



APPLICATION FOR ADMISSION TO A UNIVERSITY OF OTAGO COLLEGE OF EDUCATION POSTGRADUATE PROFESSIONAL PROGRAMME

Applicants are asked to provide:

1. Copies of any degrees or diplomas that may help their application for admission;
2. Copies of academic records;
3. An outline of work experience (indicating length of service, details of responsibility, and relevance to teaching or work in the field of education or related fields);
4. An outline of any practical, professional, or scholarly experience that will enable you to take advanced level academic study (eg, leadership role in professional development workshop or conference, key professional responsibilities in school, publications in professional and/or scholarly journals, or other advanced training courses you have participated in);
5. Evidence of teacher registration (for PGCertTchg and PGDipTchg applicants);
6. A copy of letter outlining NZQA equivalency (if your qualifications are from another country).

Please complete this form and return it, with the necessary documentation, to: *Distance Teaching Co-ordinator, University of Otago College of Education, PO Box 56, Dunedin.*

SURNAME: _____ **FIRST NAME(S):** _____

STUDENT ID NUMBER (if known): _____ **EMAIL:** _____

HIGHEST QUALIFICATION: _____

YEAR COMPLETED: _____ **AT:** _____

PROGRAMME APPLYING FOR ADMISSION TO:

- Postgraduate Certificate in Teaching (endorsed in ICT) (PGCertTchg (INCT))
- Postgraduate Diploma in Teaching (endorsed in ICT) (PGDipTchg (INCT))
- Master of Teaching (MTchg)

SIGNATURE: _____ **DATE:** _____

OFFICE USE ONLY

Application received by: _____

Date application received: _____

Application: Admitted / Declined

APPLICATION CHECKLIST

- Copy of degree/diploma
- Copy of academic records
- Copy of work experience
- Copy of teacher registration
- Copy of NZQA equivalency

Please print your name and address in Dec/Jan for notification of the outcome of your application in the box below:

Contact telephone number (Dec/Jan):

() _____

The decision on your admission to the:

is as follows:

Admitted / Declined

Divisional Administration Manager

COMMENTS:



**APPLICATION FOR ADMISSION TO A
UNIVERSITY OF OTAGO COLLEGE OF EDUCATION
POSTGRADUATE PROFESSIONAL PROGRAMME**

Please attach this form to your application.

SURNAME: _____ **FIRST NAME(S):** _____

TELEPHONE: (____) _____ **(DAY)** **FAX:** (____) _____ **(DAY)**

PLACE OF EMPLOYMENT: _____

POSITION: _____

PROGRAMME APPLYING FOR ADMISSION TO:

<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>

Postgraduate Certificate in Teaching (endorsed in ICT) (PGCertTchg (INCT))

Postgraduate Diploma in Teaching (endorsed in ICT) (PGDipTchg (INCT))

Master of Teaching (MTchg)

QUALIFICATIONS

List all degree/s and diploma/s or other tertiary qualifications held by you.

Qualification	Institution	Dates

Completed

Yes / No

Yes / No

Yes / No

Yes / No

Yes / No

WORK EXPERIENCE

Most recent first.

Place of Employment	Position	From	To

Please ensure that all necessary documentation is included. Do not send original documentation