



MEDICAL AND DENTAL PROFESSIONS BOARD

APPLICATION FOR REGISTRATION

INTERN IN MEDICINE

Form 23 MDB IN

NB: AN INCOMPLETE FORM WILL DELAY REGISTRATION

Please PRINT and return the ORIGINAL FORM to:
 The Registrar, PO Box 205, Pretoria 0001
 553 Vermeulen Street, Arcadia, Pretoria 0083

FOR OFFICE USE ONLY

A. PERSONAL PARTICULARS

HPCSA Registration Number: _____

I, (Dr, Mr, Mrs, Miss) _____ Surname: _____

Maiden name (if applicable): _____

First names: _____ Identity No.: _____

Postal address: _____ Postal code: _____

Residential address: _____ Postal code: _____

Tel (H): _____ (W): _____

Cell: _____ Fax: _____

Email: _____

* Marital Status: Divorced Married Single Gender: Male Female

* Race: Asian African Coloured White Country of origin: _____

Received on _____

Amount _____

Receipt No. _____

No. _____

Reg. Date _____

VERIFIED

DATE

CAPTURED

DATE

SIGNATURE: _____ **Date:** _____ **20** _____

VERIFIED

B. The following is submitted in support of my application:

1. Current registration fee of **R182.00** plus an additional fee of **R80.00** for the Intern Log book.
2. A copy of my identity document or birth certificate.
3. A copy of my marriage certificate (should you wish to register in your married surname).
4. Non-SA Citizens: Letter of endorsement by the Foreign Workforce Management Programme of the Department of Health.
5. A copy of my registration certificate as a student / student intern with the Health Professions Council of South Africa.

DATE

C. TO BE COMPLETED BY THE UNIVERSITY

Name of University: _____

It is hereby certified that _____ complied with all the requirements for the Degree _____ of this institution on _____ (day) _____ (month) _____ (year) and that this qualification will be conferred/issued at a graduation ceremony on _____ (day) _____ (month) _____ (year).

WE RECOMMEND him/her for registration

SIGNATURE: RECTOR/DEAN _____ **DATE** _____

SIGNATURE: REGISTRAR _____ **DATE** _____

ORIGINAL OFFICIAL DATE STAMP OF INSTITUTION

* Please complete for statistical purposes.

NB: Please note that the Council, in the normal course of its duties, reserves the right to divulge information in your personal file to other parties.