



Please print clearly using capital letters in a blue or black pen. Please complete all sections.

Personal

First name

Current surname

Previous surname

Permanent Address Post Code

Home Phone Cellphone

Email Address

Date of birth / / / NZQA Number (NSI or NSN)

Gender Male Female NZ Residential Status Citizen Permanent Resident

Ethnic Group If Maori, which IWI?

Employer

Salon Name

Salon Address Post Code

Salon Phone

Fees & Payment

Fees - please tick and ensure correct payment is included with this application - all cheques should be made out to **HITO**

Apprentice/QbyE or working in a NZARH Salon \$135

Non-apprentice or QbyE in a non-NZARH Salon \$300

Would you like a receipt for this payment? Yes No

Send my results to the following address Home Salon

Declaration and Signature

I declare that the above particulars given are correct.

Signature

Date of signature / / /

Now Please Post to either:

- HITO, PO Box 11 921, Ellerslie, Auckland 1542
- HITO, PO Box 11 764, Central Office, Wellington 6142
- HITO, PO Box 1575, Christchurch 8140

OFFICIAL USE ONLY

Apprentice Non-Apprentice QbyE

Units checked Units registered

SLM signature

Receipt Number