



## **Application for provisional registration**

Profession: Psychology

Part 7 Division 6 of the Health Practitioner Regulation National Law (the National Law)

This form is for individuals who are applying for provisional registration to enable them to undertake the period of supervised practice required to be eligible to apply for general registration. Individuals applying must have completed a four-year accredited sequence of study in psychology completed in the last ten years, or a sequence of study that, in the Board's opinion, is substantially equivalent to an approved qualification.

A list of approved programs of study in psychology is available on the Board's website at www.psychologyboard.gov.au/Accreditation

There are three distinct pathways available for completion of the required supervised practice:

- The higher degree pathway: a fifth and sixth-year accredited higher degree leading to general registration (i.e. Masters, Doctorate, or combined Masters/PhD), or
- The 5+1 internship program: a fifth year accredited degree (i.e. Master of Professional Psychology), followed by a one year Board-approved internship, or
- The overseas qualifications pathway: qualifications that are assessed
  as equivalent to an accredited six year sequence of study in psychology
  and completion of a Board approved transitional program. Applicants
  for registration via the overseas assessment pathway should not use
  this form please use form APOS-76 instead.

Note, each pathway is distinct and components from two or more pathways cannot be combined to meet the supervised practice requirement for general registration. It is important that you refer to the Board's registration standards, codes and guidelines before completing this application. These documents can be found at **www.psychologyboard.gov.au** 



This application will not be considered unless it is complete and all supporting documentation has been provided. Supporting documentation must be certified in accordance with Ahpra guidelines. See *Certifying documents* in the *Information and definitions* section of this form.

## Privacy and confidentiality

The Board and Ahpra are committed to protecting your personal information in accordance with the *Privacy Act 1988* (Cth). The ways the Board and Ahpra may collect, use and disclose your information are set out in the collection statement relevant to this application, available at **www.ahpra.gov.au/privacy**.

By signing this form, you confirm that you have read the collection statement. Ahpra's privacy policy explains how you may access and seek correction of your personal information held by Ahpra and the Board, how to complain to Ahpra about a breach of your privacy and how your complaint will be dealt with. This policy can be accessed at www.ahpra.gov.au/privacy.

## **Symbols in this form**



#### **Additional information**

Provides specific information about a question or section of the form.



#### Attention

Highlights important information about the form.



#### Attach document(s) to this form

Processing cannot occur until all required documents are received.



#### Signature required

Requests appropriate parties to sign the form where indicated.



#### Mail document(s) directly to Ahpra

Requires delivery of documents by an organisation or the applicant.

## Completing this form

- Read and complete all questions.
- Ensure that **all pages** and required **attachments** are returned to Ahpra.
- Use a black or blue pen only.
- Print clearly in BLOCK LETTERS
- Place X in all applicable boxes:
- DO NOT send original documents



Do not use staples or glue, or affix sticky notes to your application. Please ensure all supporting documents are on A4 size paper.

## **SECTION A:** Personal details



The information items in this section of the application marked with an asterisk (\*) will appear on the public register.

1. What is your name and date of birth?

Title* Family na	MR 🔀	MRS 🔀	MISS 🔀	MS 🔀	DR 🔀	OTHER	SPECIFY						
First giver	name*												
Middle na	me(s)*												
Previous r	names know	<b>n by</b> (e.g. ma	iden name)										
Date of bi	rth DD	/ <u>M</u> M	/ <u>Y Y</u>	YY									
	If you have ever been formally known by another name, or you are providing documents in another name, you <b>must</b> attach proof of your name change unless this has been previously provided to the Board. For more information, see <i>Change of name</i> in the <i>Information and</i>												

2. What are your birth and personal details?

Country of	birth													
City/Suburb/Town of birth														
State/Territory of birth (if within Australia)														
VIC 🔀	NSW 🔀	QLD 🔀	SA 🔀	WA 🔀	NT 🔀	TAS 🔀	ACT 🔀							
Sex*						<del>.</del>								
MALE	FE	MALE 🔀	INTER	SEX/INDETER	RMINATE $\geq$									
Languages	s spoken flu	ently other t	han English	(optional)*										

## **SECTION B:** Proof of identity



You must provide proof of your identity with this application. Please refer to the *Proof of identity requirements* available at www.ahpra.gov.au/identity.

3. Are you applying for registration from within Australia?



You **must** only use each document once.

The documents provided **must** meet the following criteria:

- At least **one** document must be in your current name.
- Your category B document must have a recent photo.
- All documents must be officially translated into English. Please refer to Translating documents at www.ahpra.gov.au/translate for further information.
- If using your passport, a certified copy of the identity information page (the photo page) must be provided.
- For documents containing a photograph, the following certification statement must be included by the authorised officer, 'I certify that this is a true copy of the original and the photograph is a true likeness of the person presenting the document as sighted by me.'
- All documents must be true certified copies of the original.
   See Certifying documents in the Information and definitions section of this form for more information.

ES 🔀	NO NO	Go to the next question

#### Choose proof of identity documents to submit - then go to Section C: Contact information

- You must provide one document from each category A, B and C, and one document from category D if the
  document supplied for category B or C does not contain evidence of a current Australian residential address.
- A document may only be used once for any category.

