

# Did you know you can now apply online? Create an Ahpra portal account and complete your application

Click here to apply online

Applying for registration is now available online.

Create an Ahpra portal account and complete your application.

# Applying online is easier, faster and more secure

The online application form only asks questions relevant to your situation – saving you time.

Applying online also means you can

- easily access our new online ID verification
- track your progress as you complete each section of the application
- save as you go and lodge when it suits you
- check back in to see how assessment of your application is tracking.

For the best experience, please use a computer or laptop when applying online.

If you choose to use this form, we will need to follow up with you to ask you to validate some of the information you send us. This form will only be available for a short time.

# **Keeping in contact**

We will let you know about important information to do with your application via your secure Ahpra portal.





# Application for general registration

**Profession: Nursing and Midwifery** 

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

This form is to be used to apply for general registration as a nurse and/or as a midwife by applicants who:

- are currently, or have previously been, registered to practise as a nurse and/or midwife in Australia, or
- have completed a Nursing and Midwifery Board of Australia (NMBA) approved program of study (excluding bridging programs or re-entry to practice programs), more than two years before the date of application.

If you have international qualifications and have not previously registered to practise as a nurse and/or midwife in Australia you should complete the online Self-check to identify the steps that must be successfully completed before you are eligible to apply for general registration. The Self-check is available on the Board's website www.nursingmidwiferyboard.gov.au

If you are a final year student due to complete an Australian approved program of study or a graduate who has completed an Australian approved program of study within the last two years, and have not been previously registered to practise as a nurse and/or midwife in Australia or overseas you should apply for registration using the online form available at www.nursingmidwiferyboard.gov.au/Registration-and-Endorsement/Forms

If you have registration as a nurse or midwife in New Zealand and are subject to certain entitlements under the *Trans Tasman Mutual Recognition Act 1997* (Cth) you should apply for registration using the online form available at **www.nursingmidwiferyboard.gov.au/Registration-and-Endorsement/Forms.** 

Relevant forms are available at www.nursingmidwiferyboard.gov.au/
Registration-and-Endorsement/Forms. It is important that you refer to the
NMBA's registration standards, codes and guidelines before completing this
application. These documents can be found www.nursingmidwiferyboard.
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 the Australian Health Practitioner Regulation Agency (Ahpra) guidelines. For more information, 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.  $\label{eq:continuous}$ 

## **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.

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# **SECTION A:** Application criteria

1. What are you applying for general registration as?

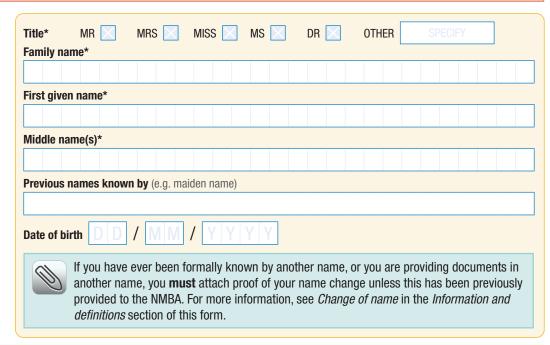
Mark all options applicable to you	r application	
Enrolled nurse	Registered nurse	Midwife

## **SECTION B:** Personal details



**The information items in this section marked \* will appear on the public register of practitioners.** For more information, see *Information on the public register* in the *Information and definitions* section of this form.

2. What is your name and date of birth?



3. What are your birth and personal details?

<b>Country of</b>	Country of birth																		
City/Suburb/Town of birth																			
State/Territory of birth (if within Australia)																			
VIC X	NSW	X	QLD	$\times$	S	SA $\geq$		WA	X	NT	X		TAS	$\times$	1	ACT	X		
Sex*																			
MALE		FE	MALE	X		IN	TERS	SEX/II	NDETE	RMIN	ATE	$\times$							
Languages	Languages spoken fluently other than English (optional)*																		

Effective from: 18 September 2025

#### SECTION C: 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.

4. 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 confidence 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.

be selected as evidence for Category B)	* * * * L	Australian PAYG payment summary	
lease comple	ete tr	1 Etra lai CovVnicle registration	
Australian citizenshin certificate	NA 🔀	Australian Taxation Assessment Notice	
of of ident	CITY	section	
	NA X		
at the end of	f this	formounents	



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





Please complete the new

**Proof of identity section** 

at the end of this form





#### **SECTION D:** Contact information



The information items in this section marked \* will appear on the public register of practitioners. For more information, see Information on the public register in the Information and definitions section of this form.



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.

7.	What	are	your	contact	details?
----	------	-----	------	---------	----------

Provide your current contact details below – place an 🗶 n	ext to your preferred contact phone number.
Business hours	Mobile
After hours  Email	
Litaii	

#### 8. 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 \* 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.

dress (e.g.	123 JAM	ES AVENI	JE; or l	JNIT 1	4, 30	JAM	ES ST	REET)						
													$\overline{}$	
//Suburb/	Town*													
te or terri	tory (e.g. \	VIC, ACT)	/Interr	nation	al pro	vinc	e*	Pos	stcod	e/ZIP*				
		, ,												
	ther than	Australi	٥)											

#### 9. Is the address of your principal place of practice the same as your residential address?



Principal place of practice for a registered health practitioner is:

- the address at which you 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.

n/department (if app	plicable)	
ENUE; or UNIT 1A, 30	JAMES STREET)	
, 51 5111 11 1, 00 1		
		n/department (if applicable)  ENUE; or UNIT 1A, 30 JAMES STREET)

10. What is your mailing address?

Your mailing address is used for postal correspondence.

My principal place of practice

0.1.1	(DO F	1- (	100 14845	O AVENUE	. UNIT 4		O OTDEET		00.4)
Addre	SS/PU E	sox (e.g.	123 JAME	S AVENUE;	or UNIT 1/	A, 30 JAME	S STREET;	or PO BOX 1	234)
City/S	uburb/	Town							
State	or territ	orv (e.a.	VIC. ACT)	Internation	nal provin	ce I	Postcode/2	ZIP	
		(0.9)	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			1			

# **SECTION E:** Qualification for the profession(s)



The information items in this section marked \* will appear on the public register of practitioners. For more information, see *Information on the public register* in the *Information and definitions* section of this form.



In accordance with section 52 of the National Law, to be eligible for general registration you must be qualified for general registration in the health profession. Section 53 of the National Law states that to be qualified you **must** hold either:

- (a) an approved qualification for the health profession, or
- (b) a qualification that the NMBA considers to be substantially equivalent, or based on similar competencies to an approved qualification, or
- (c) a qualification, not referred to in (a) or (b), relevant to the health profession and have successfully completed an examination or other assessment required by the NMBA for the purpose of general registration in the health profession, or
- (d) a qualification, not referred to in (a) or (b), that under the National Law, or a corresponding prior Act, qualified you for general registration in the health profession and you were previously registered on the basis of holding that qualification.

The NMBA's website contains information on approved qualifications accepted under point (a) and examinations or assessments accepted under point (c). More information is available at <a href="https://www.nursingmidwiferyboard.gov.au/Accreditation/Approved-Programs-of-Study">www.nursingmidwiferyboard.gov.au/Accreditation/Approved-Programs-of-Study</a>

If you are applying for registration as a nurse and midwife you are required to provide documentation for both professions.

11. What are the details of your qualifications and examinations/assessments?

Most recent qualification and	examination/assessments						
Title of qualification*			_				
Name of institution (University/TAFE/RTO/College/Examining body)*							
Campus (name of campus/location of campus)							
Country							
Start date	Completion date*	Profession applicable to					
MM/YYYY	MM / Y Y Y Y	Nursing Midwifery					
	You <b>must</b> attach a certified copy of <b>all</b> your academic qualifications and examinations/ assessments mentioned in this form.						

Additional qualification and ex	camination/assessments						
Title of qualification*							
Name of institution (University/TAFE/RTO/College/Examining body)*							
Campus (name of campus/locati	on of campus)						
Campao (namo er campao, recati	on or dampady						
Country							
0	0 11 11 1	5 ( : "					
Start date	Completion date*	Profession appli	cable to				
MM / YYYY	MM/YYYYY	Nursing	Midwifery				
You <b>must</b> attach a	certified copy of all your acad	emic qualification	ns and examinations/				
assessments ment		onno quamoanor	io and oxaminations,				
accessiments ment							



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

# **SECTION F:** Registration history

# 12. What is your health practitioner registration history?



If you have been registered outside of Australia, the NMBA requires a Certificate of Good Standing or Certificate of Registration Status 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/International province	
Period of registration  DD / MW / Y Y Y Y  to	DD/MM/YYYY



If you have been registered outside of Australia, you **must** arrange for original Certificates of Good Standing or Certificates of Registration Status to be forwarded directly from the registration authority to your Ahpra state or territory office. Refer to **www.ahpra.gov.au/About-Ahpra/Contact-Us** for your Ahpra state or territory office address.

