




11	DECLARATION
<p>I, _____, (Name) SEEK TO BECOME A MEMBER OF THE COLLEGE AND I WILL ABIDE BY THE RULES, REGULATIONS AND ALL NECESSARY STATUTORY REQUIREMENTS GOVERNING THE COLLEGE.</p>	
<p>_____ SIGNATURE OF APPLICANT</p>	
<p>_____ DATE</p>	

PLEASE ENCLOSE A COPY OF:

- CURRICULUM VITAE
- REGISTRATION CERTIFICATE
- PRESCRIBED FEE PAYABLE TO THE COLLEGE
- PROOF OF CITIZENSHIP OR WORK PERMIT
- LETTER OF GOOD STANDING FROM RELEVANT MEDICAL COUNCIL

**OFFICIAL USE ONLY**

(a) FEE PAID	(b) RECEIPT NO.	(c) DATE
(d) COMMENTS		
(e) <input type="checkbox"/> ACCEPTED <input type="checkbox"/> REJECTED		
SIGNATURE	DESIGNATION	
DATE		