Documents	Cate	gory u	sed:	Documents	Category used:				
Documents	Α	В	С	Documents	Α	В	С		
Australian birth or adoption certificate	$\times$	NA	$\times$	Australian financial institution account	NA	NA	$\times$		
Australian visa (Foreign passport must	V	NA	$\vee$	Australian Medicare card	NA	NA	X		
be selected as evidence for Category B)		NA		Australian PAYG payment summary	NA	NA	$\times$		
ImmiCard	X	NA	X	Australian motor vehicle registration	NA	NA	X		
Australian citizenship certificate	$\times$	NA	X	Australian Taxation Assessment Notice	NA	NA	X		
Australian passport	X	X	X	Australian insurance policy	NA	NA	$\times$		
Australian driver's licence	NA	X	X	Australian pension/healthcare card	NA	NA	X		
Foreign passport	NA	X	X	Category D documents					
Australian Working with Children Check or Vulnerable People Check	NA	$\times$	X	A document from Category D is only requ Category B or C document does not prov		-			
Australian firearms or shooter's licence	NA	X	X	of your residential address.					
Australian student ID card	NA	X	X	I have used a Category B or C document	that I	nas			
International or foreign driver's licence	NA	X	X	my current residential address					
Australian proof of age card	NA	X	X	Australian rate notice			X		
Australian government benefits	NA	NA	X	Current Australian lease or tenancy agree	emen	t	X		
Australian academic transcript	NA	NA	X	Australian utility account			$\times$		
Australian registration certificate	NA	NA	X						



You **must** attach a certified copy of **all** proof of identity documents that you have indicated above.





Once **registered** and **living** in Australia, you need to become identity enrolled. Please download and complete the form POIA-00 - Proof of identity requirements form: Within Australia to become identity enrolled.

4. Are you applying for registration from outside Australia?

Go to the next question

NO

Go back to question 3 to nominate the proof of identity you will provide with your application

5. Can you meet the proof of identity requirements for applicants applying for registration within Australia?



You **must** only use each document once.

The documents provided must meet the following criteria:

- At least one document must be in your current name.
- Your category B document must have a recent photo.
- All documents must be officially translated into English. Please refer to Translating documents at www.ahpra.gov.au/translate for further information.

NO	X

Go back to question 3 to nominate the proof of identity you will provide with your application

#### Choose proof of identity documents to submit - then go to Section C: Contact information

You must provide one category B document and two category C documents.

YES

A document may only be used once for any category.

Documents	Category used:  B C	Documents	Categ use B	
Passport or travel document (Certificate of Identity, Document of Identity, ImmiCard,		Birth certificate	NA	X
Laissez Passer and Titre de Voyage)		Driver's licence	NA	X
Australian passport	$\times$	Marriage certificate	NA	X
Australian visa (must be provided in conjunction with a foreign passport of travel	NA X	Identity card	NA	X
document)	NA _	Australia citizenship certificate	NA	X



You **must** attach a certified copy of **all** proof of identity documents that you have indicated above.



### **Certifying documents**

- If using your passport, a certified copy of the identity information page (the photo page) must be provided.
- For documents containing a photograph, the following certification statement must be included by the authorised officer, 'I certify that this is a true copy of the original and the photograph is a true likeness of the person presenting the document as sighted by me.'
- All documents **must** be true certified copies of the original. See *Certifying documents* in the *Information and definitions* section of this form for more information.

## **SECTION C:** Contact information



Once registered, you can change your contact information at any time. Please go to www.ahpra.gov.au/login to change your contact details using your online account.

6.	What	are	vour	contact	details'
υ.	AAIIGE	uiv	voui	COIILACL	uctuns

Provide your current contact details below - place an	next to your preferred contact phone number.
Business hours	Mobile
After hours	
Email	

#### 7. What is your residential address?



When you are not yet practising, or when you are not practising the profession predominantly at one address:

- · your residential address will be recognised as your principal place of practice, and
- the information items marked with an asterisk (\*) will appear on the public register as your principal place of practice.

Refer to the question below for the definition of principal place of practice.

Residential address cannot be a PO Box.

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/Sub	urb/1	own*																		
e or	territ	ory (e	.g. VI	C, A	CT) <b>/I</b>	nter	nati	onal	pro	vinc	e*		Post	tcod	e/ZI	P*				
	<i>C</i> <b>C C C C C C C C C C</b>																			
ntry	(If ot	ner th	an A	ustr	'alia)															

#### 8. Will the address of your principal place of practice be the same as your residential address?



Principal place of practice for a registered health practitioner is:

- the address at which you will predominantly practise the profession; or
- · your principal place of residence, if you are not practising the profession or are not practising the profession predominantly at one address.

Principal place of practice cannot be a PO Box.

The information items marked with an asterisk (\*) will appear on the public register.

Idress (e.g. 123 JAM	ES AVENUE; 0	r UNIT 1A,	30 JAME	S STREET)			
ty/Suburb/Town*							

## 9. What is your mailing address?

Your mailing address is used for postal correspondence.

My principal place of practice

Other (Provide your mailing address below)

Site	e/bui	ldin	g an	d/or	pos	sitio	n/de	par	tmer	nt (i1	app	olica	ble)											
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Add	iress	/P0	Вох	(e.c	1. 12	3 JA	MES	S AVE	NUE	: or	UNI	Г 1А	. 30	JAM	ES S	TRE	ET: (	or PO	) B0	X 12	34)			
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City	//Sul	burb	/Tov	vn																				
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Sta	IG OI	CETT	וטו	y (G.	g. vi	o, A	J1)/1	HE	iiati	onai	μιυ	VIIIC			1 03	Jou	U/ El							
Cou	ıntry	(if c	othe	r tha	ın A	ustr	alia)																	
		-						-				-	-					-						

Effective from: 18 September 2024

## **SECTION D:** Qualification and eligibility for provisional registration



**Registration as a provisional psychologist under the 5+1 internship program** pathway is dependent on the Board being satisfied that the applicant:

- meets the mandatory registration standards
- has completed an accredited four-year sequence of study (or its equivalent) in psychology in the past ten years at the time of application, and
- is currently enrolled in an accredited fifth year degree and evidence of enrolment is provided directly to Ahpra by the educational institution.

