

AGENT AUTHORISATION FORM

TO: MASSEY UNIVERSITY

FROM: _____
("I" Prospective Student)

My Details

Massey Student ID Number (if known)

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Full Name
(as shown on passport)

Date of Birth

dd		mm		YYYY			

Address:

City:

Country:

Email

Telephone:

Authorisation

From the date of this Form I agree:

- That both the Agency and the Consultant named below ("my Agent") are authorised by me:
 - to submit enrolment applications on my behalf to Massey University to study Massey University programmes.
 - to supply any information about me, as requested by Massey University, to Massey University (including proficiencies, career intentions, etc).
 - to receive information about me and about studying at Massey University from Massey University including, but not limited to, enrolment application progression, outcome of application assessment, fees, items required for programmes, whether such information is by email, telephone, post or facsimile.

- to complete my Application for Admission on my behalf including amending any details on that Application.
 - to represent me either by phone or in writing or both in my engagement with Massey University.
- I acknowledge that this authority applies until either Massey University receives written notice from me that it no longer applies or Massey University has made an Offer of Place to me or Massey University revokes access for my Agent, whichever occurs first. Even when the authority has been revoked I acknowledge that I am bound by the actions and omissions of my Agent from the date of this authorisation until the date of revocation.
 - I agree that I am responsible to Massey University for the actions and omissions of my Agent and that Massey University is not responsible to me for acting or not acting (as the case may be) on my Agent's instructions.
 - I understand that Massey University will collect, store, use and disclose personal information about me in the course of conducting its proper business and that a unique identifier will be assigned to me to facilitate this. I have read and understand how such information will be managed and disclosed in accordance with the Privacy Act 1993, and as outlined on the University website (<http://privacy.massey.ac.nz>) and in the University Calendar. I acknowledge that I have the right to access and seek correction of personal information about me and understand that if I withhold information or provide false or misleading information my enrolment may be terminated.
 - I understand and agree that my Application for Admission will form part of a contract between me and Massey University. The other terms of that contract are set out or referred to in the document entitled "Student Contract" which can be viewed on the Massey University website. The Contract will be formed if Massey University gives me an Offer of Place and if Massey University receives my acceptance of the Offer of Place. Even after I accept any Offer of Place my enrolment at Massey University may be subject to conditions being satisfied or waived by Massey University by notice in writing to me. If my enrolment becomes unconditional or is not subject to conditions and I am permitted to study at Massey University, Massey University will issue a Confirmation of Enrolment and then I am enrolled.

6. I agree that only I can accept any Offer of Place on a Massey University programme and not my Agent. I agree that before doing so I will read the terms and conditions of enrolment at Massey University and in accepting any Offer of Place I will be bound by those terms and conditions. I also agree that I must pay all tuition fees and other fees to Massey University directly and not to my Agent. I acknowledge that before I accept any offer of place I must also read all information about studying at Massey (including tuition fees and course costs, application requirements, conditions of acceptance, refund conditions, English language requirements, insurance information and accommodation). I understand that I am not committed to study at Massey until I have accepted an Offer of Place.

7. I acknowledge that disclosure by Massey University of information to my Agent about studying at Massey University constitutes disclosure to me.

My Agent

Company: _____
(or trading name)

Branch: _____
(if applicable)

City: _____

Country: _____

Consultant Name: _____

Consultant Email: _____

Consultant Telephone: _____

Signed by the Prospective Student:

Date:

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Time:

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NOTE: If Prospective Student is under 18 years old when signing this form then the Parent/Guardian of the Prospective Student must also sign it.

Name of Parent/Guardian: _____

As Parent/Guardian I agree that I am and the Prospective Student is bound by the terms and conditions on this Agent Authorisation Form.

Signed by the Guardian:

Date:

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Time:

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