OFFICE USE ONLY | Client no.: | Date received: / / | Application no.

September 2024 INZ 1269



Application from an Onshore RSE Worker

Application for a limited visa

Important information

This form is only to be used to apply for a limited visa to work for a recognised seasonal employer that has offered you temporary seasonal work in the horticulture or viticulture industries.

This form may be used to apply for an RSE limited visa.

I am applying for a further limited visa from New Zealand.

Tick this box if you are in New Zealand, currently hold an RSE limited visa, and are applying for a further RSE limited visa. **Note:** if you are in New Zealand and applying for a further RSE limited visa, you need to allow sufficient time for a decision to be made on your application before your current visa expires. If your visa does expire, your application for a further visa does not make your stay in New Zealand lawful or give you the right to remain in New Zealand while your application is being considered.

If you are in New Zealand on an RSE limited visa, any application you submit for any other temporary or residence class visa (except for another RSE visa) will be declined.

You must include with this form all the following documents.

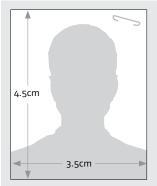
- A certified copy of your passport or travel document (which must be valid for at least three months past the date you plan to leave New Zealand).
- Two recent passport-sized photographs attached to this form at 'Section A: Applicant's personal details'.
- A completed Chest X-ray Certificate (INZ 1096) (if required).
- Provide evidence of either holding or being approved to hold acceptable medical insurance such as an insurance certificate or letter of approval from an insurance company.
- You must provide a **copy** of an employment agreement between yourself and a New Zealand RSE employer that has an agreement to recruit overseas workers.

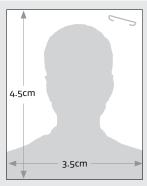


Section A Applicant's personal details

All applicants must complete this section.

Attach two passport-size photographs of yourself here. The photographs must be less than six months old. Write your full name on the back of each photograph.





A 1	Name as shown in passport
	Family/last name
	Given/first name(s)
A2	Gender
A3	Date of birth DD / MM / YYYY
A4	Town/city of birth
	Country of birth
A5	Passport details
	Number Country

Expiry date DD / MM / YYYY A6 Country of citizenship

Section B Contact details

All applicants must complete this section.

	applicants must complete this section.	
}]	1 Your NZ residential address	
	Address	
	Telephone (daytime)	Telephone (evening)
	Email	

Name and address for communication	communication about this application						
Same as address at 🖪 , or 🗌 as	s below						
Family/last name		Given/first name(s)					
Company name (if applicable) and	address						
	applicable)		For help search: v	www.nzbn.govt.nz			
Telephone (daytime)		Telephone (eve	ning)				
Email							
Do you authorise the person state	ed at B2 to act on you	ur behalf?	No				
Have you received immigration ad	 lvice on this applicati	ion?					
You can find a definition of immigration ac							
Yes Make sure that your immigration			s details.				
□No							
Section C RSE employment d	letails		_				
		ding this socion\2 Co	plast and tisk box				
How many seasons have you work This is my first or second seaso		_	elect one tick box.				
_							
	Provide the contact details of the recognised seasonal employer (RSE) who has offered you employment in New Zealand and your Employment Period number.						
RSE's name and address							
RSE's telephone (daytime)		RSE's telephone	e (evening)				
Fax	Email						
Employment Period number							
Provide the following details abou	ut your offer of emplo	oyment.					
Position offered (planting/ maintaining/harvesting/packing)	Date of entry to New Zealand	Date of start of work	Date of finish of work	Date of departure from New Zealand			
	/ /	/ /	/ /	/ /			

C4	If you have an offer of er	mployment from two or more RSEs	s, for two or more	e consecutive periods o	of employment,
	provide details of these	job offers in the table below.			

RSE's name	Employment Period Number	Position offered (planting/maintaining/harvesting/packing)	Date of start of work	Date of finish of work
			/ /	/ /
			/ /	/ /
			/ /	/ /
			/ /	/ /
			/ /	/ /

Tick the box that applies to you: I have attached my insurance	certificate as evidence that I hold acceptable medical insurance.
	oroval from an insurance company as evidence of being approved to hold
ction D Character details	
Have you been:	
• convicted	☐ Yes ☐ No
• charged	☐ Yes ☐ No
 under investigation 	☐ Yes ☐ No
for any offence(s) against the lav	w in any country?; or
deported from	☐ Yes ☐ No
• excluded (refused entry) from	☐ Yes ☐ No
• refused a visa by	☐ Yes ☐ No
 removed from 	☐ Yes ☐ No
any country, excluding New Zeala	and?
If you have answered Yes to any paper if necessary.	of the questions in n, provide details below. Continue on a separate piece o

