

**School Candidate Form - National Qualifications Framework (NQF) Fees**

<b>Name</b>	<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>		
	<b>First name</b>	<b>Surname</b>		
<b>Address</b>	<input style="width: 98%;" type="text"/>			
	<input style="width: 98%;" type="text"/>			
<b>Name of school</b>	<input style="width: 95%;" type="text"/>			
<b>NSN</b>	<input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/>	<b>(National Student Number)</b>		
<b>Date of Birth</b>	<input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/>	<b>(dd/mm/yy)</b>		
<b>Fee paid</b>	\$ <input style="width: 150px;" type="text"/>	<b>Late Payment Fee Included? (Y/N)</b>	<input style="width: 30px; height: 20px;" type="checkbox"/>	
<b>Declaration: I agree to abide by the Assessment and Examinations Rules and Procedures set down by NZQA concerning national schools qualifications.</b>				
<b>Candidate's signature</b>	<input style="width: 300px; height: 25px;" type="text"/>			
<b>Date</b>	<input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/>	<b>Academic Year being paid for</b>	<input style="width: 100px;" type="text"/>	
<b>Method of Payment</b>		Post this form with appropriate fee to:  Finance NZQA PO Box 160 Wellington 6140  Fax: 04 802 3409 Phone: 04 463 3000		
<input type="checkbox"/> Cheque	<input type="checkbox"/> Visa			<input type="checkbox"/> Mastercard
<input style="width: 350px;" type="text"/>				<input style="width: 40px; height: 20px;" type="text"/> <input style="width: 40px; height: 20px;" type="text"/>
Card Account Number				Expiry Date
<input style="width: 150px;" type="text"/>	<input style="width: 150px;" type="text"/>			
Cardholder's Signature		Cardholder's Name		
<b>For NZQA use only</b>				
Receipt number: _____		Receipt Date: ____/____/____		
Payment Processed by: _____		Processed Date: ____/____/____		