

<u>DOCUMENTS REQUIRED FOR REGISTRATION IN THE CATEGORY VOLUNTEER</u> SERVICE

PLEASE NOTE THAT A NON-COMPLIANT APPLICATION WILL BE REJECTED AND RETURNED TO PRACTITIONER

Original application form (form 12) duly completed. Please note that section A and section B of form 12 must be completed by a Medical Practitioner and certified in the presence of a Commissioner of Oaths.
Proof of holding an appropriate qualification in medicine or dentistry in the country of origin (attach a copy of degree certificate certified by a Notary Public and a sworn translation thereof in English also certified by a Notary Public).
Notarised clear copy of Identity Document / Passport
Proof of Internship training – form 10 (Internship foreign qualified practitioners) duly completed and certified by a Notary Public
Original Certificate of Status not older than six (6) months.
An application for such registration must be submitted by the relevant South African Health Care Provider Agency, approved by the Board.
Letter of support from the Foreign Workforce Management Programme (FWMP)
Detailed up to date Curriculum Vitae
Any other requirement as and when required by the Board
Registration Fees
Pro Rata Annual Fees
ECFMG verification. Please ensure that Council has received the complete verification of all documents required

be returned and not receive any attention. Visit the website of Council for documents to be verified.

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