



New Zealand Dietitians Board
Te Mana Mātanga Mātai Kai

Recertification Return to practice request

All applications for returning to practice must include:

1. This **application form**,
2. A **certified copy of photo ID**, either a passport or driver license,
3. A completed **Criminal Conviction Check** third party request form,
4. A **cover letter** addressed to the Registrar, *and*
5. An up-to-date **Curriculum Vitae**.

The cover letter should set out the reasons for the application, summarise your career pathway since you last practised in New Zealand, and specify any other factors you feel should be considered in your application for returning to practice e.g. other relevant work experience, further qualifications, courses completed.

Your application should also contain:

- **Details of any continuing competency** you have undertaken over the time you have not been working as a Dietitian - in date order with full course titles and duration where appropriate, and your plans for future professional development.
- **Certificate of Good Standing** and/or proof of Registration with Health Professions Council/credentialing agency/regulatory authority, if applicable.
- Names and contact details of **two referees**.
- Any other supporting documentation you feel would be relevant to your application.

*NOTE: If you have lived overseas for more than 2 years you may be required to provide a **criminal conviction report from the country you resided in** – please check with the Board's office prior to submitting your application.*

Practice History

Date you last practised Dietetics:

Year you last held an APC in New Zealand:

Total number of years/months working in New Zealand as a Dietitian with an APC, prior to taking time out of Dietetic practice in New Zealand:

Total number of years working in other countries (*please list with dates and include relevant registration documents*):

.....
.....
.....
.....

List the main areas of Dietetic practice in which you have worked:

.....
.....
.....
.....

State the approximate years/months you have spent working in each area of Dietetics:

Clinical/community:

Public health:

Food service:

General management:

Other (*please specify*):

Character and Fitness Reference

The reference letters must be sent directly to the Registrar at the Board’s postal address (*original & signed*).

Referees should have known you for 12 months or more and should not be close friends or relatives.

At least one referee should be a PRESENT OR PAST EMPLOYER.

At least one reference must be submitted on appropriate letterhead.

A detachable information form is available at the end of this application form (page 7) and should be given to your chosen referees.

Referee #1 Name: Contact Phone:

Contact Email:

Referee #2 Name: Contact Phone:

Contact Email:

Supervisor / Mentor Name (*if applicable*):

Job Applied for (*include a job description if possible*):

.....
.....
.....

Declaration

I,
(Full name)

Solemnly and sincerely declare that:

- 1. All of the information provided with this application is true and correct in every particular and detail.
- 2. I will provide the Dietitians Board with any such further information as it may require in order to complete the process of restoration of my name to the Register of Dietitians.
- 3. I know of no information that could cause the Dietitians Board not to be satisfied that I am a fit and competent person to hold a practising certificate.

Applicants Signature:

Date:

Payment

Fee for restoration to the Register: \$175.00 incl GST

Internet Banking

I have paid by internet banking on (date):

My reference was (please use your full name):

Bank Account number: 03-0502-0254-940-000

OR

Credit Card

Please debit my (*please tick one*)

- MasterCard
- Visa

The sum of NZ\$

Card number: _ _ _ _ _ _ _ _ _ _

Expiry date (Month/ Year):

Cardholder's name:

Cardholder's signature:

Included Documents

Use the **checklist** below to ensure you have included all the required information for your Return to Practice Request:

- Completed application form
- Payment
- Certified copy of photo ID (passport or driver license)
- Completed request for Criminal Conviction History form
- Evidence of name change (*if applicable*)
- Cover Letter
- Curriculum Vitae
- Contact details of two referees (reference letters sent directly to the Board)
- Evidence of professional development / future learning plans
- Certificate of Good Standing / Evidence of overseas Registration

Please post this application to:

**The Registrar
Dietitians Board
PO Box 9644
Wellington 6141
NEW ZEALAND**

Or courier to:

**The Registrar
Dietitians Board
Level 5
22 Willeston Street
Wellington 6041
New Zealand**

If you have any questions, please contact the Board:

Phone: (+64) 4 474 0746

Email: administration@dietitiansboard.org.nz

Reference of Character and Fitness

Please detach this information sheet and provide it to your referee.

Without this reference your application cannot proceed.

This information sheet is provided to assist people preparing a reference for applicants for registration within the [Scope of Practice of Dietetics](#) with the Dietitians Board in New Zealand.

To assist the Board, referees should comment to the best of their knowledge on:

- The capacity in which they know the applicant.
- The applicant's character i.e. is the applicant an honest and trustworthy person.
- Whether the applicant is a suitable person to practise as a Registered Dietitian, i.e. do you believe that the applicant is competent to be registered as a Dietitian and hold an annual practising certificate? (Some referees may not be able to comment on this).
- The fitness of the applicant to practise Dietetics; the law specifies a number of fitness criteria. A Registered Dietitian should:
 - Be able to communicate effectively for the purposes of practising;
 - Be able to communicate in and comprehend English sufficiently to protect the health and safety of the public;
 - Not have been convicted of an offence punishable by imprisonment for a term of 3 months or longer;
 - Not have a mental or physical condition that precludes them functioning safely as a dietitian;
 - Not be the subject of, under investigation or subject to, an order relating to professional disciplinary proceedings.

Please make sure that the name of the person you are providing a reference for is clearly stated on the reference and that wherever possible it is submitted on letterhead.

The Dietitians Board thanks you for your time in reading this information and for preparing a frank reference.

Please send the signed reference letter direct to:

**The Registrar
Dietitians Board
PO Box 9644
Wellington 6141
NEW ZEALAND**

Or courier to:

**The Registrar
Dietitians Board
Level 5
22 Willeston Street
Wellington 6041
New Zealand**