

# New Zealand College of Business

## Application for Graduation



### Personal Details

Family Name: \_\_\_\_\_ Given Name(s): \_\_\_\_\_

DOB: \_\_\_\_\_ Student ID number \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Phone number: \_\_\_\_\_

### Programme Details

(please tick the name of Diploma/ Certificate apply for graduation)

- New Zealand Certificate in English Language Level 4  
 New Zealand Certificate in English Language Level 5

**IMPORTANT** Please ensure you are applying for the qualification **you are enrolled in** and **you are eligible to graduate**.

How would you like to have your qualification?

By post? Your postal address if different from above: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

By pick up? \_\_\_\_\_

When would you want to receive/ pick up your qualification? \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

### Pick Up Information

I, \_\_\_\_\_, have received the qualification I applied above on the date of \_\_\_\_\_ day \_\_\_\_\_ month \_\_\_\_\_ year.

Signature: \_\_\_\_\_