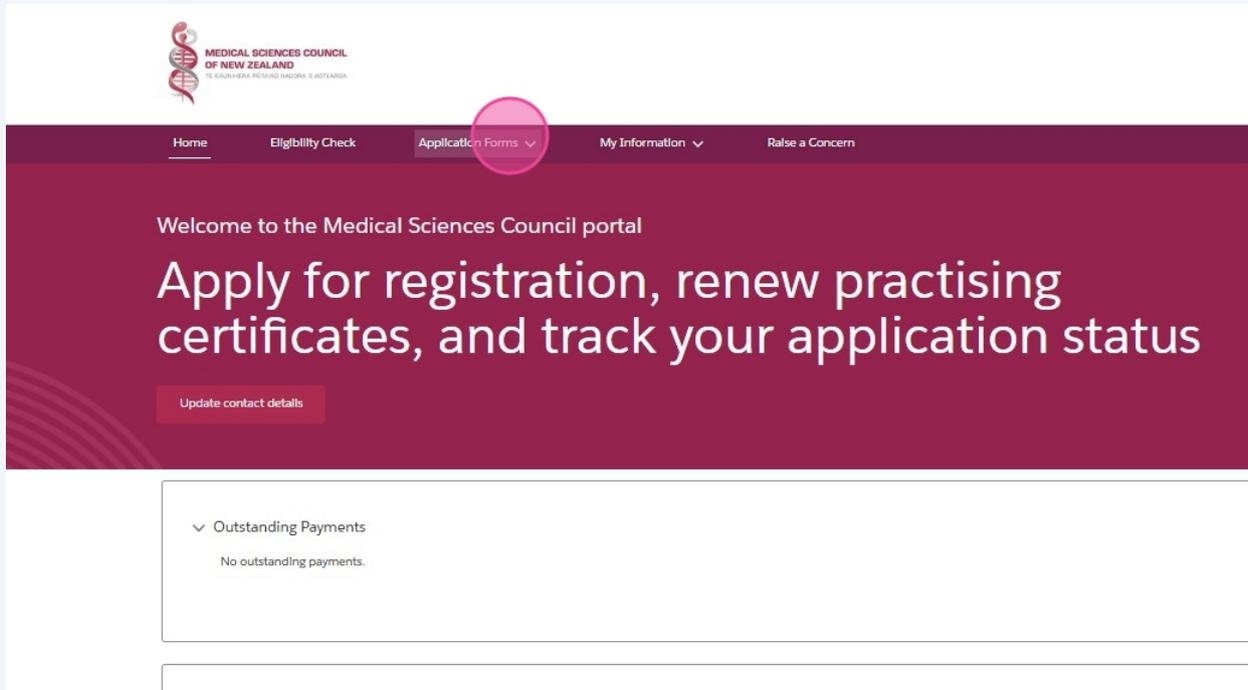
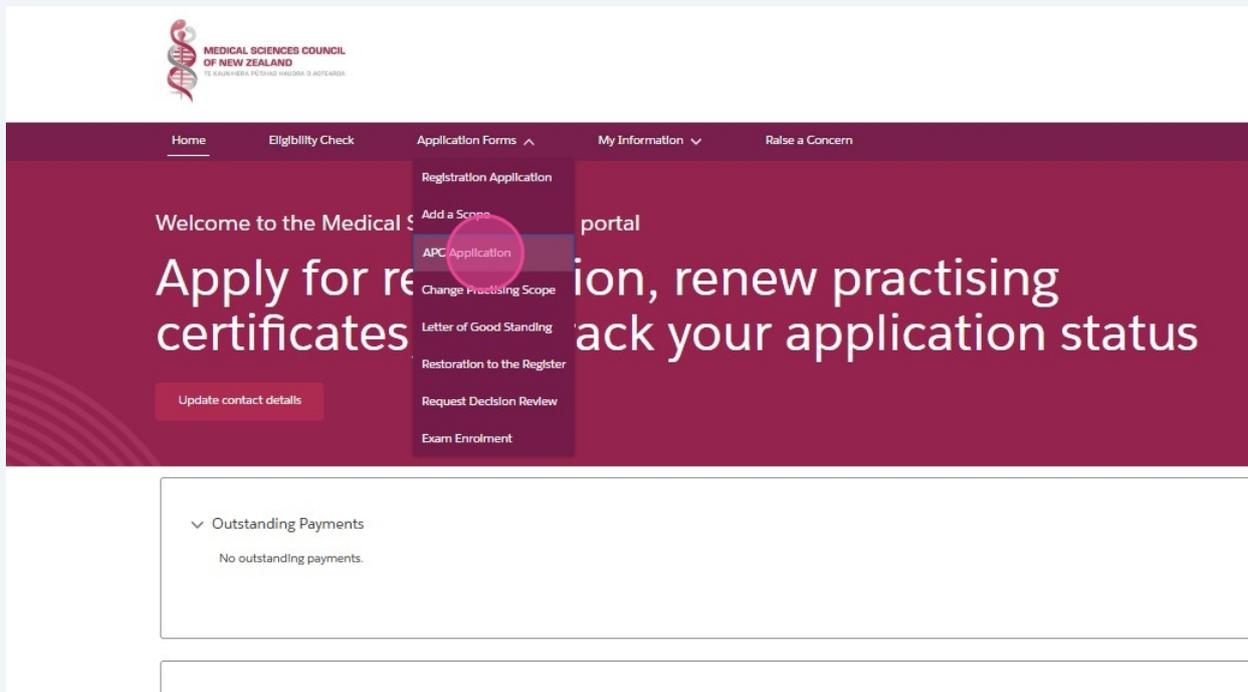


