



PSYCHOLOGICAL PRACTITIONERS ACT 1998

**THE PSYCHOLOGICAL PRACTITIONERS REGISTRATION
REGULATIONS 2003**

FORM 2

RENEWAL OF REGISTRATION

To: The Registrar-General

I hereby apply for the renewal of my registration as a psychologist under section 11 of the Psychological Practitioners Act 1998.

I declare that to the best of my knowledge and belief the information given in this form is true.

Signature of applicant

Date

Surname:

Full given names:

Date of Birth:

Residential Address:
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Address of place of employment:
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Date of initial registration:

Expiration Date:

Certificate Number:

DETAILS OF ACTIVITIES IN THE LAST THREE YEARS

1. Psychological services, including hours and nature of service provided:

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2. Continuing professional development, including credits therefore:

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3. Educational or other requirements imposed by the Psychologists Registration Council:

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4. Conviction of an offence and sentenced to imprisonment:

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