Additional registration					
State/Territory/Country/International province					
Period of registration  DDD / MM / Y Y Y Y Y to	DD/MM/YYYY				

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

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## **SECTION G:** Work history

13. Have you previously practised as a registered nurse, enrolled nurse or midwife?



Go to the next question



Go to Section I: Suitability statements

14. What is your full practice history?



It is important that you refer to Curriculum vitae in the Information and definitions section of this form for mandatory requirements of the CV. Your curriculum vitae will further inform the NMBA in relation to your recency of practice and registration history. For more information about your Statement of Service, see Statement of Service in the Information and definitions section of this form.



You **must** attach to your application:

- a Statement of Service from all of your employers from the past five years, and
- a **signed and dated** curriculum vitae that describes your full practice history and any training undertaken.

## **SECTION H:** Registration period



The annual registration period for the nursing and midwifery professions is from 1 June to 31 May each year. If your registration is granted in April or May this year, you will be registered until 31 May next year.

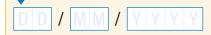
If your registration is granted before April, you will be registered until 31 May this year and you must renew your registration by 31 May.

15. If this application is approved, when would you like your general 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







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 I:** Suitability statements



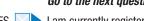
Information required by the NMBA to assess your suitability for registration is detailed in the following questions. It is recommended that you provide as much information as possible to enable the NMBA to reach a timely and informed decision.

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.

16. Do you currently hold registration with the Nursing and Midwifery Board of Australia?



I am currently registered as an EN applying for registration as a RN Go to the next question



YES I am currently registered as a nurse applying for registration as a midwife Go to the next question

I am currently registered as a midwife applying for registration as a nurse Go to the next question

N0 Go to question 19

17. Since your last declaration to Ahpra, has there been any change to your criminal history in Australia that you have not declared to Ahpra?



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.









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

18. Since your last declaration to Ahpra, has there been any change to your criminal history in one or more countries other than Australia that you have not declared to Ahpra?



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



Go to question 22



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 the change in your criminal history in a signed and dated written statement.

#### Provide details below, then go to question 22

Country	Check reference number



You **must** attach a separate sheet if the list of overseas countries and corresponding check reference number does not fit in the space provided.



You **must** attach the international criminal history check (ICHC) reference page provided by the approved vendor.



You **must** attach a signed and dated written statement with details of any change to your criminal history in each of the countries listed and an explanation of the circumstances.

#### 19. 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.











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

#### 20. 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 N0 Go to the next question



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 **must** attach a separate sheet if the list of overseas countries and corresponding check reference number does not fit in the space provided.



You **must** attach the international criminal history check (ICHC) reference page provided by the approved vendor.



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

21. 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.

NO **Go to the next question** 

YES X

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 correference number does not fit in the space provided.	ountries and corresponding check
You <b>must</b> attach the international criminal history check (the approved vendor.	(ICHC) reference page provided by

22. Have you previously been registered to practise as a nurse or midwife 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*.



I declare I have used English as my primary language within the past five years. Go to question 27



Go to the next question

All applicants must demonstrate English language competency via one of the following pathways. The full requirements for each pathway are detailed in the NMBA English language skills registration standard at www.nursingmidwiferyboard.gov.au/Registration-Standards/English-language-skills.



A list of approved recognised countries and help on how to provide the evidence requirements for each pathway is detailed in the evidence requirements guide available at www.ahpra.gov.au/Registration/Registration-Standards/English-language-skills.

#### **Primary language pathway**

English is your primary language and:

- for a registered nurse and/ or midwife, you must provide evidence of having successfully completed at least a two (2) years full-time equivalent preregistration program of study approved by the recognised nursing and/or midwifery regulatory body in a recognised country.
- for an enrolled nurse, you must provide evidence of having successfully completed at least a one year full-time equivalent pre-registration program of study approved by the recognised nursing and/or midwifery regulatory body in a recognised country.

# Extended education pathway (registered nurses and midwives)

You must provide evidence that you have successfully completed at least five (5) years (full-time equivalent) continuous education taught and assessed solely in English, in a recognised country, which includes tertiary qualifications in the relevant professional discipline which you are relying on to support your eligibility for registration under the National Law.

# Extended education pathway (enrolled nurses)

You must provide evidence that you have successfully completed at least five (5) years (full-time equivalent) continuous education taught and assessed solely in English, in a recognised country, which includes vocational qualifications in the relevant professional discipline 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.