# How to apply for your APC

- 1 Navigate to our website and log into your online portal.

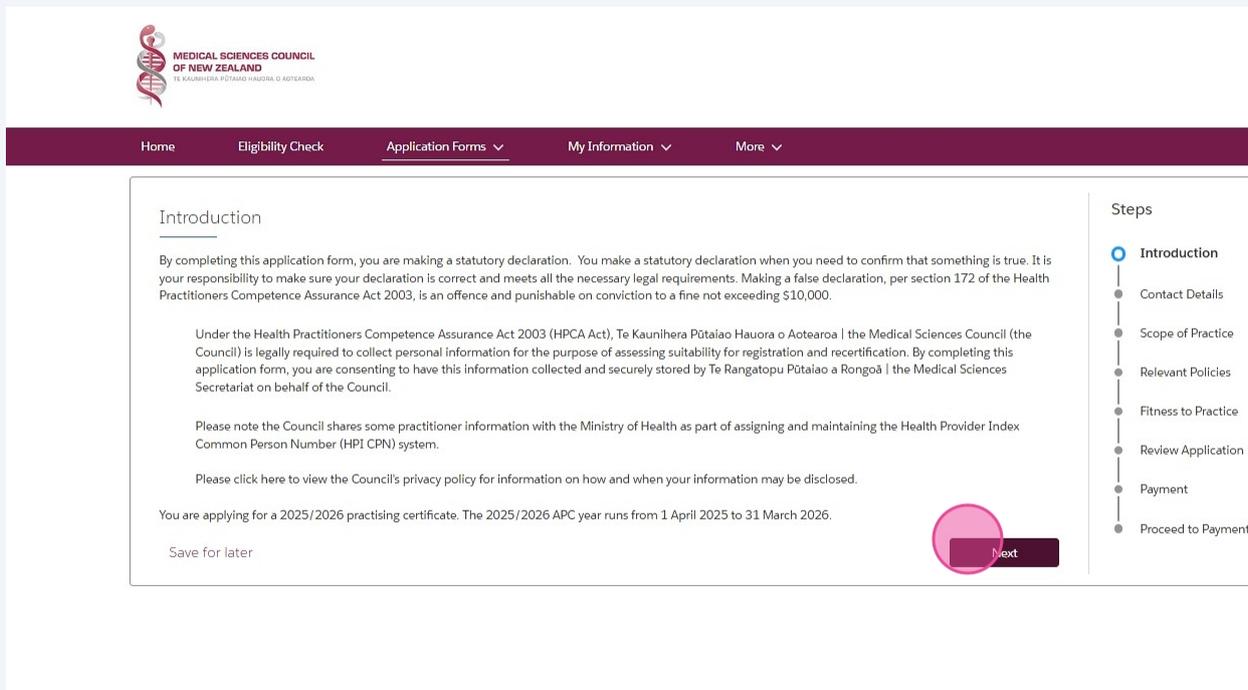


## 2 Click "APC Application"



The screenshot shows the Medical Sciences Council of New Zealand portal. The navigation bar includes Home, Eligibility Check, Application Forms, My Information, and Raise a Concern. A dropdown menu is open under 'Application Forms', with 'APC Application' highlighted. The main content area features a large banner with the text 'Welcome to the Medical Sciences Council portal' and 'Apply for registration, renew practising certificates, or check your application status'. Below the banner, there is a section for 'Outstanding Payments' which shows 'No outstanding payments.'

