



# Financial hardship for payment of registration fees

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



**You must submit this form and receive the outcome before you submit your application for registration or renewal.** Refer to your Board's website for cut-off dates for processing [www.ahpra.gov.au](http://www.ahpra.gov.au).

This form is for individuals who:

- have not yet submitted either an application for registration or renewal of your registration, and
- are applying for consideration of financial hardship to assist in meeting the cost of the associated registration fee or prioritisation of application assessment.

The financial hardship policy is **not** available to those:

- applying or transitioning to non-practising registration
- recent graduates applying for registration in the Chinese Medicine, Medical, Nursing or Midwifery professions.

### Eligibility criteria

To be eligible you must be experiencing financial hardship as defined in this form, and complete this form and return to Ahpra prior to the cut-off date.

**If you have already submitted your application, then you are not eligible to use this form.**



**†Financial hardship** in the context of the National Scheme means you are unable to provide the following for yourself, your family, or other dependents:

- food
- accommodation
- clothing
- medical treatment
- education, and/or
- other basic necessities.

This can be as a result of an unexpected event or unforeseen changes outside your control.

### 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](http://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](http://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.



#### Signature required

Requests appropriate parties to sign the form where indicated.

### Completing this form

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

## SECTION A: Personal details



**The information in this section (marked \* in this section) must match the information you intend to use for your application for registration or in our system if you already hold registration.**

1. What is your name and date of birth?

Title\* MR  MRS  MISS  MS  DR  OTHER

Family name\*

First given name\*

Middle name(s)\*

Date of birth  /  /



2. What are your contact details?

**Preferred contact number\***

**Email\***

**SECTION B: Application criteria**

3. Select the health professions relevant to your application.

**i** Professions marked with an asterisk (\*) do not have the financial hardship option for new graduate applicants as they already have a reduced fee in place.

**Select all applicable options**

<input type="checkbox"/> Aboriginal Torres Strait Islander Health Practice	<input type="checkbox"/> Medical*	<input type="checkbox"/> Paramedicine
<input type="checkbox"/> Chinese Medicine*	<input type="checkbox"/> Midwifery*	<input type="checkbox"/> Pharmacy
<input type="checkbox"/> Chiropractic	<input type="checkbox"/> Nursing*	<input type="checkbox"/> Physiotherapy
<input type="checkbox"/> Dental	<input type="checkbox"/> Occupational Therapy	<input type="checkbox"/> Podiatry
<input type="checkbox"/> Medical Radiation Practice	<input type="checkbox"/> Optometry	<input type="checkbox"/> Psychology
	<input type="checkbox"/> Osteopathy	

4. Select the type of registration you will be applying for or renewing:

**i** Non-practising registration is not available.

**Mark all options applicable to your application**

<input type="checkbox"/> General	<input type="checkbox"/> Provisional
<input type="checkbox"/> Limited	<input type="checkbox"/> Specialist

5. What type of application will you be submitting?

**Mark all options applicable to your application**

- Registration in a profession – **Go to section C1**
- Renewing registration in a profession – **Go to Section C2**
- Transitioning to a new registration type (i.e Provisional to General) – **Go to section C2**

**SECTION C: Financial hardship self-assessment**

**SECTION C1: Registration in a profession**

**i** Ahpra and the relevant National Boards recognise that some recent graduates or those who are returning to their profession as a practitioner, may be experiencing hardship.  
 This section helps you self-assess if you are experiencing genuine financial hardship. We prefer and encourage applicants to explore alternate funding sources for the registration fee before applying for consideration of financial hardship.

6. As a result of unplanned events or unforeseen changes beyond your control, have you been unable to reasonably provide necessities such as food, accommodation, clothing, education and/or medical treatment for you, your family, or other dependents?

YES

**Provide more detail in the text box below so we can understand your circumstances. It only needs to be brief. You do not need to provide us with any other information, but we may ask you for this to help us assess your application.**

NO

**STOP** This application is only for people experiencing financial hardship as defined in this form.


7. If your application for consideration of financial hardship is approved, what outcome are you looking for?

**Select one**

- Reduction of the registration fee
- Pay the full registration fee and have my application prioritised for assessment once submitted



## SECTION C2: Renewing registration or transitioning to a new registration type


 Ahpra and the relevant National Boards recognise that some practitioners, may be experiencing hardship. This section helps you self-assess if you are experiencing genuine financial hardship. We prefer and encourage applicants to explore alternate funding sources for the registration fee before applying for consideration of financial hardship.

**8. As a result of unplanned events or unforeseen changes beyond your control, have you been unable to reasonably provide necessities such as food, accommodation, clothing, education and/or medical treatment for you, your family, or other dependents?**

YES

**Provide more detail in the text box below so we can understand your circumstances. It only needs to be brief. You do not need to provide us with any other information, but we may ask you for this to help us assess your application.**

NO

 **This application is only for people experiencing financial hardship as defined in this form.**


**9. If approved, please select the outcome you wish to receive.**

**You can only select one option as an outcome**

Payment of the registration fee in two instalments

Pay the full registration fee and have application prioritised for assessment once submitted

## SECTION D: Acknowledgement

 **Before you move to the next section,** make sure that you have answered all of the relevant questions correctly and read the statements below. An incomplete form may delay processing and could result in your application for financial hardship not being decided prior to the cut-off timeframe.

I acknowledge that I:

- have read the contents of this form
- have completed the *Financial hardship self-assessment* section of this form
- have selected which option I would like if this application is approved
- have not submitted an application for registration or renewal for the relevant profession
- understand failure to complete all relevant sections of this application and to enclose all supporting documentation may result in this application not being accepted, and
- understand 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 confirm that I have 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 attached documents provided.

I understand that if my application for financial hardship is approved that **(select one):**

- to pay the registration fee in two instalments, that I will be required to pay the second instalment within the due time frame, **OR**
- to have my application prioritised for assessment, that this only applies if my application needs further assessment by Ahpra and the timing of a decision on an application is subject to the assessment of my application.

Signature of applicant


SIGN HERE

Name of applicant

Date

DD

/

MM

/

YYYY

## SECTION E: Checklist

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

<i>Additional documentation</i>	Attached
A signed and dated Statutory declaration	<input type="checkbox"/>

**Once completed, submit this form via Ahpra's *Online upload* page at [www.ahpra.gov.au/registration/online-upload](http://www.ahpra.gov.au/registration/online-upload).**  
 You must submit this form and receive the outcome before you submit your renewal or application for registration.

## Statutory declaration – New South Wales

**Please read and make sure you understand these statements before completing this form.**

- A statutory declaration is a statement of facts that you declare to be true. It must be in the form, and before a witness, prescribed by the relevant local law of each State or Territory.
- This section contains statutory declarations in the forms prescribed by the relevant local laws of each State and Territory.
- Annexure B to this form contains a non-exhaustive list of person authorised to witness a statutory declarations by the relevant local laws of each State and Territory.
- Statutory declarations that are not properly completed will be invalid and may affect Ahpra’s ability to process your application for consideration of financial hardship.
- A person who intentionally makes a false statement in a statutory declaration is guilty of an offence, the punishment for which may include imprisonment.

You’re considered to be in financial hardship when unable to provide the following for yourself, your family, or other dependents:

- food
- clothing
- education, and/or
- accommodation
- medical treatment
- other basic necessities.

This can be as a result of an unexpected event or unforeseen changes outside your control.

I, , a   
 of  do hereby solemnly

declare and affirm that:

- I am experiencing genuine financial hardship.
- And I make this solemn declaration, as to the matter (or matters) aforesaid, according to the law in this behalf made – and subject to the punishment by law provided for any wilfully false statement in any such declaration.

