration Advisers Licensing Act 2007, INZ will return your client's application. It is an offence to provide immigration advice without holding a licence, unless you are exempt.
Q2	Licensed advisers. Provide your licence details.
	Licence type: 🗌 full 🔲 provisional 🗌 limited. List conditions specified in the register.
	Licence number Go to Section R: Declaration by person assisting the applicant.
Q3	Exempt from licensing. Tick the boxes below to show why you are exempt from licensing.
	I provided immigration advice in an informal or family context only, and I did not provide the advice systematically or for a fee.
	I am a New Zealand member of Parliament or member of their staff and I provided immigration advice as part of my employment agreement.
	I am a foreign diplomat or consular staff.
	I am an employee of the New Zealand public service and I provided immigration advice within the scope of my employment agreement.
	I am a lawyer and I hold a current practising certificate as a barrister or as a barrister and solicitor of the High Court of New Zealand.
	I am employed by, or I am working as a volunteer for, a New Zealand community law centre where at least one lawyer is on the employing body of the community law centre or is employed by or working as a volunteer for the community law centre in a supervisory capacity.
	\Box I am employed by, or I am working as a volunteer for, a New Zealand citizens advice bureau.
	Go to Section R: Declaration by person assisting the applicant.

This section must be completed by your immigration adviser. If you do not have an immigration adviser,

Section R Declaration by person assisting the applicant

This section must be completed and signed by your immigration adviser, or by any person who has assisted you by providing immigration advice, explaining, translating, or filling in the form. If you do not have an immigration adviser, and no one helped you to fill in this form, this section does not need to be completed.

If you are unlicensed when you should be licensed under the Immigration Advisers Licensing Act 2007, INZ will return your client's application. It is an offence to provide immigration advice without holding a licence.

For more information, go to the Immigration Advisers Authority website www.iaa.govt.nz, or email info@iaa.govt.nz or write to them at PO Box 6222, Wellesley Street, Auckland 1141, New Zealand.

Name and address of person assisting applicant.

Family/last name

Given/first name(s)

Company name (if applicable) and address
New Zealand Bus	iness Number (if applicable)
Telephone (day)	Telephone (night)
Fax	Email

I understand that after the applicant has signed this form it is an offence for me to change or add further information, change any documents attached to the form, or attach any further documents to the form. However, if changes are needed, the person making the changes must state on the form what information or documents have been changed and give reasons for the changes.

I note 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 Q: Immigration adviser's details are correct.

Signature of person assisting principal applicant

Date DIDIMIMICY Y Y

Section S Submitting your Expression of Interest

If you are not completing an EOI online, send this completed EOI form to:

By post:

Immigration New Zealand PO Box 76895 Manukau City Auckland 2241 New Zealand

By courier:

Immigration New Zealand DX Box: EP71514 Penrose Auckland 1061 New Zealand

About the information you provide

The information about you and your family in this form is being collected to determine whether we will invite you to apply for residence in New Zealand and may also be used to contact you for research or marketing purposes or to advise you on immigration matters. This information may also be used to determine your entitlement to board a flight to come to or return to New Zealand. Your personal information will not be shared with airline check in agents, however a boarding message will be returned to the airline check in agent based on information you have supplied on this form.

The main recipient of the information is Immigration New Zealand (INZ), a service of the Ministry of Business, Innovation and Employment, but it may also be shared with other Government agencies that are entitled to this information under applicable legislation. In particular, the Ministry of Social Development (Work and Income) may be given information about your personal resources.

The collection of the information is authorised by the Immigration Act 2009 and the Immigration Regulations made under that Act. The supply of the information is voluntary, but if you do not supply the mandatory information required by the Expression of Interest form, then your Expression of Interest cannot be accepted.

You will, if you are in New Zealand, have the right to see the information about you held by INZ, and to ask for any of it to be corrected if you think that is necessary. INZ addresses can be found on our website at www.immigration.govt.nz.

For more information

If you have questions about completing the form:

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

Section T Paying your EOI fee

To find out how much to pay, where to send your EOI, and how long a decision may take, see **www.immigration.govt.nz/fees**.

Your EOI fee

Amount you are paying:

Amount

Currency

(e.g. NZD, USD, RMB)

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:

Bank cheque/bank draft Credit card (choose one)

🗌 Mastercard 🔄 Visa

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.

Expiry date

Signature of cardholder

Date DIDIMINITY IN TYTY

Other methods of payment

Personal cheque. Note that we will hold your EOI for 10 working days to allow the cheque to be cleared.

We do not accept money orders.

SWITCH card issue number

New Zealand Government