## 3



The screenshot shows the 'Introduction' page for the APC Application process. The navigation bar includes Home, Eligibility Check, Application Forms, My Information, and More. The main content area is titled 'Introduction' and contains the following text:

By completing this application form, you are making a statutory declaration. You make a statutory declaration when you need to confirm that something is true. It is your responsibility to make sure your declaration is correct and meets all the necessary legal requirements. Making a false declaration, per section 172 of the Health Practitioners Competence Assurance Act 2003, is an offence and punishable on conviction to a fine not exceeding \$10,000.

Under the Health Practitioners Competence Assurance Act 2003 (HPCA Act), Te Kaunihera Pōtaiao Hauora o Aotearoa | the Medical Sciences Council (the Council) is legally required to collect personal information for the purpose of assessing suitability for registration and recertification. By completing this application form, you are consenting to have this information collected and securely stored by Te Rangatapu Pōtaiao a Rongoā | the Medical Sciences Secretariat on behalf of the Council.

Please note the Council shares some practitioner information with the Ministry of Health as part of assigning and maintaining the Health Provider Index Common Person Number (HPI/CPN) system.

Please click here to view the Council's privacy policy for information on how and when your information may be disclosed.

You are applying for a 2025/2026 practising certificate. The 2025/2026 APC year runs from 1 April 2025 to 31 March 2026.

Save for later

Next

The 'Steps' section on the right side of the page lists the following steps:

- Introduction
- Contact Details
- Scope of Practice
- Relevant Policies
- Fitness to Practice
- Review Application
- Payment
- Proceed to Payment

4

First, you will be given the opportunity to update any of your contact details that may have changed recently.

The screenshot shows the 'Contact Details' page. At the top left is the logo of the Medical Sciences Council of New Zealand with the Māori name 'TE KAHUNHERA PŪYAKO HAUORA O AOTEAROA'. Below the logo is a navigation bar with links: Home, Eligibility Check, Application Forms (selected), My Information, and More. The main content area has the heading 'Contact Details' and a sub-heading 'Current Details'. Below the sub-heading is a large, blurred rectangular area representing a form for entering contact information.

5

Then you will be asked to select the scope of practice you want to apply for an APC in, and complete two compliance declarations.

The screenshot shows the 'Scope of Practice' page. At the top left is the logo of the Medical Sciences Council of New Zealand with the Māori name 'TE KAHUNHERA PŪYAKO HAUORA O AOTEAROA'. Below the logo is a navigation bar with links: Home, Eligibility Check, Application Forms (selected), My Information, and More. The main content area has the heading 'Scope of Practice' and a sub-heading 'You are applying for a new practicing certificate.'. Below the sub-heading is a dropdown menu labeled 'Select Scope of Practice' with the text 'Choose a Scope' and a downward arrow.

6

If you are required to complete a period of supervision, you will then be asked to provide the details of your supervisor and clinical site.

**MEDICAL SCIENCES COUNCIL OF NEW ZEALAND**  
TE KAUHUIHERA PŌTANGA HAURORA O AOTEAROA

Home Eligibility Check **Application Forms** My Information More

### Supervisor Selection

Please enter your supervisor details below. The Council will then email them requesting they confirm their role as your supervisor. Please note, your practising certificate cannot be issued until the Council has received confirmation from your supervisor.

Please note your supervisor will be copied into all communication regarding your supervision.

Please select your supervisor

If your supervisor is not in the list, please enter their details below.

- Name
- Registration Number
- Email Address

Your supervisor should be a registered practitioner with the New Zealand Medical Sciences Council. We will only accept non-registered supervisors in exceptional cases.

Please enter the name of the site where you will complete your supervision

**Steps**

- Introduction
- Contact Details
- Scope of Practice
- Supervisor Selection**
- Relevant Policies
- Fitness to Practice
- Review Application
- Payment
- Proceed to Payment

7

The next step is confirming you understand and will comply with the relevant policies.