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

0	Ahpra may verify the information you provide below. For more information, see <i>English language skills</i> in the <i>Information and definitions</i> section of this form. If a qualification that was relied on for registration is not an approved program of study, you <b>must</b> provide confirmation that the course was taught and assessed solely in English. A list of approved programs of study is available at <b>www.ahpra.gov.au/Accreditation/Approved-Programs-of-Study</b>
	Primary language pathway (this is a declaration that English is your primary language) Provide details of your primary, secondary, vocational and/or tertiary education in the table below, then go to question 27

Extended education pathway (registered nurse and/or midwife)

You must provide details of your secondary, vocational and/or tertiary education (which includes your tertiary qualifications in the relevant professional discipline) in the table below, *then go to question 27* 

Extended education pathway (enrolled nurse)

You must provide details of your secondary, vocational and/or tertiary education (which includes your vocational qualifications in the relevant professional discipline) in the table below, *then go to question 27* 

English language test pathway

You do not need to complete the table below. Go to question 24

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:	Primary				Full time
MMYYYY	Secondary				Part time
Study completed:	Vocational				
MMYYYY	Tertiary				
Study commenced:	Primary				Full time
MMYYYY	Secondary				Part time
Study completed:	Vocational				_
MMYYYY	Tertiary				
Study commenced:	Primary				Full time
MMYYYY	Secondary				Part time
Study completed:	Vocational				
MMYYYY	Tertiary				

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Timeframe	Level of education	Program name If applicable	Education institution Specify name and address	Recognised country  If applicable	Study status
Study commenced:	Primary				Full time
MMYYYY	Secondary				Part time
Study completed:	Vocational				
MMYYYYY	Tertiary				
Study commenced:	Primary				Full time
MMYYYY	Secondary				Part time
Study completed:	Vocational				
MMYYYY	Tertiary				



#### Extended education pathway (registered nurse and/or midwife, or enrolled nurse) applicants

You must attach a certified copy of your transcript(s) confirming that each course you listed above was taught and assessed solely in English.

#### **All applicants**

- 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. A list of
  approved programs of study is available at www.ahpra.gov.au/Accreditation/Approved-Programs-of-Study
- 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.
- Please attach a separate sheet with any additional details that do not fit in the space provided above.

24.	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 12 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		

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

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

P	rovide reference number(s) for th	ne test(s) you are relying on and attach	a copy of your test results.	
$\left[ \times \right]$	Cambridge (C1 Advanced or C2 Verification number – sitting one:	Proficiency)	Verification number – sitting two (if applicable):	
	The NMBA requires Cambridge wit in the writing component.	th a minimum overall score of 185 in the l	istening, reading, and speaking components, and a minimum score of 176	
X		Test System (IELTS) Academic module	Test was set forms number of thing have (if applicable).	
	Test report form number – sitting (	one:	Test report form number – sitting two (if applicable):	
		demic module) with a minimum overall sc	core of 7 and a minimum score of 7 in the listening, reading, and speaking	
	components, and a minimum score Occupational English Test (OET)	•		
	Candidate number – sitting one:		Candidate number – sitting two (if applicable):	
	The NMBA requires the OET with a component.	minimum score of B in the listening, reac	ding, and speaking components, and a minimum score of C+ in the writing	
X	Pearson Test of English Academ Registration ID – sitting one:	ic (PTE Academic)	Registration ID – sitting two (if applicable):	
	The NMRA requires requires the P	TE Academic with a minimum overall scor	re of 66 and a minimum score of 66 in the listening, reading, and speaking	
	communicative skills, and a minim	num of 56 in the writing communicative sk		
X	<b>Test of English as a Foreign Lang</b> Registration number – sitting one:	guage internet-based test (TOEFL iBT)	Registration number – sitting two (if applicable):	
	The NMBA requires the TOEFL iBT for speaking.	with a minimum total score of 94 and the	e minimum scores of 24 for listening, 24 for reading, 24 for writing, and 23	
Q			t two years, you <b>must</b> provide a copy of your test results, including	
		so that Ahpra can verify your results. test(s) were not completed within the	past two years, you <b>must</b> provide a certified copy of your results.	
a	Vere your results from the bove-mentioned English anguage tests obtained in	YES In order for your results to be acce	NO period, within 12 months of completing your test(s) you must have commenced:	
	he past two years?	<ul> <li>continuous employment as a recare related role where English</li> <li>continuous enrolment in an app</li> </ul>	gistered health practitioner or in another relevant health, disability, or aged was the primary language of practice in a recognised country, <b>and/or</b>	
		<u> </u>		
		your CV and a letter fit confirming continuous relevant health, disab	ied copy of your English language test results, <b>and</b> : rom employer(s) or a professional referee in the required form s employment as a registered health practitioner or in another ility, or aged care related role in a recognised country (if you are employment over two years in duration, only two years is required),	
		approved program of	pt evidencing that you were enrolled continuously in an NMBA- study that commenced within 12 months of sitting the English at you completed your study no longer than 12 months before lodging	
	o you commit to having ppropriate professional	For more information, see <i>Profess</i>	ional indemnity insurance in the Information and definitions section of this form.	
iı a a	ppropriate professional ndemnity insurance (PII) rrangements in place for II practice undertaken during he registration period?	YES 🔀	NO You must not practise the profession unless you are covered by appropriate PII arrangements in accordance with the requirements of the NMBA.	
	lid you graduate more than 2 months ago?	YES <b>Go to the next question</b>	NO Go to question 30	

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29. Which of the following have you completed?

