



English language skills requirements form

Profession: Nursing and Midwifery

The Health Practitioner Regulation National Law (the National Law)

This form is to determine whether an applicant meets the Nursing and Midwifery Board of Australia's (the NMBA) English language skills registration standard. This form is for applicants of initial registration with the NMBA.

For more information about meeting the *English language skills registration standard*, refer to www.ahpra.gov.au/EnglishLanguageSkills.



This application will not be considered unless it is complete and all supporting documentation has been provided.

Certifying documents

DO NOT send original documents unless specified.

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
- 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, 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 in hard copy by mail or in person (not by fax, email, etc). 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

Symbols in this form



Additional information

Provides specific information about a question or section of 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.

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: ☒

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



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

1. What are your personal details?

Title	MR <input type="checkbox"/>	MRS <input type="checkbox"/>	MISS <input type="checkbox"/>	MS <input type="checkbox"/>	DR <input type="checkbox"/>	OTHER <input type="text" value="SPECIFY"/>
Family name	<input type="text"/>					
First given name	<input type="text"/>					
Middle name(s)	<input type="text"/>					
Date of birth	<input type="text" value="DD"/> / <input type="text" value="MM"/> / <input type="text" value="YYYY"/>					
Profession(s)/division(s) applying for registration as	<input type="checkbox"/> Enrolled nurse <input type="checkbox"/> Registered nurse <input type="checkbox"/> Midwife					
Registration number (if you have one)	<input type="text" value="N M W"/>					



2. Are you submitting this form to supplement an online application?

YES ☒ **Provide details below** NO ☐

You must provide the same online application number as submitted in your online application. This is detailed on the *Next Steps Checklist* you received by email on completion of the online application process.

When you have completed this form, please send it to your AHPRA state/territory office with your *Next Steps Checklist* and other supporting documentation.

Online application number

SECTION B: English language skills requirements

Information required by the NMBA 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 NMBA 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 NMBA's registration standards. Refer to www.nursingmidwiferyboard.gov.au/Registration-Standards for further information.

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

An evidence requirements guide is available at www.ahpra.gov.au/EnglishLanguageSkills.

Recognised country means one of the following countries:

- Australia
- Canada
- New Zealand
- Republic of Ireland
- South Africa
- United Kingdom
- United States of America.

Primary language pathway

English is your primary language and you have undertaken and satisfactorily completed:

- at least six years of primary and secondary education taught and assessed solely in English, including at least two years between 7 and 12, **and**
- your qualification which you are relying on to support your eligibility for registration under the National Law was taught and assessed solely in English in a recognised country.

Extended education pathway

Registered nurses and midwives

You have undertaken and satisfactorily completed five years (full-time equivalent) of education taught and assessed in English, in any of the recognised countries.

The five years must include evidence of a minimum of two years full-time equivalent study towards your tertiary qualification which you are relying on to support your eligibility for registration under the National Law.

Extended education pathway

Enrolled nurses

You have undertaken and satisfactorily completed five years (full-time equivalent) of education taught and assessed in English, in any of the recognised countries.

The five years must include evidence of a minimum of one year full-time equivalent study towards your vocational qualification which you are relying on to support your eligibility for registration under the National Law.

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 NMBA's *English language skills registration standard*.

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

AHPRA may verify the information you provide.

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/Education/Approved-Programs-of-Study

- Primary language pathway ☒ This is a declaration that English is your primary language
Provide details of primary, secondary and tertiary education in the table on the next page, then go to Section C
- Extended education pathway (registered nurse and/or midwife) ☒ **Provide details of secondary, vocational and/or tertiary education (including two years in a pre-registration tertiary program) in the table on the next page, then go to Section C**
- Extended education pathway (enrolled nurse) ☒ **Provide details of secondary, vocational and/or tertiary education (including one year in a pre-registration vocational program) in the table on the next page, then go to Section C**
- English language test pathway ☒ **Go to question 4**



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 country If applicable	Study status
Study commenced: MM/YYYYY	<input type="checkbox"/> Primary <input type="checkbox"/> Secondary			<input type="checkbox"/> Australia <input type="checkbox"/> New Zealand <input type="checkbox"/> South Africa <input type="checkbox"/> United States <input type="checkbox"/> Canada <input type="checkbox"/> Republic of Ireland <input type="checkbox"/> United Kingdom	<input type="checkbox"/> Full time <input type="checkbox"/> Part time
Study completed: MM/YYYYY	<input type="checkbox"/> Vocational <input type="checkbox"/> Tertiary				
Study commenced: MM/YYYYY	<input type="checkbox"/> Primary <input type="checkbox"/> Secondary			<input type="checkbox"/> Australia <input type="checkbox"/> New Zealand <input type="checkbox"/> South Africa <input type="checkbox"/> United States <input type="checkbox"/> Canada <input type="checkbox"/> Republic of Ireland <input type="checkbox"/> United Kingdom	<input type="checkbox"/> Full time <input type="checkbox"/> Part time
Study completed: MM/YYYYY	<input type="checkbox"/> Vocational <input type="checkbox"/> Tertiary				
Study commenced: MM/YYYYY	<input type="checkbox"/> Primary <input type="checkbox"/> Secondary			<input type="checkbox"/> Australia <input type="checkbox"/> New Zealand <input type="checkbox"/> South Africa <input type="checkbox"/> United States <input type="checkbox"/> Canada <input type="checkbox"/> Republic of Ireland <input type="checkbox"/> United Kingdom	<input type="checkbox"/> Full time <input type="checkbox"/> Part time
Study completed: MM/YYYYY	<input type="checkbox"/> Vocational <input type="checkbox"/> Tertiary				
Study commenced: MM/YYYYY	<input type="checkbox"/> Primary <input type="checkbox"/> Secondary			<input type="checkbox"/> Australia <input type="checkbox"/> New Zealand <input type="checkbox"/> South Africa <input type="checkbox"/> United States <input type="checkbox"/> Canada <input type="checkbox"/> Republic of Ireland <input type="checkbox"/> United Kingdom	<input type="checkbox"/> Full time <input type="checkbox"/> Part time
Study completed: MM/YYYYY	<input type="checkbox"/> Vocational <input type="checkbox"/> Tertiary				



