

Admission Application Form

Application for Membership or Transfer of Membership Grade

Personal Information

Family Name: _____

Given Names: _____

Date of Birth: _____ (day) / _____ (month) /
_____ (year)

Postal Address _____

_____ Postcode _____

Work Telephone Number (0 ____) _____

Mobile Number (0 ____) _____

Home Telephone Number (0 ____) _____

Email Address _____

Website (if applicable) _____

Advice to Applicants

1. A non-refundable Admission Application processing fee of NZ\$50 must accompany all applications for Admission or Re-admission. Changes to membership are not presently charged for.
2. Please allow 14 working days for processing and notice to you of the result of your application.
3. New Admissions are bound by the Rules and Code of Ethics of the Association from the date of Admission.

Declaration

I hereby apply for:

Admission (or Re-admission)

Change of membership from _____ to _____

Date and Place of Application: _____

In the event that I am awarded admission, I unconditionally agree to accept and be bound by the Registered Rules and Code of Ethics of the Association and to uphold its objects. I further declare that all the information supplied by me is a true and fair statement.

Signature of the Applicant: _____

Phone +64 4 472 1702,

[Email: danz@danz.co.nz](mailto:danz@danz.co.nz)

<http://www.danz.co.nz>



A - Design Discipline

Architectural	Data Processing	Marine (Naval)
Aviation	Educational	Mechanical (Manufacturing)
Cartographic	Electrical	Production
Civil	Electronic	Railways
Consumer Durable (Product)	Engineering	Structural
Chemical Processing	Environmental (Landscape)	
Clothing	Graphics (Printing)	Survey
	Interior (Spatial)	Telecommunications
	Land Transport	Other (please specify)

B - Formal or Academic Qualifications

Qualification	Institution
1. _____	_____
2. _____	_____
3. _____	_____
4. _____	_____

C - Continued Education Record

Course or Qualification	Year/ Duration
1. _____	_____
2. _____	_____
3. _____	_____
4. _____	_____

D - Professional Development History

Membership of Trade / Professional Bodies	Status and Year Admitted / Rescinded
1. _____	_____
2. _____	_____
3. _____	_____
4. _____	_____

E - Work History

Activity / Position Held	Employer / Organisation	Period Engaged
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____
4. _____	_____	_____
5. _____	_____	_____

F - Additional Information

Please feel free to provide any additional information that you wish DANZ to know about.

1. _____
2. _____
3. _____
4. _____

G – Attachments

- C.V.
- Copies of Certificates, etc.
- Photocopy of Licenses etc
- Signed Form
- \$50 application fee
 - Bank Transfer
 - Cheque Enclosed

Send to: Design Association of New Zealand Inc. PO Box 12463, Thorndon Wellington, 6144
Or Email to: danz@danz.co.nz