Se	ction E Health details
All a	applicants must complete this section.
EI	Do you have tuberculosis (TB)?
E2	Do you have any medical condition(s) that requires, or may require, one of the following during your stay in New Zealand?
	• Renal dialysis Yes No
	• Hospital care Yes No
	• Residential care*
	If you have answered Yes to any of the above questions, provide further details such as what your medical condition is and how long you have had the medical condition.
Ε3	Have you submitted a chest X-ray certificate with another Immigration New Zealand application in the last 36 months? Yes Go to E4 No Go to E6
E4	Have you spent six consecutive months in a country that is not on the list of low incidence TB countries since your previous application?
	Yes You are required to provide a new Chest X-ray Certificate (INZ 1096) regardless of your intended length of stay in New Zealand. Go to E5
	No You are not required to provide a new Chest X-ray Certificate (INZ 1096). Go to E6
E 5	Have you provided a completed Chest X-ray Certificate (INZ 1096)? ☐ Yes ☐ No
E6	Are you pregnant?
	☐ Yes ☐ No
	We will advise you if we need you to submit any further information, such as tests, reports or a new certificate at a later date.

^{*} Residential care is long-term care provided in live-in facilities for the aged or for people with physical, sensory, intellectual, or psychiatric disabilities.

Section F Declaration by applicant

I understand the questions and contents of this form, and the information I have provided is true and correct.

I will inform Immigration New Zealand of any relevant fact or change of circumstances that may (i) affect the decision on my application for a visa, or (ii) affect the decision to grant entry permission based on the visa for which I am applying.

I understand I am responsible for making sure I leave New Zealand before my visa expires and that if I do not I will be liable for deportation.

I understand that while in New Zealand, any application I submit for a temporary or residence class visa (other than under RSE Limited Entry Instructions) will be declined.

I understand that Immigration New Zealand may provide information about my entitlement to work to potential employers via the online VisaView system. VisaView is authorised by legislation.

Residents and people holding work visas for a stay of two years or more (and their dependent children) are eligible for publicly-funded health and disability services. Other work or limited visa holders, students, and visitor visa holders generally are not eligible. People covered by New Zealand's Reciprocal Health Agreements with Australia and the United Kingdom are entitled to publicly-funded health care for immediately necessary medical treatment only. I understand that if not entitled to free treatment, I will pay for any health care or medical assistance I may require in New Zealand.

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 INZ. I authorise any insurance provider to provide information about my insurance cover to INZ.

I authorise INZ to make any enquiries it considers necessary in respect of information provided on this form in order to make a decision on this application and enquiries about my subsequent immigration status. I authorise any agency which holds information (including personal information) relevant to those matters to disclose that information to INZ.

I understand that if I have received immigration advice from an immigration adviser and if that immigration adviser is not licensed under the Immigration Advisers Licensing Act 2007 when they should be, INZ will return my application.

I understand that if granted a limited visa to work in New Zealand for a recognised seasonal employer, I am only able to work for the employer and in the position that is noted on my limited visa label.

I understand that any breach of my limited visa conditions will result in me becoming liable for deportation and I will be deported from New Zealand.

Signature of applicant	Date	DD	/ MM	// ^	YYY
Signature of applicant	Date	L,	/	i/L_	

Section G Immigration adviser's details

This section must be completed by the applicant's immigration adviser. If the applicant does not have an

mn	nigration adviser, this section does not have to be completed.
G1	Tick the one option that applies to you_
	☐ I am a licensed immigration adviser under the New Zealand Immigration Advisers Licensing Act 2007. Go to [62]
	☐ I am exempt from licensing under the New Zealand Immigration Advisers Licensing Act 2007. Go to [63]
	If you are unlicensed when you should be licensed under the Immigration Advisers Licensing Act 2007, Immigration New Zealand will return your client's application. It is an offence to provide immigration advice without holding a licence, unless you are exempt.
G2	Licensed advisers. Please provide your licence details.
	Licence type
	full provisional limited. List conditions specified in the register.
	Licence number 2 0 Go to Section H: Declaration by person helping the applicant to complete this form.
G3	Exempt from licensing. Tick one box below to show why you are exempt from licensing.
	I provided immigration advice in an informal or family context only, and I did not provide the advice systematically or for a fee.
	\square I am a New Zealand member of Parliament or member of their staff and I provided immigration advice as part of my employment agreement.
	☐ I am a foreign diplomat or consular staff.
	☐ I am an employee of the New Zealand public service and I provided immigration advice within the scope of my employment agreement.
	☐ I am a lawyer and I hold a current practising certificate as a barrister or as a barrister and solicitor of the High Court of New Zealand.
	☐ I am employed by, or I am working as a volunteer for, a New Zealand community law centre where at least one lawyer is on the employing body of the community law centre or is employed by or working as a volunteer for the community law centre in a supervisory capacity.
	\square I am employed by, or I am working as a volunteer for, a New Zealand citizens advice bureau.

 $\label{thm:complete} \textit{Go to Section H: Declaration by person helping the applicant to complete this form.}$

Section H

Declaration by person helping the applicant to complete this form

This section must be completed and signed by the applicant's immigration adviser, or by any person who has assisted the applicant by providing immigration advice, explaining, translating, or recording information on the form for the applicant. If the applicant does not have an immigration adviser, and no one helped the applicant to fill in this form, this section does not have to be completed.

If you are unlicensed when you should be licensed under the Immigration Advisers Licensing Act 2007, Immigration New Zealand will return your client's application. It is an offence to provide immigration advice without holding a licence. For more information, go to the Immigration Advisers Authority website www.iaa.govt.nz, or email info@iaa.govt.nz or write to them at PO Box 6222, Wellesley Street, Auckland 1141, New Zealand. Name and address of person assisting applicant. Same as address given at B2, or as below. Family/last name Given/first name(s) Company name (if applicable) and address New Zealand Business Number (if applicable) For help search: www.nzbn.govt.nz Telephone (evening) Telephone (daytime) Fax Email I understand that after the applicant has signed this form it is an offence for me to change or add further information, change any documents attached to the form, or attach any further documents to the form. However, if changes are needed, the person making the changes must state on the form what information or documents have been changed and give reasons for the changes. I note that the maximum penalty for this offence is a fine of up to NZ\$100,000 and/or a term of imprisonment of up to seven years. I certify that the applicant asked me to help them complete this form and any additional forms. I certify that the applicant agreed that the information provided was correct before signing the declaration. ☐ I have assisted the applicant as an interpreter/translator ☐ I have **assisted** the applicant with recording information on the form ☐ I have **assisted** the applicant in another way. Specify \sqcup I have **provided immigration advice** (as defined in the Immigration Advisers Licensing Act 2007) and my details in Section G: Immigration adviser's details are correct. Signature of person assisting Immigration Advisers Licensing Act 2007 Under the Immigration Advisers Licensing Act 2007 it is an offence to provide immigration advice without being licensed or exempt. If your immigration adviser is not licensed when they should be, Immigration New Zealand (INZ) will return your application. For more information and to view the register of licensed advisers, go to the Immigration Advisers Authority website www.iaa.govt.nz or email info@iaa.govt.nz. Lawyers provide immigration advice and are exempt from licensing under the Immigration Advisers Licensing Act

2007. For more information and to view the register of immigration lawyers, go to the New Zealand Law Society

website www.lawsociety.org.nz.

About the information you provide

Immigration New Zealand collects the information about you on this form to determine your application for a limited visa to work for a Recognised Seasonal Employer. We may also use the information to contact you for research purposes or to advise you on immigration matters.

Collecting the information is authorised by the Immigration Act 2009 and the Immigration Regulations made under that Act. You do not have to provide the information, but if you do not we are likely to decline your application.

Deciding whether you are eligible to board a flight to New Zealand

The information we collect may also be used to determine whether you are allowed to board a flight to New Zealand. We will not share your personal information with airline check-in agents; however, we will send a boarding message to the airline check-in agent based on the information you have provided in this form.

Immigration New Zealand may also share the information you have provided with other government agencies that are entitled to it by law, or with other agencies (as you have agreed in the declaration).

You are able to ask for the information we hold about you and have any of it corrected if you think it is necessary.

The address of Immigration New Zealand is PO Box 1473, Wellington 6140, New Zealand. **Do not send your application to this address.**

For more information

If you have questions about completing the form:

- see our website www.immigration.govt.nz/contactus
- telephone our call centre on 0508 558 855 (within New Zealand).

Section I

Paying your application fee and immigration levy

To find out how much to pay, payment methods, where to send your application, and how long a decision may take, see www.immigration.govt.nz/fees.

Your application fee and immigration levy
Amount you are paying:
Amount
Currency (e.g. NZD, USD, RMB)
Application number (office use only)
Credit/debit card details
☐ Mastercard ☐ Visa
Name of cardholder
Card number
CVC/CVV number
Note: Your CVC/CVV number is the three-digit number found on the signature strip on the back of your credit/debit card.
Expiry date DD / MM / YYYY
Signature of cardholder