Following completion of the fifth year degree continuation of provisional registration will be dependent on:

- submission of evidence by the educational institution of successful completion of all components of the fifth year degree and eligibility to graduate, and
- submission of a proposed supervision plan that is consistent with the *Guidelines for the 5+1 internship program*, which has been agreed to by the provisional psychologist and the principal and secondary supervisors.

**Registration as a provisional psychologist** for applicants undertaking an accredited higher degree leading to general registration is dependent on the Board being satisfied that the applicant:

- meets the mandatory registration standards
- · has completed an accredited four-year sequence of study (or its equivalent) in psychology, and
- is currently enrolled in an accredited higher degree and evidence of enrolment is provided directly to Ahpra by the educational institution.

# 10. What are the details of your qualifications meeting the provisional registration standard?



For more information, see *Certifying documents* in the *Information and definitions* section of this form.

If you are a student completing an accredited program of study you may not yet have your qualification conferred, and are therefore unable and not required to provide a copy of your qualification with your application.

Your application will be processed when the Board receives advice direct from the relevant education provider that you have met the requirements of the course and are entitled to the qualification.

Most recent qualification and examinations/assessments						
Title of qualification						
Name of institution (University/College/Ex	amining body)					
Country						
Start date	Completion date					
MM / Y Y Y Y	MM / Y Y Y Y					
Additional qualification and examination	ons/assessments					
Title of qualification						
Name of institution (University/College/Example 1)	amining body)					
Country						
Start date	Completion date					
MM/YYYY	MM / Y Y Y Y					



If you have received your academic qualification you **must** attach a certified copy.



Attach a separate sheet if all your qualification details do not fit in the space provided.

11. Are you applying to undertake a 5+1 internship program?

YES

N0

Go to the next question

Provide details of your degree and attachments below – then go to question 13

Title of qualification (degree)

Name of institution (University/College/Examining body)



You **must** arrange for evidence of your current enrolment in an accredited fifth year qualification (e.g. Master of Professional Psychology) to be sent directly to Ahpra by the issuing institution.

Only the following forms of evidence will be accepted:

- an official university or higher education institution document (transcript or letter from Head of School) confirming your current enrolment, or
- a print-out of your enrolment record (only if your Head of School has separately sent Ahpra a list of enrolled students confirming your enrolment).

#### A letter of offer does not constitute evidence of enrolment.

You should also note that, following completion of the accredited fifth year qualification, you will be required to submit the following before progressing to the internship year of the 5+1 program:

- evidence of successful completion of all the requirements of the degree and eligibility to graduate,
- a completed Internship program plan (5+1 internship) INPP-76 to provide detailed information about your planned internship program, and
- a copy of your position description(s) relating to the proposed supervised practice program.

12. Are you applying to undertake an accredited higher degree at fifth and sixth year leading to general registration?



Provide details of your degree and attachments below – then go to question 13

Title of qualification (degree)

Name of institution (University/College/Examining body)



You **must** arrange for evidence of your current enrolment to be sent directly to Ahpra by the issuing institution. Only the following forms of evidence will be accepted:

- an official university or higher education institution document (transcript or letter from Head of School) confirming your current enrolment, or
- a print-out of your enrolment record (only if your Head of School has separately sent us a list of enrolled students confirming your enrolment).

A letter of offer does not constitute evidence of enrolment.

N0



You must choose your pathway. You must answer YES to question 11 or 12.

## **SECTION E:** Practice and registration history

13. Have you undertaken psychological practice in the last five years?



The Board's *Recency of practice registration standard* requires that applicants have recent psychological practice experience within the last five years. For more detail, including exemptions that may apply to applicants for provisional registration, refer to the *Information and definitions* section of this form and the *Recency of practice registration standard* in the *Standards and quidelines* section of the website.

YES \_\_\_\_



You **must** attach your signed and dated curriculum vitae outlining your practice history.

Go to the next question

N0



If you completed your qualification for registration within the last five years you are exempt from the Recency of practice registration standard. Otherwise you may be required to undertake other remedial action to meet the Board's recency of practice standard.

Please refer to the Recency of practice registration standard and the Policy for recency of practice requirements in the Standards and guidelines section of the website.

NO

14. Are you currently, or have you previously been, registered as a health practitioner in Australia or overseas?



Registration history only applies if you are currently, or have been previously, registered as a health practitioner.

If you have been registered outside of Australia, the Board requires a Certificate of Registration Status or Certificate of Good Standing from every jurisdiction outside of Australia in which you are currently, or have previously been, registered as a health practitioner during the past five years.

Certificates **must** be dated within three months of your application being received by Ahpra.

Most recent registration										
State/Territory/Country										
Profession										
Period of registration										
D D / M M / Y Y Y Y	to	D	D /	M	M .	/ Y		Υ		
		-								
Additional registration										
State/Territory/Country										
Profession										
Period of registration										



If you have been registered outside of Australia, you **must** arrange for original Certificates of Registration Status or Certificates of Good Standing to be forwarded directly from the registration authority to your Ahpra state office.

Refer to www.ahpra.gov.au/About-Ahpra/Contact-Us for your Ahpra state office address.



