



Application & Enrolment Contract 2026 Part 1

2026 version 1.0 – This form is for **domestic students** only

We prefer you apply online at <https://launchpad.nasa.co.nz>

Brief Introduction and Instructions

Questions? Please contact us

This form gains information we use to assess your application and, if successful, enrol you. We also gather legally required information for Government agencies for statistical and administrative reasons. **This form is a legally binding contract between us.** There is a second part to this contract you may complete to formally enrol you. When completing this form:

- Use a blue or black pen.
- Print answers in NEAT BLOCK LETTERS.
- Initial all pages in the bottom right corner.
- Sign and date the back page of the form.

A Your Programme and Your Starting and Finishing Dates

Programme and starting and finishing dates

<input type="checkbox"/>	Fast track industry option: New Zealand Certificate in Beauty Therapy and New Zealand Diploma in Beauty Therapy	
	New Zealand Certificate in Beauty Therapy (Level 4)	NZ3444
<input type="checkbox"/>	<i>Start</i> 2 February 2026	<input type="checkbox"/>
	<i>Finish</i> 18 December 2026	<input type="checkbox"/>
		<i>Start</i> 20 July 2026
		<i>Finish</i> 18 June 2027
	New Zealand Diploma in Beauty Therapy (Level 5)	NZ3445
<input type="checkbox"/>	<i>Start</i> 18 January 2027	<input type="checkbox"/>
	<i>Finish</i> 18 June 2027	<input type="checkbox"/>
		<i>Start</i> 19 July 2027
		<i>Finish</i> 17 December 2027

<input type="checkbox"/>	New Zealand Certificate in Nail Technology (Level 4)	NZ3443
<input type="checkbox"/>	<i>Start</i> 2 February 2026	<input type="checkbox"/>
	<i>Finish</i> 18 December 2026	<input type="checkbox"/>
		<i>Start</i> 20 July 2026
		<i>Finish</i> 18 June 2027

<input type="checkbox"/>	New Zealand Certificate in Beauty Therapy (Level 4)	NZ3444
<input type="checkbox"/>	<i>Start</i> 2 February 2026	<input type="checkbox"/>
	<i>Finish</i> 18 December 2026	<input type="checkbox"/>
		<i>Start</i> 20 July 2026
		<i>Finish</i> 18 June 2027

<input type="checkbox"/>	New Zealand Diploma in Beauty Therapy (Level 5)	NZ3445
<input type="checkbox"/>	<i>Start</i> 19 January 2026	<input type="checkbox"/>
	<i>Finish</i> 19 June 2026	<input type="checkbox"/>
		<i>Start</i> 20 July 2026
		<i>Finish</i> 18 December 2026

B About You

Legal surname

Legal given name(s)

Preferred name

Previous names / aliases

Phone numbers

Cell	Land
------	------

Email address

B About You (Continued)

What is your gender?

Female Another gender Male

Date of birth

Day		Month		Year			

NZQA number / National Student Number

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IRD number

			-				-		
--	--	--	---	--	--	--	---	--	--

This field is optional and only used for Fees Free. You do not need to provide your IRD number if you are not eligible for Fees Free.

Permanent address

List your address using [NZ Post Guidelines](#)

								Postcode				

Address while studying (if known)

List your address using [NZ Post Guidelines](#)

								Postcode				

C English Language and Literacy and Numeracy for Adults

Is English your first or native language?

If you answered no, you may need to provide evidence of your English skills.

Yes No

Have you ever used the Literacy and Numeracy for Adults assessment tool?

- If yes, please continue to the next question.
- If no, please continue to section D.

Yes No

Which type of assessment(s) did you do?

Reading Writing Vocabulary Numeracy

D Your Citizenship and Residency

Are you a New Zealand citizen?

If you are a New Zealand citizen, continue to section E.

Yes No

Country of citizenship (non-New Zealanders)

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Do you currently hold a valid New Zealand residency class visa?

- If yes, continue to "How long have you been in New Zealand...?"
- If no, continue to next question.

Yes No

Do you currently hold a valid Australian residency class visa?

- If yes, continue to "How long have you been in New Zealand...?"
- If no, you should be filling out the application form for international students.

Yes No

How long have you been in New Zealand with a residency class visa or with your Australian citizenship?

