



PAPUA NEW GUINEA NURSING COUNCIL
Medical Registration Act 1980
APPLICATION CHECKLIST FOR PROVISIONAL LICENCE TO PRACTISE - OVERSEAS

Please read the instructions carefully before you submit your documents.

I wish to apply for Nursing Registration as a **REGISTERED NURSE** or **MIDWIFE**.

PART 1: PERSONAL DETAILS			
TITLE	<input type="checkbox"/> Miss	<input type="checkbox"/> Ms	<input type="checkbox"/> Mrs
	<input type="checkbox"/> Mr	<input type="checkbox"/> Sr	<input type="checkbox"/> Dr
	<input type="checkbox"/> Prof		
Family Name/Surname	<input style="width: 100%;" type="text"/>		Date of Birth
	First Name	<input style="width: 100%;" type="text"/>	
Marital Status	<input type="checkbox"/> Married	<input type="checkbox"/> Single	<input type="checkbox"/> Divorced
	<input type="checkbox"/> Widow/Widower		<input type="checkbox"/> Other (specify)
Nationality	<input style="width: 100%;" type="text"/>		Gender
			<input type="checkbox"/> Female
			<input type="checkbox"/> Male
Current Address where applicant may be contacted:		Contact No: Business Hours	<input style="width: 100%;" type="text"/>
Address 1	<input style="width: 100%;" type="text"/>		Mob. (Optional)
Address 2	<input style="width: 100%;" type="text"/>		<input style="width: 100%;" type="text"/>
	Email Address:		<input style="width: 100%;" type="text"/>

Please read the instructions carefully before you submit your documents.

- 1 All documents which are written in a foreign language other than English must be translated to English and certified as a true copy of the original document.
- 2 Do not send your original copies. The only exception is a Treasury fee receipt.
- 3 Submit all your documents according to the checklist shown below.
- 4 **All copies must be certified, stamped by a legal authority in home country.**
- 5 **All INCOMPLETE application forms will be declined.**
- 6 All applicants must have completed the required 2 years post registration practice in their country of registration before applying to PNG Nursing Council.
- 7 Fees for provisional registration will be 500PGK: (To be paid by the employer agent per section 86 (2), (b), (iii), of the Medical Registration Act 1980). The fees above can be paid at the Treasury office, Vulupindi building, Waigani, National Capital District, PNG.
- 8 If your application is successful and you are granted a provisional licence, you will work with a supervisor at a hospital in PNG. The supervisor or preceptor will mentor and assist you to complete essential nursing or midwifery skills to enable you to acquire clinical competency (PNG NC statement of competency forms NC6-nursing or NC7-midwifery). After six (6) months you should apply for a full licence to practice as a nurse or midwife in PNG.
(A further 500PGK fee will be applicable).
- 9 An application form for Provisional Licence to practice is attached for you to COMPLETE and submit to the PNG Nursing Council.
- 10 Please send your application to : **PNG NURSING COUNCIL, OFFICE OF REGISTRAR, PRIVATE MAIL BAG, PORT MORESBY, PNG**

CHECKLIST**Criteria - please tick box**

	Yes	No
1 Original receipt of the fees from the Treasury Office	<input type="checkbox"/>	<input type="checkbox"/>
2 An application form for Provisional License to practice as a Nurse or Midwife in PNG is signed (Form NC 1).	<input type="checkbox"/>	<input type="checkbox"/>
3 A letter or work contract from a PNG employer: proposed date to start employment, date completion of employment and types of duties officer would perform (Job Description) in PNG.	<input type="checkbox"/>	<input type="checkbox"/>
4 Current work contract between PNG government and applicant's organisation.	<input type="checkbox"/>	<input type="checkbox"/>
5 Evidence of current registration licence issued by Regulation Authority from home country	<input type="checkbox"/>	<input type="checkbox"/>
6 Applicants from Philippines must provide an authenticated Board Certificate.	<input type="checkbox"/>	<input type="checkbox"/>
7 One *Character Reference see notes (This is a confidential document to be separately sent direct to the PNG Nursing Council Registrar.)	<input type="checkbox"/>	<input type="checkbox"/>
8 Institutional awards - academic & professional awards. Copies must be signed and stamped with an Educational institutes approval seal. A study program undertaken must have been 3 years minimum.	<input type="checkbox"/>	<input type="checkbox"/>
9 An academic transcript (theory & clinical) of basic nursing and midwifery training done in other countries other than in Australia, New Zealand, UK, USA & Canada.	<input type="checkbox"/>	<input type="checkbox"/>
10 Curriculum Vitae - employment history since graduation, from current to previous experiences with dates shown alongside types of duties performed.	<input type="checkbox"/>	<input type="checkbox"/>
11 Two (2) *Professional References (see notes).	<input type="checkbox"/>	<input type="checkbox"/>
12 Copy of the passport (shows photo of applicant) as verified accurate likeness by a recognised authority.	<input type="checkbox"/>	<input type="checkbox"/>
13 Current copy of police clearance report (from country of origin).	<input type="checkbox"/>	<input type="checkbox"/>
14 Full medical report signed and certified by examining medical doctor from country of origin.	<input type="checkbox"/>	<input type="checkbox"/>
15 Evidence of name change if applicable.	<input type="checkbox"/>	<input type="checkbox"/>
16 International English Language Testing System (IELTS). Score of Band 4 or better or Certificate of English proficiency received from an English Language Instruction Institution which shows an applicant is proficient in English or completion of 5 years of secondary or 3 years of tertiary studies.	<input type="checkbox"/>	<input type="checkbox"/>

PART 5: OFFICE USE ONLY

License No:

Date of Receipt:

Receipt No:

Amount Paid (PGK):

Receiving Officer:

Signature: _____

Date:

OFFICIAL PNG NURSING COUNCIL COMMENTS:

REFERENCE NOTES:

***One (1) Character Reference.**

Who has known person for at least two (2) years. The person cannot be a member of your family. Reference must include:

- * Referees full name and contact details
- * Your full name and date of birth
- * How long and how the referee has known you
- * Include statements about your character, reliability and integrity, in the reference opinion make you suitable to be a registered nurse or midwife in PNG.
- * Whether to their knowledge they know of any reason you should not be registered with the PNG Nursing Council e.g. any issues of fitness to practice or conviction of an offence.

***Two (2) Professional Referees**

- * Referees full name and contact details on letter headed paper, full workplace details
- * Be written by a senior nurse/midwife, nursing midwifery supervisor, doctor or health professional at your current or past place of employment, including their own registration number
- * Your full name and date of birth
- * Confirm what professional role you were employed in and for how long and any post registration experience if any.
- * Include statements about your character, reliability and integrity. In the referees opinion what makes you suitable to be a registered nurse or midwife in PNG.
- * Whether to their knowledge they know of any reason you should not be registered with the PNG Nursing Council e.g. any issues of fitness to practice or conviction of an offence.