Attach a separate sheet if all your registration history does not fit in the space provided.

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## **SECTION F:** Registration period



There is no set registration period for provisional registration. We'll grant you registration for 12 months from the date of the Board's approval or the date you select, whichever is the latter. If it takes more than 12 months to complete the provisional requirements, you'll need to renew your registration.

On the date below, or the date of the Board's approval, whichever is the latter

15. If this application is approved, when would you like your provisional registration to begin?

You can opt to have your registration start on the date of the Board's approval or a date nominated by you, up to 90 days into the future, as long as the date is later than the Board's approval. For more information, see *Registration approval dates* in the *Information and definitions* section of the form.

On the date of the Board's approval

DD/MM/YYYY



You can't start practising until registration has been granted. Please consider if the date you have nominated gives you time to complete any pre-employment or pre-training program requirements. You can update this date by contacting your Regulatory Officer at any time until we finalise your application.

Once your registration has been granted, you cannot change your registration start date.

## **SECTION G:** Suitability statements



Information required by the Board to assess your suitability for registration is detailed in the following questions. It is recommended that you provide as much information as possible to enable the Board to reach a timely and informed decision.

Please note that registration is dependent on suitability as defined in the National Law, and the requirements set out in the Board's registration standards. Refer to **www.psychologyboard.gov.au/Standards-and-Guidelines** for further information.

16. Do you have any criminal history in Australia?



It is important that you have a clear understanding of the definition of criminal history. For more information, see *Criminal history* in the *Information and definitions* section of this form.





NO X



You **must** attach a signed and dated written statement with details of your criminal history in Australia and an explanation of the circumstances.

17. Do you have any criminal history in one or more countries other than Australia?



For more information, see *Criminal history* in the *Information and definitions* section of this form.

If you answer Yes to this question, you are required to obtain an international criminal history check (ICHC) from an approved vendor, who will provide a check reference number and ICHC reference page. For a list of approved vendors and further information about international criminal history checks, refer to www.ahpra.gov.au/internationalcriminalhistory.

NO	X	Go	to	the	next	auestion



You are required to:

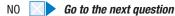
- obtain an international criminal history check from an approved vendor for each country and provide details below, and
- provide details of your criminal history in a signed and dated written statement.

Country	Check reference number
You <b>must</b> attach a separate sheet if the list of overseas countries reference number does not fit in the space provided.	and corresponding check
You <b>must</b> attach the international criminal history check (ICHC) rethe approved vendor.	ference page provided by
You <b>must</b> attach a signed and dated written statement with detail each of the countries listed and an explanation of the circumstance	

18. Are there any countries other than Australia in which you have lived, or been primarily based, for six consecutive months or longer, when aged 18 years or more?



If you answer Yes to this question, you are required to obtain an international criminal history check (ICHC) from an approved vendor, who will provide a check reference number and ICHC reference page. For a list of approved vendors and further information about international criminal history checks, refer to www.ahpra.gov.au/internationalcriminalhistory.



YES \_

You are required to obtain an international criminal history check from an approved vendor for each country and provide details below

Country	Check reference number			
You <b>must</b> attach a separate sheet if the list of overseas countries and corresponding check reference number does not fit in the space provided.				
You <b>must</b> attach the international criminal history check (ICHC) reference page provided by the approved vendor.				

19. Have you previously been registered to practise as a psychologist or provisional psychologist in Australia and have used English as your primary language within the past five years?



All applicants for **initial registration**, which includes all applicants who have not used English as their **primary language** for a period of greater than five years (as at date of application), must demonstrate they meet the *English language skills registration standard*.

YES 🔀

I declare I have used English as my primary language within the past five years.

Go to question 24

NO



Go to the next question

#### All applicants must demonstrate English language competency via one of the following pathways:



An evidence requirements guide is available at www.ahpra.gov.au/Registration/Registration-Standards/English-language-skills. *Recognised country* means one of the following countries:

- Australia
- Canada

## Combined secondary and tertiary education pathway

You have undertaken and satisfactorily completed:

- at least two years of secondary education that was taught and assessed solely in English in a recognised country, and
- tertiary qualifications on which you are relying to support your eligibility for registration under the National Law, which were taught and assessed solely in English in a recognised country.

- New Zealand
- · Republic of Ireland

#### **Extended education pathway**

You have undertaken and satisfactorily completed at least six years' (full time equivalent) continuous education taught and assessed solely in English, in any of the recognised countries, which includes tertiary qualifications in the profession on which you are relying to support your eligibility for registration under the National Law.

- South Africa
- United Kingdom

#### **Primary language pathway**

With overseas qualification in a non-recognised country
English is your primary language and you have undertaken and satisfactorily completed:

- all of your primary and secondary education taught and assessed solely in English in a recognised country, and
- tertiary qualifications on which you are relying to support your eligibility for registration under the National Law, which were taught and assessed solely in English.

· United States of America.

**English language test pathway** 

You have achieved the required minimum scores in one of the approved English language tests and meet the requirements for test results specified in the Board's English language skills registration standard.

## 20. Which one of the English language competency pathways do you meet?



Ahpra may verify the information you provide below.

For more information, see *English language skills* in the *Information and definitions* section of this form.

