



APPLICATION FOR REGISTRATION AS A RADIOGRAPHER
Mutual Recognition Act (Commonwealth) 1992, Section 19 Notice
Trans Tasman Mutual Recognition Act (Commonwealth) 1997, Section 18 Notice

I hereby apply for Registration as a Radiographer in the Northern Territory

Note that you may only apply for registration under this legislation if you hold current registration with the Radiographers Board in the following jurisdictions:

Please tick what jurisdiction you are applying from:

VICTORIA QUEENSLAND TASMANIA NEW ZEALAND WESTERN AUSTRALIA

PERSONAL DETAILS

SURNAME: _____
 Dr Mr Mrs Miss Ms *(please tick as appropriate)*

GIVEN NAMES: _____

FORMER NAMES OR ALIASES: *(if applicable)* _____

DATE OF BIRTH: _____ / _____ / _____ **COUNTRY OF BIRTH:** _____

GENDER: Male Female *(please tick as appropriate)*

POSTAL ADDRESS:

BUSINESS ADDRESS:

TELEPHONE NO: *(bh)* _____ **MOBILE:** _____
(ah) _____ **EMAIL:** _____

FAX NO: _____

DOCUMENTS & OTHER REQUIREMENTS FOR REGISTRATION

The following documentation **MUST** be provided with this application. Photocopies will only be accepted if they have been certified to be a true copy by: a Justice of the Peace, Commissioner for Oaths, Police Officer, Solicitor, Bank Manager, Postal Manager, Pharmacist, Australian Defence Force Commissioned Officer, Non-Commissioned Officer or Warrant Officer; or original sighted by an authorised Health Professions Licensing Authority staff member. It is not recommended that you send originals by post. Certified copies will be retained on file.

1. Evidence of current registration/enrolment in Australia or New Zealand.
2. Proof of Identity (eg. Drivers Licence, Passport, Birth Certificate, Statutory Declaration attesting to the applicants identity or other form of official identification).
3. Evidence of Name Change (eg. Marriage Certificate, Divorce Decree or Deed Poll *(if applicable)*).
4. An application and registration fee in Australian dollars (see Payment Options and Schedule of Fees sections of this form).

QUALIFICATIONS

Educational qualifications (include institution and year of graduation):

QUALIFICATION	INSTITUTION	COMPLETED YEAR

OTHER INFORMATION

Last practising position was at: _____

Dates held: From: ____ / ____ / ____ To: ____ / ____ / ____

Date commencing practise in the Northern Territory: ____ / ____ / ____

Intended place of practice in the Northern Territory: _____

Have you ever been registered in the Northern Territory before? Yes No

If yes, what was your registration number? _____

NOTE:

The Radiographers Boards may from time to time allow organisations to access names and business addresses of practitioners registered in the Northern Territory if the organisation can demonstrate and satisfy the Board that the use of the data will, or has, the potential to contribute to the acquisition of knowledge that may improve the health of the community.

PAYMENT OPTIONS

It is recommended that you do not send cash via postal mail. Cash will only be accepted at the Counter. Bankcard/Visa/Mastercard are the **only** Credit Cards accepted.

Fee of \$25.00 is enclosed payable by Cheque Money OrderCard Type Bankcard Visa MasterCard

Card Number

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Expiry Date ____ / ____

Signature _____ Name (*print*) _____**SCHEDULE OF FEES****RADIOGRAPHER** **\$25.00** valid until 31 December**IMPORTANT - Please read the following before completing the rest of the form:**

- If you are unable to complete the questions and statements in the Statutory Declaration you may **not be eligible** to lodge a notice under section 19 of the *Mutual Recognition Act* or section 18 of the *Trans Tasman Mutual Recognition Act* and should enquire with the Board as to how you should make an application for registration.
- If you are licensed with conditions (eg. you are required to practise under supervision or at a specific location) please advise how you intend to satisfy these conditions in the Northern Territory.
- Incomplete notices of application, including omission of payment of the appropriate fee, will not be accepted by the Board resulting in deferment of the right to practise.
- Statements or information, which are materially false or misleading, will result in postponement or refusal of registration.

