



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.....

City/Suburb: .....State/Country .....Postcode.....

Phone: ..... Mobile:..... Fax.....

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 understand that voluntary registration with the NSA will not provide me with a Medicare provider number.
[ ] I understand that if my application is not successful, I will receive a refund of the application fee less an administration charge of \$50.
[ ] 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, with time spent in nutrition related work/courses (in full time equivalents).
  - [ ] A list of all tertiary academic qualifications.
  - [ ] **Certified** copies of academic transcripts and degree certificates (BSc, honours, postgraduate etc). *If you are already registered, send NEW qualification certificates and new transcripts only.*
- If your name has changed, please send a certified copy of your marriage certificate.

**If you qualified outside Australia:**

- [ ] Verification that the institution issuing qualifications is a reputable international level organisation delivering courses at a university level, and Australian validation of your degrees by the Australian Government’s Australian Education International ([www. http://aei.gov.au/AEI/qualificationsrecognition/default.htm](http://www.aei.gov.au/AEI/qualificationsrecognition/default.htm))
- [ ] 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 four times each 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;*
- [ ] \$150, Three-yearly evaluation of Professional Development (PD) and re-registration

**Return with payment (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 Number: \_\_\_\_/\_\_\_\_/\_\_\_\_/\_\_\_\_

Card holder name.....

Expiry Date: ..... Total amount: \$.....

Signature.....