

# Bachelor of Health Science (Medical Imaging) Overseas Registration Request Form



Use this form to request hard copies of certified course descriptions.  
These records will be needed when you apply for registration with an overseas body.  
Submit form to [fees@unitec.ac.nz](mailto:fees@unitec.ac.nz)

## Your details

First name	<input type="text"/>	Last name	<input type="text"/>
Student ID number	<input type="text"/>	Phone	<input type="text"/>
Email	<input type="text"/>		
Postal address	<input type="text"/>		
	<input type="text"/>	Postcode	<input type="text"/>

## Payment options

Unitec requires the payment of NZ\$105 (including GST) to be made with this application.  
Payment can be made via internet banking or by credit card.

### Internet banking

Unitec New Zealand Limited bank account: 03 0826 0168942 00

Date internet banking payment made

Please use these details when making your internet banking payment:

**Particulars:** Your Student ID number, e.g. 1234567

**Code:** MedImage

**Reference:** OverseasRego

### Credit card payment over the phone

Phone the Unitec cashier on 09 815 4321 and select option 4.

Have your Visa or Mastercard ready to provide the card number, expiry date, full name of cardholder.

## Office use only

Processed by  Date  Receipt number

After payment, Finance/Cashier email form to [tkk@unitec.ac.nz](mailto:tkk@unitec.ac.nz) to process Overseas Registration Request