

# STUDENT ALLOWANCE 92 WEEK LIMIT EXTENSION APPLICATION FORM

**COMPLETE THIS FORM IF YOU WANT AN EXTENSION TO FINISH YOUR SECONDARY SCHOOL STUDIES AS YOU HAVE ALREADY RECEIVED THE STUDENT ALLOWANCE FOR 92 WEEKS.**

**IF YOU NEED AN EXTENSION TO YOUR STUDENT ALLOWANCE FOR TERTIARY STUDY, YOU NEED TO COMPLETE THE 200 WEEK LIMIT EXTENSION APPLICATION WHICH CAN BE DOWNLOADED FROM [www.studylink.govt.nz](http://www.studylink.govt.nz).**

Usually you can only get the Student Allowance for 92 weeks while studying at secondary school. But you may be able to get more if you have special circumstances and need some extra time to finish your studies, for example because of an illness.

For more information on an extension of your Student Allowance visit [www.studylink.govt.nz](http://www.studylink.govt.nz).

**You'll also need to complete a Student Allowance application (unless you've applied already).  
The easiest way to apply for your Student Allowance is online by visiting our website at [www.studylink.govt.nz](http://www.studylink.govt.nz).**



# BEFORE YOU COMPLETE THIS FORM – READ THIS PAGE

HERE ARE SOME IMPORTANT THINGS YOU NEED TO KNOW BEFORE YOU COMPLETE THIS APPLICATION.

## USE BLUE OR BLACK INK ONLY

When completing your application you must only use blue or black ink. If your application is completed in any other colour we might get you to complete another one.

## ANSWER ALL THE QUESTIONS

You need to answer every question in this application. If a question doesn't apply to you, use 'N/A' or 'nil'. Don't leave the space blank as this could delay the process and you may not get paid on time.



## YOU MAY NEED TO PROVIDE DOCUMENTS

If you're applying for an extension because you have special circumstances you may need to provide documents to support your application.



## SIGN AND DATE THE FORM

Remember to sign and date this application. You will also need to get the supporting statement in this form completed and signed.

## WHERE TO SEND THIS FORM

Send your completed form (and any documents we need to see) to:

StudyLink  
FreePost 207116  
PO Box 30300  
Lower Hutt 5040

If you need more information visit our website [www.studylink.govt.nz](http://www.studylink.govt.nz).

### OFFICE USE ONLY

Processed by	Authenticated by	Checked by
Signature	Signature	Signature
Date	Date	Date

Comments	Certified by
	Signature
	Date

**1. What is your legal name?**

This is your legal name as appears on your Passport or Birth Certificate.

First name	Middle name(s)	Surname or family name

**2. What is your date of birth?**

Day     Month     Year

<b>OFFICE USE ONLY</b>

**3. What is your client number?**

This is a number issued to you by StudyLink or Work and Income. This is on your Community Services Card if you have one. If you don't have a client number or don't know it, leave this question blank.

**4. Where will you live while studying?**

<b>Address</b>		
<b>Suburb</b>	<b>City</b>	<b>Country</b>
		NEW ZEALAND

**5. What is the name of your current study programme?**

Education provider (full name)	Study programme

**6. How many extra weeks Student Allowance do you need for your secondary study?**

**7. Why are you applying for an extension of your Student Allowance?**


Please note: If you are applying for an extension because of an illness or disability, this needs to be confirmed by a registered Medical Practitioner.

# PRIVACY STATEMENT

The legislation administered by the Ministry of Social Development allows us to check the information that you give us in this form. This may happen when you apply for financial assistance and at any time after that.

The Privacy Act 1993 requires us to tell you that:

- The information you give us is collected under the authority of the legislation administered by the Ministry of Social Development.
- The information will be held by the Ministry of Social Development.
- The information is collected for the purposes of the legislation administered by the Ministry of Social Development (including StudyLink, Work and Income, Child Youth and Family and other service lines of the Ministry), and in particular for:
  - granting financial assistance and other assistance under the Social Security Act 1964 and Education Act 1989 (and any Regulations under those Acts)
  - statistical and research purposes
  - providing advice to Government
  - care and protection needs of children
  - providing support and services to you and your family
  - providing education related services
  - providing employment related services.
- The information you give us may be compared with information held by Inland Revenue, the Ministry of Justice, the Department of Corrections, the New Zealand Customs Service, the Department of Internal Affairs, the Accident Compensation Corporation, Housing New Zealand, Statistics New Zealand, Ministry of Health, Immigration New Zealand, the Ministry of Education, New Zealand Qualifications Authority, the Tertiary Education Commission, Student Job Search and education providers. It may also be compared with social security information (for example, pension or benefit information) held by other governments (including Australia and the Netherlands).
- Under the Tax Administration Act 1994, if you have dependent children, the information you give us may be shared with Inland Revenue for the purpose of administering Working for Families Tax Credits.

Inland Revenue may also:

  - use the information for the purposes of child support, Student Loans and taxation
  - disclose it to the Department of Labour, Statistics New Zealand, the Ministry of Justice, the Accident Compensation Corporation, and the Ministry of Education
  - disclose your personal information to your partner.
- Under the Privacy Act 1993 you have the right to ask to see all information we hold about you, and to ask us to correct that information.
- You are not required to give us information; but if you do not give us all the information we ask for, your application for financial assistance may be declined.



## SIGN HERE

### STUDENT'S DECLARATION

The information I have provided is true and I have not left anything out. I understand that if I make a false statement or don't tell StudyLink of a change in my circumstances that I could lose my Student Allowance. If this happens I understand that I will have to pay back any overpayments plus collection costs, and could be prosecuted.

Student's signature

**SIGN HERE** →

Day

Month

Year

## SUPPORTING STATEMENT

**This question can be completed by an authorised staff member from your secondary school, to provide information to support your application. You can also ask your doctor, counsellor or someone else of standing in the community (such as your School Principal, Minister or Kaumatua) who is familiar with your circumstances to confirm your situation. If you already have proof that supports your application you can send this to us instead.**

Please explain why in your view the student should be granted approval to receive a Student Allowance for longer than 92 weeks for secondary school studies. Supporting evidence should be provided where appropriate.


### Your details

First name	Surname or family name

Position / occupation	Education provider or professional stamp
Daytime phone number	



## SIGN HERE

The information I have provided is true and I have not left anything out.

**SIGN HERE** →

Day

Month

Year

# MyStudyLink – get it all done online

- check out what financial assistance you may be able to get
- apply for your student finances
- check your Student Allowance and Student Loan application status
- view and update your personal details
- check your Student Loan balance, change the amount of your living cost payments and apply for your course-related costs
- view details of your next payment and previous transactions
- view your mail online.

**[www.studylink.govt.nz](http://www.studylink.govt.nz)**

## HOW TO CONTACT US

Website: **[www.studylink.govt.nz](http://www.studylink.govt.nz)**

Phone: **0800 88 99 00**

Fax: **0800 88 33 88**

**StudyLink**  
**FreePost 207116**  
**PO Box 30300**  
**Lower Hutt 5040**