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.

4. 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 in a six month period. For more information, refer to the NMBA's *English language skills registration standard*.

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 DD/MM/YYYY

Sitting two DD/MM/YYYY

5. Which of these English language tests have you successfully completed?

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

☐ International English Language Test System (IELTS) Academic module

Test report form number – sitting one:

_____ A

Test report form number – sitting two (if applicable):

_____ A

The NMBA requires the IELTS (academic module) with a minimum overall score of 7 and a minimum score of 7 in each of the four components (listening, reading, writing and speaking).

☐ Occupational English Test (OET)

Candidate number – sitting one:

_____-_____-_____

Candidate number – sitting two (if applicable):

_____-_____-_____

The NMBA requires the OET with a minimum score of B in each of the four components (listening, reading, writing and speaking).

☐ Pearson Test of English Academic (PTE Academic)

Registration ID – sitting one:

Registration ID – sitting two (if applicable):

The NMBA requires the PTE Academic with a minimum overall score of 65 and a minimum score of 65 in each of the four communicative skills (listening, reading, writing and speaking).

☐ Test of English as a Foreign Language internet-based test (TOEFL iBT)

Registration number – sitting one:

Registration number – sitting two (if applicable):

The NMBA requires the TOEFL iBT 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.



If your English language test(s) were completed within the past two years, you **must** provide a copy of your test results, including the reference number(s), so that AHPRA can verify your results.

If your English language test(s) were not completed within the past two years, you **must** provide a certified copy of your results.



6. Were your results from the above-mentioned English language tests obtained in the past two years?

YES ☐NO ☒

- In order for your results to be accepted, within 12 months of completing your test(s) you **must** have commenced:
- continuous employment as a health practitioner in a recognised country where English was the primary language of practice, **and/or**
 - continuous enrolment in an approved program of study.

You **must** lodge this application within 12 months of completing the employment and/or program of study.



You **must** attach a certified copy of your English language test results, **and**:

- your CV and a letter from employer(s) or a professional referee in the required form confirming continuous employment as a 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**
- an academic transcript evidencing that you were enrolled continuously in a NMBA-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.

SECTION C: 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.

Consent

If I provide the NMBA details of an English language test I have completed, I authorise the NMBA to use the information I provide to verify those results with the test provider.

I understand the test provider may be overseas.

I consent to the NMBA and AHPRA making enquiries of, and exchanging information with, the authorities of any Australian state or territory, or other country, regarding my practice as a health practitioner or otherwise regarding matters relevant to this application.

I authorise the NMBA to obtain my criminal history in Australia and overseas.

I understand that:

- 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 the NMBA, and
- information will be extracted from this form and used for the purpose of criminal history checking. This information may be used by Australian police services for law enforcement purposes including the investigation of any outstanding criminal offences.

I acknowledge that:

- the NMBA may validate documents provided in support of this application as evidence of my identity, and
- failure to complete all relevant sections of this application and to enclose all supporting documentation may result in this application not being accepted.

I undertake to comply with all relevant legislation and NMBA registration standards, codes and guidelines.

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.

I confirm that I have:

- met the English language skills pathway requirements indicated on this form, and
- read the privacy and confidentiality statement for this form.

I declare that:

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

I make this declaration in the knowledge that a false statement is grounds for the NMBA to refuse registration.

Signature of applicant



SIGN HERE

Name of applicant

Date

 / /

SECTION D: Checklist

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

Additional documentation		Attached
Question 3	A separate sheet with any additional qualification details	<input type="checkbox"/>
Question 3	Transcript(s)/letter(s) from education provider confirming that your course was taught and assessed solely in English	<input type="checkbox"/>
Question 5	Copy of your English language test results	<input type="checkbox"/>
Question 6	Certified copy of your English language test results	<input type="checkbox"/>
Question 6	Evidence of continuous employment as a health practitioner in a recognised country where English was the primary language of practice and/or continuous enrolment in an approved program of study	<input type="checkbox"/>

Please post this form with required attachments to:

AHPRA
GPO Box 9958
IN YOUR CAPITAL CITY (refer below)

You may contact AHPRA on
 1300 419 495 or you can lodge an enquiry
 at www.ahpra.gov.au

Sydney NSW 2001
 Adelaide SA 5001

Canberra ACT 2601
 Perth WA 6001

Melbourne VIC 3001
 Hobart TAS 7001

Brisbane QLD 4001
 Darwin NT 0801