4	О	
и	П	
N.		- 1

If a qualification that was relied on for registration is not an approved program of study, you must provide confirmation that the course was taught and assessed solely in English. A list of approved programs of study is available at www.ahpra.gov.au/Accreditation/Approved-Programs-of-Study

Combined secondary and tertiary education pathway

Extended education pathway

Primary language pathway

Provide details of secondary and tertiary education in the table bel	low
then go to question 24	

Provide details of secondary, vocational and tertiary education in the table below, then go to question 24

This is a declaration that English is your primary language

Provide details of primary, secondary and tertiary education in the table below, then go to question 24

English language test pathway

X	G	o to	question	21
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#### Complete the following table of education undertaken in chronological order (earliest to most recent):

Timeframe	Level of education	Program name If applicable	Education institution Specify name and address	Recognised c		Study status
Study commenced:  Study completed:	Primary Secondary Vocational Tertiary			Australia  New Zealand  South Africa  United States	Canada Republic of Ireland United Kingdom	Full time Part time
Study commenced:  Study completed:	Primary Secondary Vocational Tertiary			Australia  New Zealand  South Africa  United States	Canada Republic of Ireland United Kingdom	Full time Part time
Study commenced:  Study completed:	Primary Secondary Vocational Tertiary			Australia New Zealand South Africa United States	Canada Republic of Ireland United Kingdom	Full time Part time



Please attach a separate sheet with any additional details that do not fit in the space provided above.

If a qualification specified above was relied on for registration and is **not** an approved program of study, you **must** provide a certified copy of your academic transcript confirming that the course was taught and assessed solely in English.

If the transcript does not confirm that the course was taught and assessed solely in English, you **must** arrange for a letter in the required form to be provided directly to Ahpra by the education provider confirming that the course was taught and assessed solely in English.

21.	Were your results from						
	the English language tests						
	obtained in one or two						
	sittings?						

In certain circumstances, you can use English language test results from a maximum of two test sittings <b>in a six month period</b> . For more information, refer to the Board's <i>English language skills registration standard</i> .
One sitting Provide date of test below, then go to the next question and complete details for one sitting
Two sittings Provide dates below, then go to the next question and complete details for both sittings

Sitting one	Sitting two

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22.	Which of the	se Enalish	language te	ests have vo	ou successfully	completed?
			iaiigaago t	oto nato jo	a caccoccian,	oompiotou.

Provide reference number(s) for the test(s) you are relying on and attach a copy of your test results.

International English Language T Test report form number – sitting o	Test System (IELTS) Academic module ne: Test report form number – sitting two (if applicable):				
lest report form number – sitting o	A A A				
The Board requires the IELTS (acad reading, writing and speaking).	emic module) with a minimum overall score of 7 and a minimum score of 7 in each of the four components (listening,				
Pearson Test of English Academi	c (PTF Academic)				
Registration ID – sitting one:	Registration ID – sitting two (if applicable):				
The Board requires the PTE Academ reading, writing and speaking).	nic with a minimum overall score of 65 and a minimum score of 65 in each of the four communicative skills (listening,				
	juage internet-based test (TOEFL iBT)				
Registration number – sitting one:	Registration number – sitting two (if applicable):				
The Board requires the TOFFL iBT v	with a minimum total score of 94 and the minimum scores of 24 for listening, 24 for reading, 27 for writing, and 23 for				
speaking.	via a minimum total score of 54 and the minimum scores of 24 for listening, 24 for reading, 27 for writing, and 25 for				
the reference number(s), s	est(s) were completed within the past two years, you <b>must</b> provide a copy of your test results, including so that Ahpra can verify your results.  est(s) were not completed within the past two years, you <b>must</b> provide a certified copy of your results.				
23. Were your results from the above-mentioned English	YES NO				
language tests obtained in	In order for your results to be accepted, within 12 months of completing your test(s) you <b>must</b> have commenced:				
the past two years?	• continuous employment as a registered health practitioner in a recognised country where English was the primary language of practice, and/or				
	<ul> <li>continuous enrolment in an approved program of study.</li> </ul>				
	You <b>must</b> lodge this application within 12 months of completing the employment and/or program of study.				
	You <b>must</b> attach a certified copy of your English language test results, <b>and</b> :  • your CV and a letter from employer(s) or a professional referee in the required form confirming continuous employment as a registered health practitioner in a recognised country (if you are relying on continuous employment over two years in duration, only two				
	years is required), and/or				
	<ul> <li>an academic transcript evidencing that you were enrolled continuously in a Board-approved program of study that commenced within 12 months of sitting the English language test, and that you completed your study no longer than 12 months before lodging your application.</li> </ul>				
24. In the coming year, do you commit to meet the Board's	When practising, you must have appropriate professional indemnity arrangements in place that meet the Board's registration standard.				
professional indemnity insurance registration	For more information, see <i>Professional indemnity insurance</i> in the <i>Information and definitions</i> section of this form, or the full registration standard online at www.psychologyboard.gov.au/Standards-and-Guidelines				
standard?	YES NO				
	Provide details of your circumstances				

Provide	details	of	your	circum	stances

You **must** attach a separate sheet with additional details that do not fit in the space provided.

25. Do you have an impairment that detrimentally affects, or is likely to detrimentally affect, your capacity to practise the profession?



For more information, see *Impairment* in the *Information and definitions* section of this form.



NO X



You **must** attach to this application details of any impairments and how they are managed.

You **must** attach to this application details of any registration suspension or cancellation.

26. Is your registration in any profession currently suspended or cancelled in **Australia (under the National** Law or a corresponding prior Act) or overseas?



NO



27. Have you previously had your registration cancelled, refused or suspended in Australia



NO



(under the National Law or a corresponding prior Act) or overseas?



You **must** attach to this application details of any cancellation or refusal.

