

## The Travel Visa Company

Your Dedicated, Worldwide Travel Visa Agency



### REFERRED BY

i.e. Travel Agent / Tour Operator / Cruise Line / Search Engine / Repeat Customer / Friend / Other

You **MUST** return this front page with your application.

### RETURN ADDRESS

#### The Travel Visa Company Ltd.

First Floor Unit 10  
Alvaston Business Park  
Middlewich Road  
Nantwich, Cheshire  
CW5 6PF



### SUPPORT

If you have any queries or would like additional assistance when completing your application, please contact us and one of our team would be happy to assist.



Telephone: **01270 904 907**



Email: **[applications@thetravelvisacompany.co.uk](mailto:applications@thetravelvisacompany.co.uk)**

## New Zealand Working Holiday Visa Application Pack

Thank you for requesting an application pack for a New Zealand Working Holiday Visa.

Please complete the following three sections and then return the application pack and all supporting documents to The Travel Visa Company Ltd.

- 1. Checklist of the documents required**
- 2. Service and delivery options**
- 3. Address and payment details**

### PLEASE NOTE

A New Zealand Working Holiday Visa permits the holder to stay in New Zealand for up to either 12, 23 or 36 months depending on the visa you apply for. You are not permitted to work permanently in New Zealand but may undertake short-term work to supplement your holiday. You are permitted to undertake short-term study courses of up to 6 months.

To be eligible for a New Zealand Working Holiday Visa you must be aged between 18-35 years of age.

Depending on your proposed length of stay and your previous travel history, you may be required to undertake a medical examination conducted by an NZ approved doctor.

## 1. Checklist of the documents required

✓ Please tick to confirm you have provided the following:

- NEW ZEALAND WORKING HOLIDAY VISA APPLICATION FORM** – Please find attached. It is important to carefully read through all the questions and fully complete all forms in **BLOCK CAPITALS** with a **BLACK PEN**. All application forms **MUST** be printed single-sided. Application forms printed double-sided **WILL NOT** be accepted.
- COPY OF PASSPORT** – Please include a copy of the photograph page of your passport. Your passport must be valid for at least 3 months beyond your exit date from New Zealand.
- SECOND FORM OF ID** – Please include a copy of a second form of ID. This could be a driving licence, birth certificate or National ID Card for example.

⚠ Failure to provide us with these documents will result in delays with your application.

## 2. Service and delivery options

✓ Please tick to confirm which service and delivery type you are requesting:

	Service Type	Processing Time	Embassy Fee	Service Fee	VAT	Total
<input type="checkbox"/>	Standard	15 days*	£320.00 <sup>†</sup>	£87.46	£17.49	<b>£424.95</b>
<input type="checkbox"/>	Priority	5 days*	£320.00 <sup>†</sup>	£170.79	£34.16	<b>£524.95</b>

\*Working days excluding postal days.

<sup>†</sup>Includes visa processing fee and International Visitor Conservation and Tourism Levy (IVL).

### ⚠ PLEASE NOTE

The processing time above refers only to The Travel Visa Company's processing time. Once we have submitted your application, the New Zealand Immigration Department will process your application. Most applications are processed within a maximum of two weeks; however, processing time can be longer depending on the circumstances of the application.

Delivery Type	Price
<input type="checkbox"/> Email Confirmation	-
<input type="checkbox"/> Provide Pre-Paid Envelope*	-
<input type="checkbox"/> Posted Confirmation	£5.00
<input type="checkbox"/> Collect from TVC Office	-

**DATE OF TRAVEL**

..... DD/MM/YYYY

**LENGTH OF STAY**

..... Days

\*If you provide a pre-paid envelope please ensure it has your return address and the correct postage amount.

### 3. Address and payment details

Name: .....

Address: .....

.....

.....

Postcode: .....

Telephone: .....

Email: .....

**Credit/Debit Card**

Name on card:

.....

Card Number:

.....

Expiry Date: ..... CVC: .....

**Paypal** paypal@thetravelvisacompany.co.uk

**Cheque**

**BACS** Reference: .....

Cheque/BACS payments are to be made payable to "The Travel Visa Company Ltd."

Bank Details: 68032405 / 08-92-50

**EMAIL MARKETING** (not required)

I would like to sign up to the TVC mailing list.

We do not share your data with any third parties. To view our privacy policy, visit:

[www.thetravelvisacompany.co.uk/privacy](http://www.thetravelvisacompany.co.uk/privacy)

**TERMS & CONDITIONS** (required)

I have read, fully understood and agree to the Terms & Conditions and Client Declaration.

[www.thetravelvisacompany.co.uk/terms](http://www.thetravelvisacompany.co.uk/terms)

[www.thetravelvisacompany.co.uk/declaration](http://www.thetravelvisacompany.co.uk/declaration)

Signed: ..... Date: .....

Please contact us if you would like to receive a printed copy of these documents.

