

Cook Islands Ministry of Foreign Affairs and Immigration Visitor Visa and Permit Application Form

You should use this form if you are applying for a visitor visa extension or permit extension as:

· a long term visitor

 extension of a New Zealand or international visitor

You can use this form to apply for a visa or permit for a single person or a family. Family may include a principal applicant, partner and dependent children under 18. Fees apply for each person included in the application.

the application.													
Which type of visitor visa and permit are you applying for?													
Long term visitor □					New 2	Zeala	no	d visitor □	Inte	/ /			
Have you previously held a visa Islands?				sa an	d perr	nit in	th	e Cook	If y				
Permit Numl	ber:							Expiry Date:					
Section A: Applicant's personal details													
A1. Name as shown in passport													
Family/last name: Given/first name					ame(s):								
Title:	Title: Mr 🗆		N	Mrs □ Ms □		Miss		Dr 🗆					
Other name or have eve	•			у									
Gender:	Male [Fe	emale	e 🗆	Date	9 (of birth (DD/M	f birth (DD/MM/YY): / /				
Town/city o	of birth:						С	ountry of birth	1:				
A2. Passpe	ort deta	ails											
Passport Number:					Country of Issue:					Expiry date / /			
Other citize	enships	you	hold:										
A3. Partne	rship s	tatu	s										
S	Single []				Marrie	ed		Pa	rtner/D	e facto \square		

Section B	: Contact o	details								
B1. Currer address:	nt residentia	al								
B2. Phone	Number/s				B3. Email:					
B4. If you a Cook Islan recent ove	ost									
B5. Name	B5. Name and address for communication about this application?									
Same as	address at	B1 □	Same as	s addre	ess at B4 🗆	Differer	nt addres	SS (write in B6)		
B6. Addres	ss for conta	ict:								
Address:										
Phone Nur	mber/s:				Email:					
Note: the pers		ur behalf wil			our behalf? tion about your a	pplication	Yes	□ No □		
B8. If yes,	please pro	vide the i	name, add	ress ar	nd contact de	etails for th	is persor	า:		
Name:										
Address:										
Phone Nur	mber/s:				Email:					
Section C	C: Partner	's perso	nal detai	ils						
If you selected	'Married' or 'Pa	artner' or 'in	question A3, y	ou must	complete this sec	tion if your par	tner is trave	elling with you.		
C1. Partne	er's name	as show	n in passp	ort						
Family/last	name:				Given/first n	ame(s):				
Title:	Mr 🗆 M				Ms □	Miss	s 🗆	Dr □		
	es your pa y or has ev n by:									
Gender:	Male □	Fe	emale 🗆	Date	of birth (DD/	(DD/MM/YY): / /				
Town/city of birth: Country of birth:										

C2. Partne	r's passpo	rt details							
Passport Number:		Country of Issue:			Expiry of (DD/MN			/	/
Other citize	enships your	partner holds:							
Section D: Dependent children's personal details									
Complete this section with details of each dependent child. If you have more than 4 children in your application, use an additional form.									
D1. Dependent child one									
Family/last name: Given/first name(s):									
Gender:	Male □	Female □	Date	of birth (DD/M	M/YY):		/	/	
Town/city c	of birth:			Country of bir	th:				
Passport Number:	•				Expiry of (DD/MN			/	/
Other citize	enships your	child holds:							
D2. Dependent child two									
Family/last name: Given/first name(s):									
Gender:	Male □	Female □	Date	of birth (DD/M		/	/		
Town/city of birth:				Country of bir	th:				
Passport Number:		Country of Issue:			Expiry of (DD/MN			/	/
Other citizenships your child holds:									
D3. Dependent Child 3									
Family/last	name:			Given/first nar	me(s):				
Gender:	Male □	Female □	Date	of birth (DD/M	M/YY):		/	/	
Town/city o	of birth:			Country of bir					
Passport Number:		Country of Issue:			Expiry of (DD/MN			/	/
Other citize	enships your	child holds:							
D4. Depen	dent Child	4							
Family/last	name:			Given/first nar	me(s):				
Gender:	Male □	Female □	Date	of birth (DD/M	M/YY):		/	/	
Town/city o	of birth:			Country of bir					
Passport Number:		Country of Issue:			Expiry of (DD/MN			/	1
Other citize	enships your	child holds:							

