



Nutritionist Registration APPLICATION FORM

Please write (in block capitals or print) below your contact details that you wish the Society to use on the Register:

Title..... First name.....Surname.....

Address.....

State/Country Postcode.....

Telephone Number: Fax Number:

Email address:Qualifications:.....

Place of employment:.....

Area of specialty:.....

Please tick the Registration Category you wish to apply for:

- Associate Nutritionist (*ANutr.*)
- Registered Nutritionist (*RNutr.*)
- Registered Public Health Nutritionist (*RPHNutr.*)
- Registered Animal Nutritionist (*RAnNutr.*)
- Change of Category from _____ to _____
(if you choose this option you will also need to send in an up to-date CV including a statement summarising your competency in the proposed specialist category, the name of at least ONE professional referee, and their contact details.)

NOTE: You must be a Member of the Nutrition Society of Australia or become a member before registration can be confirmed, even if the Registration Committee approve your application.

Declarations

The whole of this section must be completed. (Anyone who provides information that is subsequently found to be false will be removed from the register without refund of fees).

- I undertake to abide by the NSA Code of Ethics and Statement of Professional Conduct.
- I affirm that I have provided complete and accurate information in this form and accompanying documents.
- I undertake to inform the Society of any criminal conviction(s).
- I am a current member of NSA, or submitted an application form to join (member number or application date: _____)

Signed.....

Date



You must include the following with your application:

- An up-to-date CV
- A list of all academic qualifications.
- Certified** copies of degree certificates (BSc, honours, postgraduate etc) and transcripts(s); *if you are already registered, send NEW qualification certificates and new transcripts only.*

If you qualified outside Australia:

- Verification that the institution issuing qualifications is a reputable international level organisation delivering courses at a university level
- Translation, if original documents are not in English.
- A list of recent or contemporary relevant professional work experience.
- The names and contact details of three professional or academic referees – *For change of category, ONE professional not necessarily academic.*
- Statement to show how you developed competency in Public Health Nutrition (*RPHNutr only.*)

Scrutiny of Application:

The application form must be complete with **all** the supporting documents, particularly certified transcripts. Delays are most likely to occur if documentation has to be requested by the Registration Committee, which meets three times per year. You will be told of the outcome of the application in writing or by email.

Fee:

The \$150 application for registration fee includes a **non-refundable scrutiny** fee (\$50) and a fixed **initial registration** fee (\$100). If your application is unsuccessful, we will refund the initial registration fee component (**\$100**).

NOTE: Fees must accompany this form.

New Applicants: please pay the following sums (*Please tick relevant box*)

- \$150, Registration for applicants who apply from *within* Australia
- \$250, Registration for applicants who apply from *outside* Australia

Existing Registrants: please pay the following sums (*Please tick relevant box*)

- \$100, Change of Category
- \$50, Reinstatement Fees *for re-instatement e.g. after a lapse of 2 years or less;*
- \$100, Three-yearly evaluation of Professional Development (PD) and re-registration

Return with payment of (to address below):

- By cheque. *Please make cheques payable to the Nutrition Society of Australia*
- By credit card *Please charge my credit card*
 - Card type : Visa, Mastercard Card holder name.....
 - Expiry Date: Card number.....
 - Total amount: \$..... Signature.....