**Personal Information**

Surname:	<input type="text"/>	As shown in passport
Given name(s):	<input type="text"/>	As shown in passport
Preferred title:	<input type="text"/>	
Gender:	<input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Other <input type="text"/>	
Date of birth:	<input type="text"/>	DD/MM/YYYY
Place of birth:	<input type="text"/>	
Town/City:	<input type="text"/>	
State/Province:	<input type="text"/>	
Country:	<input type="text"/>	

**Applicant Contact Details**

Phone number:	<input type="text"/>
Email address:	<input type="text"/>
Current address:	<input type="text"/>

**Passport Details**

Passport type:	<input type="checkbox"/> Regular <input type="checkbox"/> Official <input type="checkbox"/> Diplomatic	
Passport number:	<input type="text"/>	
Issuing country:	<input type="text"/>	
Issuing authority:	<input type="text"/>	
Issue date:	<input type="text"/>	DD/MM/YYYY
Expiry date:	<input type="text"/>	DD/MM/YYYY

**Work Details**

Current Occupation:	<input type="text"/>
<i>If you have not worked in the last 12 months, please state your previous occupation. If you have not worked in the last 5 years, please enter N/A.</i>	

**Health Details**

Do you have any medical conditions that requires, or may require, renal dialysis during your intended stay in New Zealand?

- Yes  
 No

Do you have active tuberculosis?

- Yes  
 No

Do you have any of the following conditions: cancer, heart disease or a mental/physical/intellectual disability?

- Yes  
 No

Do you have any medical conditions that currently require, or may require, hospitalisation or residential care during your intended stay in New Zealand?

- Yes  
 No

In the last 5 years have you spent a combined 3 months in any country or countries **not** considered to be low risk for TB?

- Yes  
 No

A full list of countries considered low risk for TB can be found here - <https://www.immigration.govt.nz/new-zealand-visas/preparing-a-visa-application/medical-info/countries-with-a-low-incidence-of-tb>

**If you have answered yes to any of the above Health Details questions, you must provide further detail:**

<input type="text"/>
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**Character Details**

Have you ever been convicted of any offence for which you have been sentenced to a term of imprisonment of 5 years or more, or for an indeterminate period capable of running for 5 years or more?

- Yes  
 No

In the last 10 years have you ever been convicted of any offence for which you have been sentenced to imprisonment for a term of 12 months or more, or for an indeterminate period capable of running 12 months or more?

- Yes  
 No

Have you ever been deported from any country, not including New Zealand?

- Yes  
 No

**If yes** Country:

Date of deportation:  DD/MM/YYYY

Have you ever been **charged** for any offence against the law in any country?

- Yes  
 No

Have you ever been **convicted** for any offence against the law in any country?

- Yes  
 No

Are you **currently under investigation** for any offence against the law in any country?

- Yes  
 No

Have you ever been excluded from or refused entry into any country?

- Yes  
 No

Have you ever been removed from or asked to leave any country?

- Yes  
 No

**Character Details**

If you have answered **yes** to any of the above **Character Details** questions, you **must** provide further detail:

*Please provide as much detail as possible, including dates, locations and resulting sentences where appropriate.*

## Working Holiday Visa Questions

Have you previously been issued a New Zealand Working Holiday Visa?

- Yes  
 No

Do you have sufficient funds available for your Working Holiday in New Zealand?

- Yes  
 No

*This typically needs to be the equivalent of NZ\$4,200 or NZ\$350 for each month you intend to be in New Zealand.*

Date of travel:

Proposed length of stay:

- 12 months  
 23 months  
 36 months

Have you previously visited New Zealand?

- Yes  
 No

**If yes** Date:

Do you have sufficient funds to purchase an outward ticket when you are due to leave New Zealand?

- Yes  
 No

- Please tick to confirm you are a British citizen who normally resides in the UK and has not been absent from the UK for more than two years immediately preceding this application.

## Declarations

I understand that if I make any false statements, or provide any false or misleading information, or have changed or altered this form in any material way, my application may be declined, or my visa may later be revoked. I may also be committing an offence and be liable to prosecution.

- Yes  
 No

I understand the notes and questions in this form, and I declare the information given is true and complete.

- Yes  
 No

## Declarations

I understand that between the time that I make this application and the time it is decided, or between the time I am issued with a visa and the time I travel to New Zealand, any relevant matter relating to my application changes, I am obliged to inform INZ.

- Yes  
 No

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 .

- Yes  
 No

I authorise INZ to make any enquiries it deems necessary regarding the information provided on this 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.

- Yes  
 No

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 the INZ.

- Yes  
 No

I accept that any advice given to me by INZ before submitting this form was intended to assist me, and acting on that does not mean that my application will be granted.

- Yes  
 No

I understand that in order to work in certain occupations in New Zealand registration is required by law. I accept that the grant of a visa does not guarantee that registration will be granted.

- Yes  
 No

I understand that INZ may provide information about my entitlement to work to potential employers via the online enquiry system. The enquiry system is authorised by legislation.

- Yes  
 No

I understand I am responsible for making sure I leave New Zealand before my visa expires and that if I do not I may face removal action.

- Yes  
 No

**Declarations**

I am fully aware of the policy requirements I need to meet. I understand that if it is a condition of the scheme I am applying under I must be able to show evidence that I hold adequate medical/hospitalisation insurance cover for the time I will spend in New Zealand.

 Yes No

Additional writing space if required: