



**New Zealand Certificate in Domestic Maritime
Operations (Restricted Limits) (Level 4)
Programme Application Form 2026**

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Welcome to New Zealand Coastguard Education.

Please read the instructions below carefully before you complete this application form. This form determines your eligibility to study in this programme. It is not an enrolment form.

Your application will be reviewed, and you may be offered a place in the programme and sent an enrolment form.

There are a limited number of places available, and applications will be considered in the order they are submitted. You will be notified as to whether you are successful or not for this intake.

INSTRUCTIONS

. Please fill in the form properly by:

- Completing all sections of the form.
- Tick the box that applies for multi-choice questions.
- Signing and dating the form.

First Name/s:

Surname:

Date of Birth:

Contact phone number:

Personal Email address:

Physical Address:

NSN (National Student Number) (If you have one):

Are you a New Zealand citizen, permanent resident or Australian Citizen?

No

Yes

You will need to provide a certified copy of your passport or birth certificate prior to enrolment.

Do you have access to a commercial vessel/s and certificated skipper/s or suitable qualified seafarers who can sign off onboard vessel practical tasks?

No

Yes

Are you able to complete and have signed off on 200 hours of sea time within the 46 weeks of the programme?

No

Yes

How much maritime experience do you have?

Why are you interested in doing this programme?

How did you hear about the programme?

What is your current employment?

If you wish to have any prior learning recognised, please contact the team for more information, there is a fee associated with this. Any prior recognised learning must cover all the learning outcomes for a course to be successful. There may be an assessment associated with this.

The fees for the programme are invoiced after an Offer of Place has been issued and accepted.

Declaration:

I hereby declare that the information provided above is true and accurate to the best of my knowledge.

- **Name:** [Your Full Name]
- **Date:** [Date]

Signature: