



Application Form for a Health Professional to practice in Western Australia

Step 1: Complete this application form

Last Name:	
First Name:	
Date of Birth:	
Residential Address:	
Phone Number:	
Email Address:	

<i>What is your occupation?</i>
<i>What country are you currently registered to practice in?</i>
<i>What is your registration number?</i>
<i>When will you be arriving in Western Australia?</i>
<i>When will you be leaving Western Australia?</i>
<i>What dates are you applying to practice in Western Australia?</i> Note: Approval through this application process can only be for the specified dates in the Special Exemption Order (SEO) i.e. <u>2 November 2011 to 20 December 2011</u>. An additional process will need to be undertaken if a Health Professional wishes to practice outside of the specified time period in the SEO or is in another health professional group not listed.
<i>What will your practice involve? (What are your applying to do?)</i>
<i>Please list the name and title of the person or people you will be providing health care to?</i>
<i>Which team will you be member of?</i>



Step 2:

Attach a copy of the following documents to a paper copy of the application form:

- a current copy of your Curriculum Vitae;
- a certified copy of your credentials (certificate/s of qualification);
- a certified copy of your current registration from your home registration board; and
- the completed 'Visiting Health Professional Application for Special Events Exemption' Statutory Declaration.

By post to:

Special Events Exemption Officer
Disaster Preparedness and Management Unit,
Department of Health
189 Royal Street,
EAST PERTH WA 6004
AUSTRALIA

Please note the Health Department may request additional information from the applicant to assist with the registration process.