Section E: Health					
E1. Do you or any person included in this medical condition that requires, or may reyour stay in the Cook Islands?	Yes □ No □				
If Yes, please provide details and attach any documentation necessary. Please include any major surgeries you have had in the last 12 months.					
Note:					
A full health test completed by an approved panel physician is required for stays of 6 months or more.					
E2. Do you have medical insurance to co your stay?	over you for the period of	Yes □ No □			
Section F. Character					
F1. Have you been convicted at any time driving offence?	Yes □ No □				
F2. Are you currently: • under investigation	Yes □ No □				
wanted for questioning	Yes □ No □				
 facing charges for any offence in an 	Yes □ No □				
F3. Have you ever been:excluded from any country, excluding	Yes □ No □				
 refused entry from any country, excl 	Yes □ No □				
removed or deported from any coun Islands?	Yes □ No □				
F4. Have you ever been refused a visa/p reside in any country, excluding the Cool		Yes □ No □			
F5. Have you ever been a member of, or organisation?	r adhered to, any terrorist	Yes □ No □			
F6. Have you had (or currently have) an with, any government, regime, group or a committed war crimes, crimes against human rights abuses?	Yes □ No □				
F7. Are you a member of a criminal gang criminal gang?	g? Or associated with a	Yes □ No □			
If you answered Yes to any of the questions F1-F7 , provide full details. This includes full details of any charges, convictions and the sentence or penalty imposed.					

F8. Police certificates you must provide								
Select which option applies. Police certificates must be less than six months old when you submit them.								
You must provide a national (state police checks will not be any country you have lived in more during the previous 5 yes time already spent in the Cooland either you have not provided police were issued more than	for 6 months or ears (including lik Islands), colice certificates plication, or	certificates if: you are no Islands for you have a certificates previous vis	are not intending to be in the Cook ds for 6 months or longer, or have already provided police cates to Cook Islands with a bus visa application, and those ce certificates were issued less than					
Section G. Visa specifics								
G1. Are you applying from outside the Cook Islands? Yes □ No □								
G1a. If Yes:								
estimated date of arrival in the Cook Islands (DD/MM/YY): / /								
estimated date of departure from the Cook Islands (DD/MM/YY): / /								
G1b. If No:								
 estimated date of departure 	estimated date of departure from the Cook Islands (DD/MM/YY): / /							
 date your current permit/s 	date your current permit/s will expire (DD/MM/YY): / /							
G2. What is the purpose of you	our visit to the Cook	k Islands?						
Visiting family/friends □	Holiday/vaca	y/vacation ☐ Conference/convention ☐						
Short term study □	Investment exp	loration \square		Other 🗆				
Section H. Financial supp	oort while you ar	e in the Cook	Isla	nds				
H1. Are you using your own funds to support your visit to the Cook Islands or are you being sponsored?								
Own funds: attach copies of evidence you have sufficient funds to support yourself and any family, and either have made onward travel arrangements out of the Cook Islands or have funds to leave.								
Sponsored: attach completed Sponsorship Form.								

Section I. Declaration by applicant – from Schedule 9 Cook Islands Immigration Regulations

I [full name of applicant] state that:

- (a) all the information that I have provided is true and correct:
- (b) all the documents that I have provided are original and unaltered, or if copies of an original document, have been lawfully certified:
- (c) I do not owe any money to the Cook Islands Government (including Cook Islands Immigration):
- (d) I am not serving a ban from travel to, entry, and staying in the Cook Islands:
- (e) I have not been removed or deported from any other country (regardless of how that country may describe forced departure and whether or not they were subsequently banned from the country):
- (f) I am of good character:
- (g) I am not a prohibited person:
- (h) I have not been convicted of-
 - (i) any offence, in the Cook Islands or overseas, for which I was sentenced to imprisonment for a term one year or more (regardless of how that offence and conviction was described in the overseas country, and the term of sentence actually served); or
 - (ii) more than one offence, in the Cook Islands or overseas, for which the combined terms of imprisonment were one year or more (regardless of how those offences and convictions were described in the overseas country, and the term of sentence actually served):
- (i) I am not intending to undertake any actions or activities that are contrary to the values of the Cook Islands, its culture, and its community:
- (j) I am not intending to undertake criminal activities, activities as a member of a gang of concern, terrorist organisation, or other United Nations sanctioned organisation, or any activities that would otherwise constitute a threat or a risk to the security, defence, or public order of the Cook Islands:
- (k) I have an acceptable standard of health and have no health conditions that might be a danger to public health or impose significant costs or demands on Cook Islands' health or special education services:
- (I) I agree to provide any further information or document requested by Cook Islands Immigration where the request is made with good reason:
- (m) I acknowledge that information and documents are being collected, and further information and documentation may be requested, with good reason, to:
 - (i) make a decision on my application or about my eligibility for permanent residence or for the visa or permit or visa or permit waiver for which I have applied; and
 - (ii) detect, prevent, investigate, prosecute and respond to offences or suspected offences against the Cook Islands Immigration Act 2021 or other Acts; and
 - (iii) support the effective governance of the Cook Islands and to support the effective operation of other Government agencies; and
 - (iv) support the health and well-being of the Cook Islands and the Cook Islands community (in particular to manage risks to public health, and to the cost and demand on the publicly funded health service):
- (n) I agree that the application and the associated information and documents can be shared with Government agencies in order to support the success, safety, and security of the Cook Islands, including to manage risks to public health, and the cost and demands on the health services:
- (o) I agree that the application and the associated information and documents (excluding any Police certificates and health tests) can be shared with my prospective employer, education provider, or intern provider (if applicable) if this is necessary to make a decision on my application:
- (p) I agree that by making an application, Cook Islands Immigration can receive information, such as criminal history, health tests, and financial information from third parties. This includes information from the Ministries of Health, Justice, Finance and Economic Management, and Internal Affairs, the Cook Islands Customs Service, Police Service, and international immigration and law enforcement agencies:
- (q) I agree to advise of any changes to the application information or any material changes in circumstance during the application process, and if a visa or permit or visa or permit waiver or both are granted, I agree to abide by all conditions that are imposed on that visa or permit or visa or permit waiver and leave the Cook Islands before it expires:
- r) I have been advised that if all the required information and documents are not provided, or the