#### Choose appropriate option

Practised the profession while registered in the past five years for a period equivalent to a minimum of 450 hours

Successfully completed a program of study approved by the NMBA

Successfully completed a period of supervised practice approved by the NMBA

None of the above

30. Will you be performing exposure-prone procedures in your practice?



**Exposure prone procedures (EPPs)** are procedures where there is a risk of injury to the healthcare worker resulting in exposure of the patient's open tissues to the blood of the healthcare worker. These procedures include those where the healthcare worker's hands (whether gloved or not) may be in contact with sharp instruments, needle tips or sharp tissues (spicules of bone or teeth) inside a patient's open body cavity, wound or confined anatomical space where the hands or fingertips may not be completely visible at all times. For example a midwife repairing an episiotomy or a perioperative nurse surgical assistant involved in open surgical procedures that meet the above criteria.

The CDNA has developed guidance on exposure-prone procedures in Guidance on classification of exposure prone and non-exposure prone procedures in Australia 2017 available online at

https://www.health.gov.au/resources/collections/cdna-national-guidelines-for-healthcare-workers-onmanaging-bloodborne-viruses?language=en

You can seek additional information about whether you perform exposure-prone procedures from your relevant organisation in *Appendix 2* of the national guidelines.

YES



Go to the next question



Go to question 32

31. Do you commit to comply with the Australian National Guidelines for the management of healthcare workers living with blood borne viruses and healthcare workers who perform exposure prone procedures at risk of exposure to blood borne viruses?



This includes testing for HIV, Hepatitis C and Hepatitis B at least once every three years. Testing for Hepatitis B is not necessary if you have demonstrated immunity to HBV through vaccination or resolved infection.







32. 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.









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

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









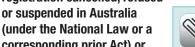
You **must** attach to this application details of any registration suspension or cancellation.

34. Have you previously had your registration cancelled, refused or suspended in Australia (under the National Law or a corresponding prior Act) or overseas?











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

35. 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.

AGEN-40	
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36. 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).

YES

NO



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

37. 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?



NO



YES Provide details below

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

NO **Go to the next question** 

- 38. Do you hold, or have you previously held, registration in Australia as an enrolled nurse, a registered nurse or a midwife with either:
  - the Nursing and Midwifery **Board of Australia (from** 1 July 2010, or 18 October 2010 in WA), or
  - a previous Australian state or territory nursing or midwifery board (prior to 1 July 2010, or 18 October 2010 in WA)?

<b>V</b>					
Provide details required below – then go to Section J: Obligations and consent					
Select board(s) NMBA	Australian state/territory board Both				
Enrolled nurse					
NMBA registration information  Currently registered  Previously registered  Registration number  N M W	Aust. state/territory board registration information State/territory of registration VIC NSW QLD SA WA NT TAS ACT Start date Lapse date				
Registered nurse					
NMBA registration information  Currently registered  Previously registered  Registration number  N M W	Aust. state/territory board registration information  State/territory of registration  VIC NSW QLD SA  WA NT TAS ACT  Start date  Lapse date				
Midwife					
NMBA registration information  Currently registered  Previously registered  Registration number  N M W	Aust. state/territory board registration information  State/territory of registration  VIC NSW QLD SA  WA NT TAS ACT  Start date Lapse date				
	urse or midwife in Australia, to be considered as				

continuing to meet the *English language skills registration standard* you **must** attach evidence that you have maintained continuous professional practice in an English speaking environment and/or residence in one of the recognised countries listed in question 20.

# **SECTION J:** Obligations and consent



**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.
- 3. 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
  - 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
  - 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*
    - (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.
  - h) 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 authorise Ahpra and the Board to carry out a nationally coordinated criminal history check for the purpose of assessing this application. I acknowledge 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 Ahpra and the Board.
- my personal information will be extracted from this form and 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 to allow for any subsequent criminal history checks during my period of registration
- if and when this application for registration is granted, Ahpra may
  check my criminal history at any time during my period of registration
  as required by the Board for the purpose of assessing my suitability to
  hold health practitioner registration; or in response to a Notice of Certain
  Events; or an application for Removal of Reprimand from the National
  Register.
- I may dispute the result of the nationally coordinated criminal history check by contacting Ahpra in the first instance.