28. Has your registration ever been subject to conditions, undertakings or limitations in **Australia (under the National** Law or a corresponding prior Act) or overseas?







You **must** attach to this application details of any conditions, undertakings or limitations.

29. Are you disqualified from applying for registration. or being registered, in any profession in Australia (under the National Law, a corresponding prior Act or a law of a co-regulatory jurisdiction), or overseas?



Co-regulatory jurisdiction means a participating jurisdiction (of the National Law) in which the Act applying (the National Law) declares that the jurisdiction is not participating in the health, performance and conduct process provided by Divisions 3 to 12 of Part 8 (of the National Law).









You **must** attach to this application details of any disqualifications.

30. Have you been, or are you currently, the subject of conduct, performance or health proceedings whilst registered under the National Law, a corresponding prior Act, or the law of another jurisdiction in Australia or overseas, where those proceedings were not finalised?









You **must** attach to this application details of any conduct, performance or health proceedings.

## **SECTION H:** Obligations, consent and declaration



**Before you sign and date this form,** make sure that you have answered all of the relevant questions correctly and read the statements below. An incomplete form may delay processing and you may be asked to complete a new form. For more information, see the *Information and definitions* section of this form.

## **Obligations of registered health practitioners**

The National Law pt 7 div 11 sub-div 3 establishes the legislative obligations of registered health practitioners. A contravention of these obligations, as detailed at points 1, 2, 4, 5, 6 or 8 below does not constitute an offence but may constitute behaviour for which health, conduct or performance action may be taken by the Board. Registered health practitioners are also obligated to meet the requirements of their Board as established in registration standards, codes and guidelines.

#### **Continuing professional development**

 A registered health practitioner must undertake the continuing professional development required by an approved registration standard for the health profession in which the practitioner is registered.

#### **Professional indemnity insurance arrangements**

- A registered health practitioner must not practise the health profession in which the practitioner is registered unless appropriate professional indemnity insurance arrangements are in force in relation to the practitioner's practice of the profession.
- A National Board may, at any time by written notice, require a registered health practitioner registered by the Board to give the Board evidence of the appropriate professional indemnity insurance arrangements that are in force in relation to the practitioner's practice of the profession.
- A registered health practitioner must not, without reasonable excuse, fail to comply with a written notice given to the practitioner under point 3 above.

#### Notice of certain events

- A registered health practitioner must, within 7 days after becoming aware that a relevant event has occurred in relation to the practitioner, give the National Board that registered the practitioner written notice of the event. Relevant event means—
  - a) the practitioner is charged, whether in a participating jurisdiction or elsewhere, with an offence punishable by 12 months imprisonment or more; or
  - b) the practitioner is convicted of or the subject of a finding of guilt for an offence, whether in a participating jurisdiction or elsewhere, punishable by imprisonment; or
  - appropriate professional indemnity insurance arrangements are no longer in place in relation to the practitioner's practice of the profession; or
  - d) the practitioner's right to practise at a hospital or another facility at which health services are provided is withdrawn or restricted because of the practitioner's conduct, professional performance or health; or
  - e) the practitioner's billing privileges are withdrawn or restricted under the *Human Services (Medicare) Act 1973* (Cth) because of the practitioner's conduct, professional performance or health; or
  - f) the practitioner's authority under a law of a State or Territory to administer, obtain, possess, prescribe, sell, supply or use a scheduled medicine or class of scheduled medicines is cancelled or restricted; or
  - g) a complaint is made about the practitioner to the following entities-
    - (i) the chief executive officer under the *Human Services (Medicare) Act* 1973 (Cth);
    - (ii) an entity performing functions under the Health Insurance Act 1973 (Cth);
    - (iii) the Secretary within the meaning of the National Health Act 1953 (Cth);
    - (iv) the Secretary to the Department in which the *Migration Act 1958* (Cth) is administered;
    - (v) another Commonwealth, State or Territory entity having functions relating to professional services provided by health practitioners or the regulation of health practitioners.
  - the practitioner's registration under the law of another country that provides for the registration of health practitioners is suspended or cancelled or made subject to a condition or another restriction.

#### Change in principal place of practice, address or name

- A registered health practitioner must, within 30 days of any of the following changes happening, give the National Board that registered the practitioner written notice of the change and any evidence providing proof of the change required by the Board
  - a) a change in the practitioner's principal place of practice;
  - a change in the address provided by the registered health practitioner as the address the Board should use in corresponding with the practitioner:
  - c) a change in the practitioner's name.

#### **Employer's details**

- A National Board may, at any time by written notice given to a health practitioner registered by the Board, ask the practitioner to give the Board the following information—
  - a) information about whether the practitioner is employed by another entity;
  - b) if the practitioner is employed by another entity—
    - (i) the name of the practitioner's employer; and
    - (ii) the address and other contact details of the practitioner's employer.
- 8. The registered health practitioner must not, without reasonable excuse, fail to comply with the notice.