**Signature of person making declaration**

 SIGN HERE

Declared at  in the State of New  
 South Wales on this  day of .

in the presence of an authorised witness, who states:

I, , a

certify the following matters concerning the making of this statutory declaration by the person who made it (***\*please cross out any text that does not apply***):

- \*I saw the face of the person, OR  
 \*I did not see the face of the person because the person was wearing a face covering, but I am satisfied that the person had a special justification<sup>1</sup> for not removing the covering, and
- \*I have known the person for at least 12 months, OR  
 \*I have confirmed the person’s identity using an identification document and the document I relied on was

**Signature of authorised witness**

Date signed

 SIGN HERE

Full name of authorised witness

Qualification to be authorised witness

Address of authorised witness

**Tick only if applies**

- This statutory declaration was made in electronic form and was witnessed by audio visual link in accordance with section 14G of the *Electronic Transactions Act 2000 (NSW)*.

## ANNEXURE B: List of authorised witnesses by State and Territory (as at 5 May 2021)

**Disclaimer:** This list contains an indicative list of authorised witnesses before whom a statutory declaration may be made in each State and Territory. It is not an exhaustive list of authorised witnesses and is not to be taken as legal advice. It is your responsibility to check and ensure that your statutory declaration is signed before an authorised witness and in accordance with all requirements of the relevant local law (including electronic witness requirements, if applicable) as varied from time to time. Statutory declarations that are not properly witnessed will be invalid.

### ACT

*Statutory Declarations Act 1959 (Cth)*

#### A person who is licenced or registered in these occupations

- Architect
- Chiropractor
- Dentist
- Financial adviser or financial planner
- Legal practitioner, with or without a practicing certificate
- Medical practitioner
- Midwife
- Migration agent registered under division 3 of part 3 of the *Migration Act 1958*
- Nurse
- Occupational therapist
- Optometrist
- Patent attorney
- Pharmacist
- Physiotherapist
- Psychologist
- Trade marks attorney
- Veterinary surgeon

#### A person who is on this list

- Accountant who is:
  - a. a fellow of the National Tax Accountants' Association, or
  - b. a member of:
    - i. Chartered Accountants Australia and New Zealand
    - ii. the Association of Taxation and Management Accountants
    - iii. CPA Australia
    - iv. the Institute of Public Accountants
- Agent of the Australia Post who is in charge of an office that provides postal services to the public
- Permanent employee of the Australian Postal Corporation with 5 or more years of continuous service who is employed in an office supplying postal services to the public
- APS employee engaged on an ongoing basis with 5 or more years of continuous service who is not specified in another item of this Part
- Australian Consular Officer or Australian Diplomatic Officer under Consular Fees Act 1955
- Bailiff
- Bank officer with 5 or more years of continuous service
- Building society officer with 5 or more years of continuous service
- Chief executive officer of a Commonwealth court
- Clerk of a court
- Commissioner for Affidavits
- Commissioner for Declarations
- Credit union officer with 5 or more years of continuous service
- Permanent employee of a Commonwealth authority- external site with 5 or more years of continuous service who is not specified in another item in this Part
- Engineer who is:
  - a. a member of Engineers Australia but not a student
  - b. a Registered Professional Engineer of Professionals Australia
  - c. registered as an engineer under a law of the Commonwealth, a state or territory, or
  - d. registered on the National Engineering Register by Engineers Australia
- Finance company officer with 5 or more years of continuous service
- Holder of a statutory office not specified in another item in this list
- Judge
- Justice of the Peace
- Magistrate
- Marriage celebrant registered under the *Marriage Act 1961*
- Master of a court
- Member of the Australian Defence Force who is:
  - a. an officer, or
  - b. a non-commissioned officer within the meaning of the *Defence Force Discipline Act 1982* with 5 or more years of continuous service, or
  - c. a warrant officer within the meaning of that Act
- Member of the Australasian Institute of Mining and Metallurgy
- Member of the Governance Institute of Australia Ltd
- Member of:
  - a. the parliament of the Commonwealth
  - b. the parliament of a state

- a. a territory legislature
  - d. a local government authority
- Minister of religion registered under the *Marriage Act 1961*
  - Notary public, including a notary public (however described) exercising functions at a place outside:
    - a. the Commonwealth, and
    - b. the external territories of the Commonwealth
  - Permanent employee of a state or territory, or a state or territory authority, with 5 or more years of continuous service, other than such an employee who is specified in another item of this Part
  - Permanent employee of a local government authority with 5 or more years of continuous service, other than such an employee who is specified in another item of this Part
  - Person before whom a statutory declaration may be made under the law of the state or territory in which the declaration is made
  - Police officer
  - Prison officer employed by the Commonwealth or a state, territory or local government authority with more than 5 years of continuous service
  - Registrar, or deputy registrar, of a court
  - Senior executive employee of a Commonwealth authority
  - Senior executive employee of a state or territory
  - SES employee of the Commonwealth
  - Sheriff
  - Sheriff's officer
  - Teacher employed full-time or part-time at a school or tertiary education institution

### QLD

*Oaths Act 1867*

- An authorised witness under the Statutory Declarations Act 1959 (See ACT above)
- A 'special witness':
  - a. Commissioner of Declarations
  - b. Justice of Peace
  - c. Legal practitioner
  - d. Notary public

#### Note

1. A statutory declaration made before an authorised witness under the *Statutory Declarations Act 1959* must be signed on paper and cannot be signed electronically
2. A statutory declaration made before a 'special witness' can be signed electronically in accordance with the *Justice Legislation (COVID-19 Emergency Response—Documents and Oaths) Regulation 2020*
3. When making the statutory declaration the authorised witness must ask the declarant aloud: "Do you solemnly and sincerely declare that the contents of this declaration are true and correct to the best of your knowledge and belief?" The declarant must answer: "Yes" or "I do"

### NSW

*Oaths Act 1900*

An authorised witness under the *Statutory Declarations Act 1959* (See ACT above)

#### Note:

1. For a list of other authorised witnesses, see sections 21 and 27 of the *Oaths Act 1900*
2. When making the statutory declaration the authorised witness must ask the declarant aloud: "Do you solemnly and sincerely declare the contents of this declaration to be true and correct, to the best of your knowledge and belief?" The declarant must answer: "Yes" or "I do"

### VIC

*Oaths and Affirmations Act 2018*

An authorised witness under the *Statutory Declarations Act 1959* (See ACT above)

#### Note:

1. For a list of other authorised witnesses, see section 19(1) and 30(2) of the *Oaths and Affirmations Act 2018*
2. When making the statutory declaration the declarant must say in front of the authorised witness the following: *I, [full name of person making declaration] of [address], declare that the contents of this statutory declaration are true and correct*

## WA

*Oaths Affidavits and Statutory Declarations Act 2005*

An authorised witness under the *Statutory Declarations Act 1959* (See ACT above)

**Note:**

1. For a list of other authorised witnesses, see Schedule 2 of the *Oaths Affidavits and Statutory Declarations Act 2005*.
2. When making the statutory declaration the declarant must ask the declarant to declare orally:
  - a. that he or she is the person who made the declaration,
  - b. that the contents of the declaration are true,
  - c. that the signature is his or hers, and
  - d. if necessary, that any attachment to the declaration is the attachment referred to in it

## SA

*Oaths Act 1936*

- Justice of the Peace
- Commissioner for Taking Affidavits (any lawyer admitted to the Supreme Court)
- Notary Public
- People listed in Schedule 1 of the COVID-19 Emergency Response (Section 16) at [www.agd.sa.gov.au/sites/default/files/section-16-regs.pdf](http://www.agd.sa.gov.au/sites/default/files/section-16-regs.pdf)

**Note:**

1. When making the statutory declaration the authorised witness must ask the declarant aloud: *“Do you make this solemn declaration by virtue of the Oaths Act 1936 and do you solemnly and sincerely declare that which is contained in this declaration, conscientiously believing the same to be true?”*. The declarant must answer: *“Yes”* or *“I do”*
2. Electronic witnessing not permitted for statutory declarations

## TAS

*Oaths Act 2001*

An authorised witness under the *Statutory Declarations Act 1959* (See ACT above)

**Note:** Electronic witnessing not permitted for statutory declarations

## NT

*Oaths, Affidavits and Declarations Act*

Any person who is at least 18 (eighteen) years of age.

**Note:** Electronic witnessing not permitted for statutory declarations