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TE KAUHUIHERA PŌTANGA HAURORA O AOTEAROA

Home Eligibility Check **Application Forms** My Information More

### Relevant Policies

I have read and acknowledge that I must comply with the Recertification CPD policy as a requirement of holding a practising certificate (this policy sets out the recertification requirements for medical laboratory science and anaesthetic technician practitioners' engagement in continuing professional development (CPD)).

I have read and acknowledge that I must practise consistently with the Competence Standards (this document sets out the minimum requirements used to guide practitioners and ensure they are competent to practise).

I have read and acknowledge that I must practise consistently with the Code of Ethical Conduct (this document sets out the standards of conduct or behaviour expected of registered medical laboratory science and anaesthetic technician practitioners).

I have read and acknowledge that I must practise consistently with the Cultural Competence Standards (this document sets out the expectations of registered medical laboratory science and anaesthetic technician practitioners in respect of cultural competence).

The Medical Sciences Council is one of eighteen New Zealand health responsible authorities appointed by the Minister of Health under the Health Practitioners Competence Assurance Act 2003 (the Act). The principal purpose of this Act is to protect the health and safety of members of the public by providing for mechanisms to ensure that health practitioners are competent and fit to practise their professions.

Save for later

**Steps**

- Introduction
- Contact Details
- Scope of Practice
- Supervisor Selection
- Relevant Policies**
- Fitness to Practice
- Review Application
- Payment
- Proceed to Payment

## 8 Then you must answer a series of questions relating to your fitness to practice.

**MEDICAL SCIENCES COUNCIL OF NEW ZEALAND**  
TE KAUHHERA PŪTAMU HAORA O AOTEAROA

Home Eligibility Check **Application Forms** My Information More

### Fitness to Practice

To my knowledge I have no mental or physical conditions that may impact on my competence and fitness to practise within this scope of practice.  
 True  False

To my knowledge, there are no personal or professional matters the Council should be aware of that may affect my fitness to hold a practising certificate.  
 True  False

I am not subject to any disciplinary proceedings relating to my conduct  
 True  False

I have not previously had any application for registration declined by a professional body or registration authority?  
 True  False

Since you last held an APC with the Medical Sciences Council, have you taken extended leave for four weeks or longer due to an illness or injury?  
 Yes  No

Save for later

#### Steps

- Introduction
- Contact Details
- Scope of Practice
- Supervisor Selection
- Relevant Policies
- Fitness to Practice**
- Review Application
- Payment
- Proceed to Payment

## 9 You will then be asked to ensure the information you have provided is correct, and complete two final declarations.

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TE KAUHHERA PŪTAMU HAORA O AOTEAROA

Home Eligibility Check **Application Forms** My Information More

### Review Application

Please review the information you have submitted in your application and ensure it is all correct.

#### Final Declarations

I declare all information within this application is true and correct and I understand that I am making a statutory declaration. (making a false declaration, per section 172 of the Health Practitioners Competence Assurance Act 2003, is an offence and punishable on conviction to a fine not exceeding \$10,000).

I understand my responsibilities as a registered practitioner according to the Code of Ethical Conduct

Save for later

#### Steps

- Int
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## 10 Finally, you must complete the fee-related declarations,

**MEDICAL SCIENCES COUNCIL OF NEW ZEALAND**  
TE KAUNHERA PŪTAKEO HAURUA O AOTEAROA

Home Eligibility Check **Application Forms** My Information More

### Payment

The fee required for this application is determined according to the Medical Sciences Council Gazette fees available on the Council Website

#### Payment Declarations

\* I am completing this application from within New Zealand  
 Yes  No

I agree to pay all required fees for this application and understand the fees are non-refundable.

I understand that my APC application will not be processed until payment has been completed.

Save for later

#### Steps

- Intro
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- Sup
- Relev
- Fitne
- Revie
- Paym**
- Proce

## 11 and then proceed to payment.

Once submitted, you will receive email confirmation that we have received your application.

**MEDICAL SCIENCES COUNCIL OF NEW ZEALAND**  
TE KAUNHERA PŪTAKEO HAURUA O AOTEAROA

Home Eligibility Check **Application Forms** My Information More

### Proceed to Payment

You will be charged 579.99 NZD for this application.

When completing your payment, please do not close the browser until we have confirmed your payment was completed successfully.

Save for later

#### Steps

- Introduction
- Contact Details
- Scope of Practice
- Supervisor Selection
- Relevant Policies
- Fitness to Practice
- Review Application
- Payment
- Proceed to Payment**