## Consent to nationally coordinated criminal history check

I consent to Ahpra and the National Board, at any time during the next 12 months, obtaining a written report about my criminal history through a nationally coordinated criminal history check. I acknowledge that:

- Ahpra and the National Boards may obtain a written report about my criminal history at any time during the next 12 months
- a complete criminal history, including resolved and unresolved charges, spent convictions, and findings of guilt for which no conviction was recorded, will be released to Ahpra and the National Board
- my personal information currently held by Ahpra and from this form will be provided to the Australian Criminal Intelligence Commission (ACIC) and Australian police agencies for the purpose of conducting a nationally coordinated criminal history check, including all names under which I am or have been known
- my personal information may be used by police for general law enforcement purposes, including those purposes set out in the Australian Crime Commission Act 2002 (Cth)
- my identity information provided with this application will be enrolled with Ahpra and used by Ahpra and the National Board when obtaining a written report about my criminal history at any time during the next 12 months
- if I have not provided any identity information with this application, and Ahpra needs to obtain a written report about by criminal history at any time during the next 12 months, I will provide the required identity information when requested by Ahpra
- Ahpra may validate documents in support of this application, or that
  I provide when requested at any time during the next 12 months, as
  evidence of my identity at any time during the next 12 months
- if and when this application for renewal of registration is granted, Ahpra may obtain a written report about my criminal history at any time during the next 12 months for the purpose of:
  - a) checking a statement made by me in this application for renewal,
  - b) an audit carried out by the National Board,
  - c) assessing my ongoing suitability to hold health practitioner registration, including if a complaint is made about me to Ahpra, or
  - d) considering an application made by me about my health practitioner registration, and
- I may dispute the result of the nationally coordinated criminal history check by contacting Ahpra in the first instance.

### **Declaration**

#### I declare that:

- the statements made, and any documents provided, in support of this
  application are true and correct, and
- I am the person named in this application and in any documents provided.

I make this declaration in the knowledge that a false declaration amounts to a contravention of the National Law and may lead to refusal of registration or health, conduct or performance action under the National Law.

I **confirm** that if I advertise any of my services or my business, the advertising\* complies with section 133 of the National Law and the National Board's Adverting Guidelines as it:

- Is not false, misleading or deceptive or likely to be misleading or deceptive
- does not offer a gift, discount or other inducement without stating the terms and conditions of the offer
- does not use testimonials or purported testimonials about the service or business
- does not create an unreasonable expectation of beneficial treatment, and
- does not directly or indirectly encourage the indiscriminate or unnecessary use of my services.

\*For information about advertising obligations please see the advertising resources page on:

https://www.ahpra.gov.au/Publications/Advertising-hub.aspx

#### I acknowledge that:

- the National Board may validate documents provided in support of this application as evidence of my identity
- failure to complete all relevant sections of this application for renewal of registration and to enclose all supporting documentation may result in this application not being accepted
- notices required under the National Law and other correspondence relating to my application for renewal of registration will be sent to me electronically to me via my nominated email address
- Ahpra uses overseas cloud service providers to hold, process, and maintain personal information where this is reasonably necessary to enable Ahpra to perform its functions under the National Law. These providers include Salesforce, whose operations are located in Japan and the United States of America.

I **undertake** to comply with the all relevant legislation and National Board registration standards, codes and quidelines.

I **understand** that personal information that I provide may be given to a third party for regulatory purposes, as authorised or required by the National Law.



## **SECTION I:** Payment

## You are required to pay a registration fee.

Use the table below to select your registration fee. Your registration fee depends on your principal place of practice, as applicants whose principal place of practice is New South Wales are entitled to a rebate from the NSW Government.







#### **Registration period**

The annual registration period for provisional psychologists is 12 months.

If your application is approved you will be registered for 12 months from the date of approval.

#### Refund rules

The registration fee will be refunded if the application is not approved.

31. Please complete the credit/debit card payment slip below.

Credit/Debit card payment slip – please fill out				
Amount payable  \$ Visa or Mastercard number  Expiry date    M   M   /   Y   Y	Name on card  Cardholder's signature  SIGN HERE			



## **SECTION J:** Checklist

## Have the following items been attached or arranged, if required?

Additional do	cumentation Communication Comm	Attache
Question 1	Evidence of a change of name	$\times$
Question 3	Certified copies of all documents that provide sufficient evidence of your identity	X
Question 5	Certified copies of all documents that provide sufficient evidence of your identity	X
Question 10	Certified copies of your relevant academic qualifications	$\times$
Question 11	Evidence of your current enrolment in an accredited fifth year qualification requested from relevant authority	$\times$
Question 12	Evidence of current enrolment requested from relevant authority	X
Question 13	Signed and dated curriculum vitae outlining your practice history	$\times$
Question 14	Certificate of Registration Status or Certificate of Good Standing has been requested from relevant authority	X
Question 14	A separate sheet with additional registration details	X
Question 16	A signed and dated written statement with details of your criminal history in Australia and an explanation of the circumstances	X
Question 17	A separate sheet of additional overseas countries with criminal history and corresponding ICHC reference number	X
Question 17	A signed and dated written statement with details of your criminal history outside Australia and explanation of the circumstances	X
Question 17 & 18	ICHC reference page provided by the approved vendor	×
Question 18	A separate sheet of additional overseas countries lived in and corresponding ICHC reference number	$\times$
Question 20	A separate sheet with any additional qualification details	$\times$
Question 20	Transcript(s)/letter(s) from education provider confirming that your course was taught and assessed solely in English	$\times$
Question 22	Copy of your English language test results	$\times$
Question 23	Certified copy of your English language test results	$\times$
Question 23	Evidence of continuous employment as a registered health practitioner in a recognised country where English was the primary language of practice and/or continuous enrolment in an approved program of study	$\times$
Question 24	A separate sheet with details of why you do not commit to meet the Board's PII registration standard	$\times$
Question 25	A separate sheet with your impairment details	$\times$
Question 26	A separate sheet with your current suspension or cancellation details	$\times$
Question 27	A separate sheet with you previous suspension, cancellation, or refusal details	$\times$
Question 28	A separate sheet with your conditions, undertakings, or limitations details	$\times$
Question 29	A separate sheet with your disqualification details	$\times$
Question 30	A separate sheet with your conduct, performance or health proceedings	X
Payment		
	Registration fee	X

## Do not email this form.

Please submit this completed form and supporting evidence using the Online Upload Service at www.ahpra.gov.au/registration/online-upload. You may contact Ahpra on 1300 419 495

## **Information and definitions**

#### **CERTIFYING DOCUMENTS**

DO NOT send original documents.