#### Consent

If I provide the Board details of an English language test I have completed, I authorise the Board 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 Board 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 acknowledge that:

- the Board may validate documents provided in support of this application as evidence of my identity
- failure to complete all relevant sections of this application 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 and registration (if granted) will be sent electronically to me via my nominated email address, and
- 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.

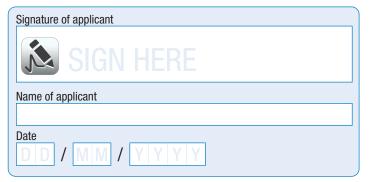
I undertake to comply with all relevant legislation and Board registration standards, codes and guidelines.

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 this application and in the documents provided. I make this declaration in the knowledge that a false statement is grounds for the Board to refuse registration.



# **SECTION K:** Payment

#### Your required payment is detailed below.

See the table below for details of the application fee and registration fee. Your registration fee depends on your existing registration status with the NMBA.

# **Application fee:**

\$332

Registration fee:

\$ INSERT FEE

Registration fee for applicants with current registration as a nurse and/ or midwife

Registration fee \$193

Registration fee for NSW registrants \$189





#### **Registration period**

The annual registration period for the nursing and midwifery professions is from 1 June to 31 May. If your application is made between 1 April and 31 May this year, you will be registered until 31 May next year.

#### Refund rules

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

+

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

Amount payable	Name on card
\$	
<u> </u>	Cardholder's signature
or Mastercard number	out at 10 and 10
	SIGN HERE
Expiry date CW	JE SIGN FIERE
MM/YY	



# **SECTION L:** Checklist

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

Additional dod	cumentation	Attached
Question 2	Evidence of a change of name	$\times$
Question 4	Certified copies of all proof of identity documents	$\times$
Question 6	Certified copies of all proof of identity documents	$\times$
Question 11	ction 11 Certified copies of all of your academic qualifications and examinations/assessments mentioned within this form	
Question 11	A separate sheet with additional qualification details	
Question 12	estion 12 Certificate of Registration Status or Certificate of Good Standing has been requested from relevant authority	
Question 12	tion 12 A separate sheet with additional registration details	
Question 14	estion 14 A Statement of Service from your employer(s) covering the past five years	
Question 14	A signed and dated curriculum vitae that describes your full practice history and any training undertaken	
Questions 17 & 19	A signed and dated written statement with details of any change to your criminal history in Australia and an explanation of the circumstances	
Questions 18 & 19	A separate sheet of additional overseas countries with criminal history and corresponding ICHC reference number	
Questions 18 & 20	A signed and dated written statement with details of your criminal history in each of the countries listed and an explanation of the circumstances	$\times$
Questions 18, 20 & 21	ICHC reference page provided by the approved vendor	$\times$
Question 21	A separate sheet of additional overseas countries lived in and corresponding ICHC reference number	$\times$
Question 23	A separate sheet with any additional qualification details	$\times$
Question 23	Transcript(s)/letter(s) from education provider confirming that your course was taught and assessed solely in English	$\times$
Question 25	Copy of your English language test results	$\times$
Question 26	Certified copy of your English language test results	$\times$
Question 26	<b>Lestion 26</b> Evidence of continuous employment as a registered health practitioner or in a relevant health, disability, or aged care related role where English was the primary language of practice and/or continuous enrolment in an approved program of study	
Question 32	A separate sheet with your impairment details	$\times$
Question 33	A separate sheet with your current suspension or cancellation details	$\times$
Question 34	A separate sheet with your cancellation, refusal or suspension details	$\times$
Question 35	A separate sheet with your previous conditions, undertakings or limitation details in Australia or overseas	$\times$
Question 36	A separate sheet with your disqualification details	$\times$
Question 37	A separate sheet with your conduct, performance or health proceedings in Australia or overseas	$\times$
Question 38	Evidence that you have maintained continuous professional practice in an English speaking environment and/or residence	$\times$
Payment		
	Application fee	$\times$
	Registration fee	$\times$

# 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

# AUSTRALIAN NATIONAL GUIDELINES FOR THE MANAGEMENT OF HEALTHCARE WORKERS LIVING WITH BLOOD BORNE VIRUSES AND HEALTHCARE WORKERS WHO PERFORM EXPOSURE PRONE PROCEDURES AT RISK OF EXPOSURE TO BLOOD BORNE VIRUSES

