A close-up of a logo

Description automatically generated with low confidence

**EVALUATION OF APPLICATION FOR RE-REGISTRATION**

|  |  |
| --- | --- |
| **Title (Dr/Mr/Mrs/Ms/Prof)** |  |
| **Name/s and Surname** |  |
| **ID or Passport no.** |  |
| **Registration no.** |  |
| **Professional Designation** |  |
| **Re-registration Application No.** |  |

1. **DOCUMENT VERIFICATION (ADMINISTRATOR)**

***Confirmation of supporting documents (****tick✓ if submitted****)***

|  |  |  |  |
| --- | --- | --- | --- |
| **All Registration Category Applications** | | | |
| **i** | **Extended leave because of illness** | Certified copy of ID |  |
| Doctor’s or other certified medical practitioner’s report |  |
| **ii** | **Practicing in other jurisdictions** | Certified copy of ID |  |
| Affidavit |  |
| A project profile report |  |
| Referee(s) report |  |
| Certified copies of letters of appointment |  |
| Curriculum vitae |  |
| Certified copies of qualifications |  |
| **iii** | **Not actively practicing in the industry** | Certified copy of ID |  |
| **iv** | **Non-payment of annual fees** | Certified copy of ID |  |
| **v** | **CPD Non-Compliance** | Certified copy of ID |  |
| **vi** | **Candidates** | Certified copy of ID |  |
| Curriculum vitae |  |
| Certified copies of qualifications |  |
| **Comments:** | | | |

1. **APPLICATION VERIFICATION (COORDINATOR)**

|  |  |  |  |
| --- | --- | --- | --- |
| **Verified by:** | |  | |
| All required supporting documentation submitted (Y/N) | | |  |
| Supporting documentation meets criteria (Y/N) | | |  |
| Comments: | | | |
| **Date** |  | | |
| **Signature** |  | | |

1. **RE-REGISTRATION APPLICATION ASSESSMENT OUTCOME**

|  |  |  |  |
| --- | --- | --- | --- |
| **Decision made by:** | |  | |
| **Decision** (*tick (✓) appropriate option and provide reason for decision*) | | | |
| Re-registration application approved | | |  |
| Reasons | |  | |
| Re-registration application rejected | | |  |
| Reasons | |  | |
| **Date** |  | | |
| **Signature** |  | | |