

CERTIFICATION OF ENGLISH LANGUAGE PROFICIENCY

I am providing this reference for _____ (name of applicant) who is applying for New Zealand registration as a practitioner under the Health Practitioners Competence Assurance Act 2003.

My Name _____

My Position Title _____

My email Address _____

Please indicate if the applicant satisfies the following:

	Please circle	
The applicant worked as a health professional and in a position equivalent or relevant to the professions of medical laboratory science <i>or</i> anaesthetic technology	Yes	No
The applicant worked for a continuous period of at least two-years full time equivalency within the five-years immediately prior to application	Yes	No

Please comment on the applicant's ability to:

The applicant understands verbal instructions or requests:
The applicant can clearly write their thoughts, including instructions or requests:
The applicant can clearly articulate their thoughts, including instructions and requests:
The applicant interprets clinical reports and take appropriate action:
The applicant understands written instructions or requests:

Do you have any further comments about the applicant's ability to communicate in English (including writing, reading, listening and speaking)?

Declaration

I confirm:

- *the above information is true to the best of my knowledge; and*
- *English is my primary language, and*
- *the workplace was one where English is the primary language spoken*

Signed

Date

Note: Under Section 172 of the Health Practitioners Competence Assurance Act 2003 every person commits an offence if they make any declaration or representation that, to their knowledge is false or misleading, and may be liable on summary of conviction to a fine not exceeding \$10,000

Use of Reference

Health Practitioners Competence Assurance Act 2003.

The information and opinion you provided will be treated as confidential to the Medical Sciences Council of New Zealand. It will be used for the purpose of consideration of the suitability of the candidate to be registered under s.16 of the Health Practitioners Competence Assurance Act 2003.

Privacy Act 1993

Any reference you provide may be made available to the candidate on request under the provisions of the Privacy Act 1993.

This form is to be sent to:

Medical Sciences Council

Level 3

Panama House

22 Panama Street

Wellington 6011