

ASUM is the Peak Body for Medical Ultrasound in Australia and New Zealand

## Application for Previously Enrolled Candidates to Register for the DIPLOMA OF DIAGNOSTIC ULTRASOUND (DDU) PART I EXAMINATION

Applications must be legible. See the ASUM website for application closing dates. **Full payment MUST be provided with this application form.** 

This form should only be used by candidates previously enrolled in the DDU or re-sitting the DDU Part I Physics Examination. All candidates for the DDU must be financial ASUM members at the time of application for enrolment and maintain ASUM membership until their Diploma is granted or until they withdraw.

1.	Title:	_ Given Names:			
2.	Surname:				
3.	Mailing Address:				
	State or Country:		Posto	Postcode:	
4.	Gender (please circle):	Male / Female	DOB (DD/MN	M/YY):	
5.	Home Tel:(  )		Work Tel: (	)	
	Mobile Tel: ( <u>)</u>		Fax No: (	)	
6.	Email:				
7.	I first enrolled in the DDU in (Year):				
8.	I am enrolled in the DD	U Specialty of (e.g.	General, Critica	ll Care):	
9.	I wish to (please tick):				
	Register for the DDU Par	t I Physics Examin	ation \$638.00 (\$	580.00 ex GST) AND	
All	I have attached my signe			second page of this application for	n).
10.	<b>Payment:</b> On payment, th ASUM ABN 64 001 679 167		invoice. Please re	tain a copy for your records.	
	MasterCard	VISA Che	que (Australian Ba	ank ONLY – Made Payable to ASUM)	
C	ard Holder's Name:			Expiry Date:	
C	ard Holder's Signature:			Total: \$AU:	
Th	is form will expire on the 30 <sup>th</sup> Jun	e 2012 and should not be	used after this date.		
	DDU Part I Registration		2011.09.01	V	1

Australasian Society of Ultrasound in Medicine • PO Box 943, Crows Nest NSW 1585, SYDNEY, AUSTRALIA P (61 2) 9438 2078 F (61 2) 9438 3686 E <u>asum@asum.com.au</u> I <u>http://www.asum.com.au</u> ACN 001 679 161 ABN 64 001 679 161 ASUM is certified ISO 9001:2008



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## **PRIVACY STATEMENT**

The information requested in this application form is being collected by the Australasian Society for Ultrasound in Medicine (ASUM) to process your enrolment in the DDU Part I. This information will be supplied to the relevant administrative areas. Any statistical or other data collected for admission and enrolment will be retained for administrative and academic purposes. The supply of this information by you is voluntary, however, if you do not supply all the requested information we may not be able to process your enrolment. Changes to personal information must be submitted in writing to DDU@asum.com.au.

## **Candidate Declaration**

I understand that ASUM may need to verify the accuracy of information supplied and ASUM may exchange data with other institutions for this purpose.

I agree that all materials provided by me for the purposes of assessment (including but not restricted to Casebooks) become the property of ASUM and may be used for the purpose of training DDU Examiners. These materials will not be used for any other purpose except with the express permission of the candidate.

I also understand that ASUM will communicate with me electronically and that it is my responsibility to regularly check my DDU email address (details of my DDU email will be supplied with my confirmation of enrolment into the DDU Part I Examination).

I declare that the details that I have provided are true and correct. I have read and understand the information provided to me in the DDU Regulations. I hereby undertake to comply with all the conditions set out in the DDU Regulations and understand that these are subject to change.

Signature:

Date:

Please send your application prior to the advertised closing date by **POST ONLY** to: **DDU Coordinator ASUM PO Box 943 CROWS NEST NSW 1585 AUSTRALIA** 

Please allow 4-6 weeks to process your application. Applications must be received at the ASUM office prior to the closing date. Late applications will not be processed.