The Communicable Diseases Network Australia (CDNA) has published these guidelines. The following is a summary of the requirements in the CDNA guidelines:

Healthcare workers who perform exposure prone procedures (EPPs) must take reasonable steps to know their blood-borne virus (BBV) status and should be tested for BBVs at least once every three years. They are also expected to:

- have appropriate and timely testing and follow up care after a potential occupational exposure associated with a risk of BBV acquisition
- have appropriate testing and follow up care after potential nonoccupational exposure, with testing frequency related to risk factors for virus acquisition
- cease performing all EPPs if diagnosed with a BBV until the criteria in the guidelines are met, and
- confirm that they comply with these guidelines when applying for renewal of registration if requested by their board.

Practitioners who are living with a blood-borne virus and who perform exposure-prone procedures have additional requirements. They are expected to:

- be under the ongoing care of a treating doctor with relevant expertise
- comply with prescribed treatment
- · have ongoing viral load monitoring at the appointed times
- not perform EPPs if particular viral load or viral clearance criteria are not met (see detailed information in the guidelines according to the specific BBV)
- seek advice regarding any change in health condition that may affect their fitness to practise or impair their health
- · release monitoring information to the treating doctor
- if required, release de-identified information to the relevant area of the jurisdictional health department/Expert Advisory Committee, and
- if required, release health monitoring information to a designated person in their workplace in the event of a potential exposure incident to assess the requirement for further public health action.

Additional information can be found in the CDNA Australian National Guidelines for the Management of Healthcare Workers Living with Blood Borne Viruses and Healthcare Workers Who Perform Exposure Prone Procedures at Risk of Exposure to Blood Borne Viruses available online at https://www.health.gov.au/resources/collections/cdna-national-guidelines-for-healthcare-workers-on-managing-bloodborne-viruses?language=en

#### **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 if any of the documentation that 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.

#### **CONTINUING PROFESSIONAL DEVELOPMENT (CPD)**

CPD is a requirement of registration even if you are not working or are working overseas. You must complete at least 20 hours of CPD per profession each year. This must be relevant to your context of practice. If you were granted registration less than 12 months ago, your CPD requirements will be based on how many months you have been registered:

- 0–3 months, at least 5 hours
- 3–6 months, at least 10 hours
- 6–9 months, at least 15 hours or
- more than 9 months, at least 20 hours.

You must keep evidence of your participation. For more information, view the registration standard online at www.nursingmidwiferyboard.gov.au/Registration-Standards and the guidelines at

www.nursingmidwiferyboard.gov.au/Codes-Guidelines-Statements/Codes-Guidelines

#### **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 since you last registered with the NMBA as detailed above, irrespective of the time that has lapsed since the charge was laid or the finding of guilt was made. The NMBA 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.

But if you have not given us certified proof of identity documents since October 2019, you will need to do this first. Any documents containing a photograph must be annotated with the statement '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.'

You may be required to obtain international criminal history reports. For more information, view the registration standard online at www.nursingmidwiferyboard.gov.au/Registration-Standards and the requirements for supplying proof of identity and certified documents at www.ahpra.gov.au/Registration/Applying-for-registration/Proof-of-Identity and www.ahpra.gov.au/certify.aspx

#### **CURRICULUM VITAE**

Your curriculum vitae must:

- detail any gaps in your practice history of more than three months from the date you obtained your qualification
- be in chronological order
- be signed and dated with a statement 'This curriculum vitae is true and correct as at (insert date)', and
- be the signed original curriculum vitae (no faxes or scanned copies will be accepted).

It must also contain all the elements defined in Ahpra's standard format for curriculum vitae which can be found at www.ahpra.gov.au/cv

#### **ENGLISH LANGUAGE SKILLS**

To be eligible for registration, you **must** be able to provide evidence of English language skills that meet the NMBA's *English language skills registration standard*, which can be found at **www.nursingmidwiferyboard.gov.au/ Registration-Standards** 

#### INFORMATION ON THE PUBLIC REGISTER

Information in this form marked with an asterix (\*) indicates the information that will be displayed on the online public register of practitioners.

If you believe that publishing information about you on the public register would pose a serious risk to your health or safety as a practitioner, please complete an *Application to exclude information from the public register* – *AEPR-00* available at www.nursingmidwiferyboard.gov.au/Registrationand-Endorsement/Forms

#### **IMPAIRMENT**

The National Law defines impairment as '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'.