Copies of documents provided in support of an application, or other purpose required by the National Law, must be certified as true copies of the original documents. Each and every certified document **must**:

- be in English. If original documents are not in English, you must provide a certified copy of the original document and translation in accordance with Ahpra guidelines, which are available at www.ahpra.gov.au/ registration/registration-process
- be initialled on every page by the authorised officer. For a list of people authorised to certify documents, visit www.ahpra.gov.au/certify.aspx
- be annotated on the last page as appropriate e.g. 'I have sighted the original document and certify this to be a true copy of the original' and signed by the authorised officer,
- for documents containing a photograph, the following certification statement must be included by the authorised officer, 'I certify that this is a true copy of the original and the photograph is a true likeness of the person presenting the document as sighted by me', along with their signature, and
- list the name, date of certification, and contact phone number, and position number (if relevant) and have the stamp or seal of the authorised officer (if relevant) applied.

Certified copies will only be accepted via the Online Upload Service at www.ahpra.gov.au/registration/online-upload. Photocopies of previously certified documents will not be accepted. For more information, Ahpra's guidelines for certifying documents can be found online at www.ahpra.gov.au/certify.aspx

#### **CHANGE OF NAME**

You must provide evidence of a change of name if you have ever been formally known by another name(s) or any of the documentation you are providing in support of your application is in another name(s).

Evidence must be a certified copy of one of the following documents:

- Standard marriage certificate (ceremonial certificates will not be accepted).
- Deed poll.
- · Change of name certificate.

Faxed, scanned or emailed copies of certified documents will not be accepted.

#### **CRIMINAL HISTORY**

**Criminal history** includes the following, whether in Australia or overseas, at any time:

- · every conviction of a person for an offence
- every plea of guilty or finding of guilt by a court of the person for an offence, whether or not a conviction is recorded for the offence, and
- every charge made against the person for an offence.

Under the National Law, spent convictions legislation does not apply to criminal history disclosure requirements. Therefore, you must disclose your complete criminal history as detailed above, irrespective of the time that has lapsed since the charge was laid or the finding of guilt was made.

The Board will decide whether a health practitioner's criminal history is relevant to the practice of the profession.

You are not required to obtain or provide your Australian criminal history report, Ahpra will obtain this check on your behalf. You may be required to obtain international criminal history reports. For more information, view the full registration standard online at www.psychologyboard.gov.au/Standards-and-Guidelines

#### **ENGLISH LANGUAGE SKILLS**

To be eligible for registration you **must** be able to provide evidence of English language skills that meet the Board's *English language skills registration* standard which can be found at

www.psychologyboard.gov.au/Standards-and-Guidelines

#### **IMPAIRMENT**

Impairment means a physical or mental impairment, disability, condition, or disorder (including substance abuse or dependence) that detrimentally affects or is likely to detrimentally affect your capacity to practise the profession.

The National Law requires you to declare any impairments at the time of application. If you have an impairment, you will need to provide details of the impairment and how it is managed.

#### **PRACTICE**

Practice means any role, whether remunerated or not, in which the individual uses their skills and knowledge as a practitioner in their regulated health profession. Practice is not restricted to the provision of direct clinical care. It also includes using professional knowledge in a direct non-clinical relationship with patients or clients, working in management, administration, education, research, advisory, regulatory or policy development roles and any other roles that impact on safe, effective delivery of health services in the health profession.

#### PROFESSIONAL INDEMNITY INSURANCE (PII)

You must have PII, or some alternative form of indemnity cover that complies with the Board's registration standard, for all aspects of your practice, in all locations in Australia. Initial registration and annual renewal of registration requires a declaration that you will be covered for all aspects of practice for the whole period of the registration. You may be covered by your Australian employer's PII—you will need to confirm this with your employer.

For more information, view the complete registration standard online at www.psychologyboard.gov.au/Standards-and-Guidelines

#### RECENCY OF PRACTICE

In accordance with the *Recency of practice registration standard* an individual must, at the time the application for registration or renewal of registration is made, be able to demonstrate that he or she has practised as a registered psychologist or provisional psychologist for a minimum of 250 hours in the past five years.

Individuals who have successfully completed a Board-approved program of study or Board-approved supervised practice program within the past five years will meet the *Recency of practice registration standard*.

Practitioners who do not meet the recency of practice requirements may be required to undertake remedial action in order to be eligible to renew their registration. Additional guidance on remedial action to meet recency of practice requirements is included in the *Policy for recency of practice requirements*.

For more information, view the *Recency of practice registration standard* and the *Policy for recency of practice requirements* online at

www.psychologyboard.gov.au/Standards-and-Guidelines

#### **REGISTRATION APPROVAL DATES**

**On the date of the Board's approval** – this means your registration will start on the date all application requirements are received and you're assessed as eligible for registration.

On the date below or the date of the Board's approval, whichever is the latter – this means your registration will start on the date you nominated, providing it is after the date of the Board's approval. If not, then your registration will start on the date of the Board's approval.