declaration is not signed by me, Cook Islands Immigration may be unable to decide my application. If this is the case, it will be declined. Signature of applicant Date: Date: Signature of partner Signature of parent/guardian if applicant is under 18 years of age Date Section J. Declaration by person assisting the applicant If no one helped the applicant to fill in this form, this section does not have to be completed. J1: Name and address of person assisting applicant: Family/last name: Given/first name(s): Organisation name (if applicable) and address: Phone Number/s: Email: J2. Declaration The person assisting the applicant must read and sign their agreement to this declaration in the space below. • I understand that after the applicant has signed this form it is an offence for me to change or add further information, or change or add any documents attached to the form, without making a statement identifying what information or material has been changed, added or attached and by whom. If I make these changes or additions, I must state on the form what they were, who made them and the reason they were made. • I understand that the maximum penalty for this offence is a fine of up to NZ\$10,000 and/or a term of imprisonment of up to 7 years. • I certify that the applicant asked me to help them complete this form and any additional

I certify that the applicant agreed that the information provided was correct to declaration	efore signing the
Signature of person assisting	Date:

forms.

Documents required

Use the checklist to find out which documents you must provide.

NOTE: ALLOW FOR UP TO 20 WORKING DAYS TO ASSESS THIS APPLICATION

All applicants must provide:	✓
Completed, signed application form	
Appropriate fee	
Copy of passport or travel document for everyone included in the application	
 Medical certificates if required for everyone included in the application or proof of adequate medical insurance cover for the duration 	
Police certificates if required for everyone included in the application	
Evidence of financial support consisting of: a. evidence showing you have sufficient funds in your name to support yourself and any family, or b. a completed Sponsorship Form	
 Evidence that you have the means to leave the Cook Islands consisting of: a. pre-purchased travel out of the Cook Islands, or b. evidence showing you have sufficient funds to purchase travel out of the Cook Islands, or c. a completed Sponsorship Form. 	
 If your partner and/or dependent children are included in this application: a. evidence of your relationship with your partner and/or b. evidence that you are the parent/guardian of the children included in this application 	

About the information you provide

Deciding whether you are eligible for a visa

Cook Islands Immigration collects the information about you on this form to decide whether you are eligible for a visitor visa and permit. Collecting the information is authorised by the Cook Islands Immigration Act 2021 and the Cook Islands 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 the Cook Islands

The information we collect may also be used to determine whether you are allowed to board a flight to the Cook Islands. 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. Cook Islands Immigration 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 Cook Islands Immigration is Ministry of Foreign Affairs and Immigration, Government Building, Avarua, Rarotonga, Cook Islands.

Other documents we may need

Sometimes we may ask for additional documents or information to consider with an application. You may wish to send other documents or information so that we can consider it with this application. Send photocopies only (not original documents), as these documents will not be returned to you.

If we need to see an original document, we will ask you to produce it later.

Returning your documents

We will return original documents to the address given at **B5** above.

Office Use Only										
Fee breakdown – tick required fee/s per person										
Long term visitor	\$470 🗆	ind	A 1 - 0			rnational or extension		\$470 □		
Total amount for all per	sons in appl	ication		\$						
Receipt No.			Date	:		/ /				
Bond may be imposed (maximum \$10,000)										
Bond requested?	Yes □	No □	Total	l Amour	nt	\$				
Receipt No.			Date	:			/	/		
Receiving Officer										
Name										
Date:	/	/	Appli	pplication scanned to file						
Allocating Officer										
Name										
Date:	/	Appli	pplication entered into CMS							
Applicant CMS No.										
Travel Movements Ch	eck									
Arrival	/	/	Depa	arture			/	/		
Principal Immigration	Officer Che	eck								
Comments										
Signature:										
Date	/	/								
Communication										
Decision letter sent			Date	:			/	/		
Visa/Permit Number			Any conditions recorded							
Start	/	/	Expi	ry			/	/		