But an illness or health condition that is safely managed is not the same as impairment, as these do not have a detrimental impact on your capacity to practise. Examples of what you do not need to declare include:

- wearing prescription glasses to correct your vision or hearing aids to correct your hearing, or
- seeing a psychologist for anxiety and following a treatment plan.

#### **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 cannot practise the profession in Australia without PII. You must maintain it through your own private cover, your Australian employer or another third party, and ensure you understand it.

But you are not required to hold PII if you are unemployed or working overseas.

Remember, practising means using your skills and knowledge as a health practitioner in any paid or unpaid role in your profession.

For more information, view the registration standard online at www.nursingmidwiferyboard.gov.au/Registration-Standards

#### **RECENCY OF PRACTICE**

You must maintain an adequate connection with your profession and regularly practise it after you qualify for or receive your registration. For nurses and midwives this means you have practised for at least 450 hours over the last 5 years. The NMBA's recency of practice requirements also apply to an endorsement for scheduled medicines or as a nurse practitioner.

If you are unable to meet the recency of practice requirements the NMBA requires you to submit evidence to support your re-entry to practice. Re-entry to practice may require you to complete specific education and/or supervised practice.

For more information, view the registration standard online at www.nursingmidwiferyboard.gov.au/Registration-Standards and the re-entry to practice policy at www.nursingmidwiferyboard.gov.au/Registration-and-Endorsement/reentry-to-practice

#### 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.

#### STATEMENT OF SERVICE

The Statement of Service is required to:

- be on the employer's letterhead
- provide dates of employment
- describe the role in which you were employed, and whether if was full-time/part-time hours, and
- be signed by a manager (e.g. director of nursing, unit manager or HR manager).

# Applications **Proof of identity**

Before continuing, please refer to the Proof of identity requirements available at www.ahpra.gov.au/identity.

ı.	.     Do you have an Australian residential address?				
	Yes – You will be asked to complete your identity verification through Ahpra's third party vendor, InstaID+. For further information, please refer to the <i>Proof of identity requirements</i> available at www.ahpra.gov.au/identity				
	No – Go to the next question				
2.	. Do you hold a current Australian or overseas passport?				
Yes - Select one option					
	I have an Australian passport – Go to question 3				
	I have an overseas passport – Go to question 4				
	No - You cannot proceed with this application. We must be able to verify your identity, we cannot verify your identity without a current passport.				
3.	<ul> <li>Can you provide the following proof of identity documents:</li> <li>one 'commencement of identity' document (e.g. Australian passport, Australian birth certificate)</li> <li>one 'primary use in the community' document (e.g. Australian drivers licence, Overseas Passport)</li> <li>two 'secondary use in the community' documents (e.g. Medicare card, Australian institution Tertiary Student Photo II Foreign government issued document)</li> </ul>				
	Yes - Thank you, no further questions. You will be asked to complete your identity verification through Ahpra's third party vendor, InstalD+. For further information, please refer to the <i>Proof of identity requirements</i> available at www.ahpra.gov.au/identity.				
	No – Go to the next question				
1.	<ul> <li>For Ahpra to verify your identity, can you provide two (2) of the following documents:</li> <li>a current Australian visa</li> <li>a current foreign driver's licence</li> <li>foreign birth certificate</li> <li>foreign identity card</li> <li>credit or debit card</li> <li>Yes - You will be asked to complete your identity verification through Ahpra's third party vendor, InstaID+. For further information,</li> </ul>				
	please refer to the <i>Proof of identity requirements</i> available at www.ahpra.gov.au/identity  No -				
	You cannot proceed with this application. We must be able to verify your identity, we cannot verify your identity.				

#### **Identity verification**

You are required to verify your identity.

To complete your identity check, once your application is received by Ahpra, you will be sent a link with instructions. The link will take you to our third party vendor InstalD+ website.

- You will be asked to take a selfie photo of your face with your photo ID and take photos of your identity documents. This will include any change of name evidence if you have changed your name
- You can do your identity check from your desktop (with a web camera) or mobile phone.
- Your documents are checked in real-time for authenticity and tampering. Facial recognition and liveness test are completed, and your identity details are checked against issuing authority databases for validity.
- If required, InstalD+ Customer Support may contact you directly if there is any follow up required about your identity check.

You must lodge your identity verification within 30 days to avoid your application being discontinued. If your application is discontinued, a refund of all fees will be provided.

If you have any questions, or require assistance with the identify verification, please contact InstaID+ on 1800 080 095.

Please refer to the Proof of identity requirements available at <a href="https://www.ahpra.gov.au/identity">www.ahpra.gov.au/identity</a>

An incomplete identity verification may delay processing and could result in your application for registration being withdrawn.