

Computer Science Scholarship Examination Student Registration Form



SECTION A - STUDENT TO COMPLETE **PLEASE PRINT CLEARLY**

Surname: _____ First Name: _____

Postal Address: _____

Email Address: _____

Contact Phone Number: _____

Date of Birth: (dd/mm/yy) _____ Male/Female (please circle) _____

School Name: _____ Current Year at School: _____

What programming languages have you worked with this year?

Which programming language will you use for the examination?

Are you currently, or have you in previous years, studied NCEA Technology/Computer Programming?

Please circle level/s: Level 1 Level 2 Level 3

SECTION B - THIS FIELD IS COMPULSORY

You will need a University of Waikato ID number in order to pay the registration fee.

Please enter your University of Waikato ID number if you already have one: _____

If you **do not** have a Waikato student ID number, you can register and receive one at:

<https://sase.waikato.ac.nz/app/NewStudent/ApplicationToEnrol>.

SECTION C - COMPUTING TEACHER TO COMPLETE

Teacher Name: _____

Email Address: _____

Phone Number: _____

Location where student will sit UWCS Examination: _____

Name of Invigilator if the exam will be at school: _____

Courier Address: _____

I agree that the University may publish names and school affiliations of successful candidates and that payment of the \$35.00 registration fee has been paid by Internet banking (account details below).

▼ SIGN HERE

Candidate's Signature: _____ Date: _____

Teacher's Signature: _____ Date: _____

Completed registration form and payment must be made by **Friday, 23 September 2016**. Please email completed registration form to cs-scholarships@waikato.ac.nz or post to Scholarship Administrator, Department of Computer Science, The University of Waikato, Private Bag 3105, Hamilton 3240. Registration fee of \$35.00 to be paid via Internet banking (Account Name: The University of Waikato, ASB Account 12-3122-0084728-00, Reference: CompSci XXXXXXXX (Your UoW seven digit ID number)).