If you are a New Zealand residency class visa holder, or Australian permanent resident or citizen living in New Zealand, and you have been that for less than **3 years**, you may not be eligible for the Student Loans and Allowances scheme or Fees Free scheme.

Years		Months	

Student Initials

Parent's Initials

E Health and Safety

Please answer truthfully

Are there supports that would help you while learning with us? Your response allows us to let you know what assistance might be available through us. Please select all of the supports you might need.

The information you provide is collected for statistical purposes and helps make education more accessible to all students.

- | | | | |
|--|--------------------------|---|--------------------------|
| Access to assistive technology (e.g., for reading, writing, communication) | <input type="checkbox"/> | Support with reading, writing, and communicating in learning sessions, exams, and assessments | <input type="checkbox"/> |
| Accessible format resources for course content | <input type="checkbox"/> | Other learning or disability support | <input type="checkbox"/> |
| Mobility and transport (e.g., navigator support to help movement around campus, mobility carparks, personal emergency evacuation plan) | <input type="checkbox"/> | No – I do not need support at this time | <input type="checkbox"/> |
| New Zealand Sign Language interpreter | <input type="checkbox"/> | | |

- Do you describe yourself as:
- | | |
|---|---|
| <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| <ul style="list-style-type: none"> • disabled; • deaf; • neurodiverse; | <ul style="list-style-type: none"> • tangata whaikaha Māori; • living with a long-term physical condition; and / or • living with a long-term mental health condition? |

The information you provide is collected for statistical purposes and helps us understand our students.

Next, we're going to ask you questions around your health and safety. We ask these questions to be aware of the best way we can approach health and safety with you, so please be open and honest with us. We'll ask questions around your:

- | | | | |
|-------------------|----------------------|-----------------------|--------------------------|
| • Physical health | • Skin conditions | • Mental health | • Piercings |
| • Medication | • Sensory conditions | • Learning conditions | • Behavioural conditions |

You may need to provide written evidence from a qualified medical or education practitioner, and you may need additional outside support (outside NaSA and at your own cost) in cases of learning issues.

- Do you have, or have you been previously diagnosed with, any medical and / or skin conditions that could affect your participation in your course, your studies or your attendance? Examples include eczema, asthma, and chronic fatigue. Yes No

If "Yes", please list the conditions below. You may need to supply a diagnosis or medical clearance from a qualified medical or other professional. We ask this to be aware of the best way we can approach health and safety with you.

- Do you have, or have you been previously diagnosed with, any mental health conditions that could affect your participation in your course, your studies or your attendance? Examples include anxiety and depression. Yes No

If "Yes", please list the conditions below. You may need to supply a diagnosis or medical clearance from a qualified medical or other professional. We ask this to be aware of the best way we can approach health and safety with you.

- Do you have any facial and / or body piercings (including internal)? Yes No

If "Yes", please list the piercings and locations. We ask this to make sure none of our treatments cause metal to leech into your skin (if possible).

- Do you take any regular, ongoing and / or current medication? Yes No

If "Yes", please list the medication below. We ask this to make sure you are not contraindicated to treatments you perform / have performed on you.

Section E continues on the next page.

Student Initials	Parent's Initials
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E Health and Safety (Continued)

Please answer truthfully

Have you been hospitalised in the last 12 months?

Yes No

If "Yes", please list when and why below. You may need to supply a diagnosis or medical clearance from a qualified medical or other professional. We ask this to be aware of the best way we can approach health and safety with you.

Do you have any conditions that impair or affect your sensory systems?

Yes No

If "Yes", please list these conditions below. We ask this to be aware of the best way we can approach health and safety for you.

Do you have any learning conditions, like dyslexia, dysgraphia, auditory or visual processing disorders, et cetera?

Yes No

If "Yes", please list the learning conditions below. You may need to supply a diagnosis or medical clearance from a qualified medical or other professional. We ask this to be aware of the best way we can try to support you while you are studying with us.

Do you have any behavioural and / or attention conditions, like ADHD or any other neurological condition or disorder in this area?

Yes No

If "Yes", please list the conditions below. You may need to supply a diagnosis or medical clearance from a qualified medical or other professional. We ask this to be aware of the best way we can try to support you while you are studying with us.

Have you ever been charged with, or received diversion from, or convicted of, a serious crime?
 You have the right to conceal any minor offence occurring over 7 years ago if unrepeatd and as per the Criminal Records (Clean Slate) Act 2004 and its subsequent amendments, providing you meet all other conditions in the Act.

Yes No

If "Yes", please list the crimes and circumstances below.

F Your Emergency Contact

FILL IN ALL FIELDS

Whom should we contact in case of emergency or if we are unable to get a hold of you?

- List **one contact**, your relationship with that contact, and **full contact details** for a person who knows you.
- Your contact **must** be 18 years old or over.
- If you are under 18, your contact must be your parent or legal guardian.

Full name (first and last)

Relationship to you

Phone numbers

Cell	Land
------	------

Email address

Address

List your address using [NZ Post Guidelines](#)

	Postcode	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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Student Initials	Parent's Initials
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G Your Ethnicity

Which ethnic group(s) do you belong to? You may tick up to **three (3)** boxes that apply to you.

* Indicates if you marked any "Other" category, please specify the ethnic group next to "Other"

- | | | | | | |
|--|-----|--|-----|--|-----|
| <input type="checkbox"/> NZ European | 111 | <input type="checkbox"/> British / Irish | 121 | <input type="checkbox"/> Filipino | 411 |
| <input type="checkbox"/> Māori | 211 | <input type="checkbox"/> Dutch | 122 | <input type="checkbox"/> Cambodian | 412 |
| <input type="checkbox"/> Samoan | 311 | <input type="checkbox"/> Greek | 123 | <input type="checkbox"/> Vietnamese | 413 |
| <input type="checkbox"/> Cook Island Māori | 321 | <input type="checkbox"/> Polish | 124 | <input type="checkbox"/> Other SE Asian* | 414 |
| <input type="checkbox"/> Tongan | 331 | <input type="checkbox"/> South Slav | 125 | <input type="checkbox"/> Chinese | 421 |
| <input type="checkbox"/> Niuean | 341 | <input type="checkbox"/> Italian | 126 | <input type="checkbox"/> Indian | 431 |
| <input type="checkbox"/> Tokelauen | 351 | <input type="checkbox"/> German | 127 | <input type="checkbox"/> Sri Lankan | 441 |
| <input type="checkbox"/> Fijian | 361 | <input type="checkbox"/> Australian | 128 | <input type="checkbox"/> Japanese | 442 |
| <input type="checkbox"/> Other Pasifika* | 371 | <input type="checkbox"/> Other European* | 129 | <input type="checkbox"/> Korean | 443 |
| <input type="checkbox"/> Middle Eastern | 511 | <input type="checkbox"/> African | 531 | <input type="checkbox"/> Other Asian* | 444 |
| <input type="checkbox"/> Latin American | 521 | <input type="checkbox"/> Other* | 611 | | |

If you identified as Māori, what is (are) the name(s) of your Iwi? You can enter up to six Iwi.

Iwi		Iwi	
Iwi		Iwi	
Iwi		Iwi	

H Your Activity

What was your main activity or occupation in New Zealand on 1 October 2025?

SELECT ONLY ONE OPTION

- | | | | |
|---|----|--|----|
| <input type="checkbox"/> Secondary school student | 01 | <input type="checkbox"/> Non-employed or beneficiary (excluding retired) | 02 |
| <input type="checkbox"/> Wage or salary worker | 03 | <input type="checkbox"/> Self-employed | 04 |
| <input type="checkbox"/> University student | 05 | <input type="checkbox"/> Polytechnic (not private) student | 06 |
| <input type="checkbox"/> House-person or retired | 08 | <input type="checkbox"/> Overseas (for work, study, et cetera) | 09 |
| <input type="checkbox"/> Private Training Establishment student | 11 | <input type="checkbox"/> Wānanga student | 12 |

Are you a caregiver for a child, relative or friend? (Family commitments) Yes No

Explain in detail your reasons for wanting to study and work in this industry. Please be specific. (Answer on another piece of paper and attach it to this application if your answer doesn't fit in the area below.)

Student Initials

Parent's Initials

I Your Previous Academic History and Achievements

I1 Your Secondary School / High School Academic Information

A secondary school or high school is a place like Papanui High School or Villa Maria College. It is not a place like University of Canterbury or Ara Institute of Canterbury.

What was the name of the last secondary school you attended and what was the last year you attended that school?

If the last secondary school / high school you attended was overseas, please write "Overseas" in the space provided below.

School Year

What is the highest level of achievement you hold from a secondary school / high school?

Your highest achievement may be a "traditional" award, such as School Certificate, or you may have achieved a number of credits, or a National Certificate of Educational Achievement (NCEA) at a certain level on the New Zealand Qualifications and Credentials Framework.

**SELECT ONLY ONE OPTION
THIS IS FOR SECONDARY SCHOOL ONLY**

- | | | | |
|--|----|--|----|
| <input type="checkbox"/> No formal secondary qualifications | 00 | <input type="checkbox"/> NCEA Level 2 or 6 th Form Certificate | 13 |
| <input type="checkbox"/> 14 or more credits at any level | 11 | <input type="checkbox"/> University Entrance | 14 |
| <input type="checkbox"/> NCEA Level 1 or School Certificate | 12 | <input type="checkbox"/> NCEA Level 3 or Bursary or Scholarship | 15 |
| <input type="checkbox"/> Overseas qualification | 09 | <input type="text"/> <i>Specify</i> | |
| <input type="checkbox"/> Other | 98 | <input type="text"/> <i>Specify</i> | |

I2 Your Tertiary Level Academic Information

A tertiary education organisation is a place like University of Canterbury or Ara Institute of Canterbury. It is not a place like Papanui High School, Rangiora High School, or Villa Maria College.

- Tertiary-level education includes New Zealand and overseas universities, polytechnics, institutes of technology, colleges of education, private training establishments and wānanga.
- Do **not** include enrolments in STAR, community, or hobby classes.
- Only** include NZQA-Approved or government-approved tertiary-level programmes.

Will this be the first year you have ever enrolled in a tertiary-level programme since leaving secondary school / high school?

Yes No

- If yes, please continue to section J.
- If no, please continue to the next question.

What was the name of the first tertiary education organisation you studied at and what was the first year you attended that school?

Provider Year

What was the name of the latest tertiary education organisation you studied at and what was the last or latest year you attended that school?

Provider Year

What is the highest level you achieved from a successfully completed tertiary-level programme?

- | | | | |
|--|----------------------------------|-----------------------------------|----------------------------------|
| <input type="checkbox"/> Never completed | <input type="checkbox"/> Level 1 | <input type="checkbox"/> Level 2 | <input type="checkbox"/> Level 3 |
| <input type="checkbox"/> Level 4 | <input type="checkbox"/> Level 5 | <input type="checkbox"/> Level 6 | <input type="checkbox"/> Level 7 |
| <input type="checkbox"/> Level 8 | <input type="checkbox"/> Level 9 | <input type="checkbox"/> Level 10 | <input type="checkbox"/> Unknown |

What was the full name of the qualification listed in the question above and what was the year you completed that qualification?

Qualification Year

Section I continues on the next page.

Student Initials	Parent's Initials
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I Your Previous Academic History and Achievements (Continued)

I2 Your Tertiary Level Academic Information (Continued)

Please list all of the tertiary-level qualifications you hold, the year you completed them, and where you completed them. Alternatively, you can email us your academic transcripts and / or a copy of your NZQA Record of Achievement.

Tertiary education organisation	Qualification	Year completed			

If you have more tertiary qualifications, please attach another sheet of paper or email the details to us.

Have you ever withdrawn from, or not successfully completed, a programme or qualification?
 • If yes, please continue to the next question. Yes No
 • If no, please continue to section J.

If you have ever withdrawn from, or not successfully completed, a programme or qualification, please explain why below. (Attach another piece of paper if your answer doesn't fit in the area below.)

J Your Payment Details

Your full fees will be listed in the Application and Enrolment Form Part 2. This amount will be the same or very similar to the fees listed on our Web site and in our course information pack. Fees do not include extra expenses or administration fees.

How do you intend to pay your fees? You can select more than one option.

- Personal funds You will need to pay this to Public Trust after your enrolment but before your programme starts.
 - Student Loan Apply to StudyLink on www.studylink.govt.nz or 0800 88 99 00 immediately after applying. You are still responsible for all your fees if your Student Loan is denied.
 - I authorise Aesthetics House Limited trading as The National School of Aesthetics to direct and accept payment of the relevant tuition fees and eligible course costs, where applicable, from my student loan account.
- Signature
- Training Incentive Allowance (TIA) Contact Work and Income New Zealand. You must complete your enrolment first before we can complete TIA paperwork for Work and Income. If your TIA application is not approved by WINZ and you continue with your enrolment, you will need to pay all fees and extra expenses we invoice you via a different method.

K Your Right to Study and Your Identity

You will need to supply proof of **your right to study** (citizenship and residency) and **your identity**.

You need to show us the originals or provide [verified copies](#) of your:

- [Proof of citizenship](#)
- [Proof of residency class visa or right to study in New Zealand](#) (non-New Zealand citizens only)
- [Proof of identity](#)

Student Initials	Parent's Initials
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L Your Acknowledgement and Declaration

**This form does not automatically enrol you in a programme.
You will need to complete the course kōrero and enrolment processes before you are fully enrolled.**

In this document, the following substitutions will apply:

- The applicant is herein referred to as “you”
- Aesthetics House Limited trading as The National School of Aesthetics is herein referred to as “we”

To view our Terms of Conditions of Enrolment and our policies and procedures, see:

- nasa.co.nz/enrol/terms-and-conditions-of-enrolment/
- sections on nasa.co.nz and / or the [Student Handbook](#)

You understand that by submitting this application, you agree to read, understand and comply with the Terms and Conditions of Enrolment; the policies and procedures; the rules and regulations; and any other documentation and requirements around the programme you are applying for published by Aesthetics House Limited trading as The National School of Aesthetics— including but not limited to fee payment requirements, health and safety requirements, privacy requirements, behavioural guidelines and disciplinary procedures, attendance requirements and absenteeism limits, and assessment requirements.

You understand and agree that Aesthetics House Limited trading as The National School of Aesthetics will collect, store, use and disclose personal information in order to conduct our normal and proper business. You have read and understand how we will manage and disclose such information in accordance with the Education and Training Act 2020, Privacy Act 2020, any other relevant legislation and their subsequent amendments.

You understand we collect information from a variety of tools and services designed to support your learning. You are able to have access to this information if you request it. You also understand this information may be shared with relevant Government agencies, external monitoring bodies such as ITEC, and other Tertiary Education Organisations (TEOs) who request it for legitimate and legal purposes.

I understand I need to do the following after I submit this form and my signature confirms I will do them:

- Email or supply [proof of citizenship](#) (and permanent residency if I am not a New Zealand citizen) to enrol@nasa.co.nz
- Email or supply [proof of identity](#) to enrol@nasa.co.nz
- Email or supply transcripts of previous learning and / or NZQA Record of Learning if I have them to enrol@nasa.co.nz
- Email or supply any medical and / or learning condition documentation if and where required to enrol@nasa.co.nz
- Watch the Interview Presentation on the NaSA Web site at www.nasa.co.nz/enrol/interview-presentation/
- Read over and understand the Student Handbook, downloadable at www.nasa.co.nz/downloads/#student-handbook
- Read over and understand the information in the Students section on the NaSA Web site at www.nasa.co.nz/students/

Declaration continues on the next page.

Student Initials	Parent's Initials
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Declaration, Your Signature, and Your Guardian's Signature (Where Applicable)

I, the student, declare that, to the best of my knowledge, all the information supplied on, and with, the Application and Enrolment Contract Part 1 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. I confirm I can and will pay all fees and extra expenses as they are due.

I understand Aesthetics House Limited trading as The National School of Aesthetics reserves the right, at any time before or during the programme, to terminate my application or enrolment if I have provided fraudulent, forged or otherwise dishonest documentation and / or misrepresented myself or my circumstances when providing information for my application, my enrolment or any other information at the school.

I confirm I am the person named on this form.

I understand my legal guardian must also sign this form if I am under 18 years old.

Your signature

Date

Day		Month		Year			

Guardian's signature

Date

Day		Month		Year			

Signature on behalf of Aesthetics House Limited trading as The National School of Aesthetics

Signature

Date

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Name

Return this form with supporting documentation to:

Email	Physical Address <i>Courier only</i>	Postal Address <i>Post only</i>
enrol@nasa.co.nz	The National School of Aesthetics 134 Antigua Street Addington Christchurch 8024	Admissions The National School of Aesthetics PO Box 1582 Christchurch 8140

If you downloaded this form and filled it out electronically, you must initial each page and sign and date the last page before submitting it. If you are under 18, your legal guardian must do the same.

Scanning your documents? For guidance on what is and isn't acceptable, see:
www.nasa.co.nz/enrol/application/#scanning-or-taking-photos-of-your-documentation