Regulation 7(1)(c)

ALLIED HEALTH PROFESSIONS ACT 2011 (ACT 1 OF 2011)

ALLIED HEALTH PROFESSIONS (REGISTRATION AND PRACTISING CERTIFICATES) REGULATIONS 2013

STATUTORY DECLARATION FOR RESTORATION OF REGISTRATION UNDER SECTION 27 OF ACT

| I,(full name in block letters) |
|--|
| of |
| do solemnly and sincerely declare as follows: |
| 1. I am the person originally registered as |
| with the qualification or status of |
| hereby apply for the restoration of my name to the |
| (state relevant register in the Allied Health Professions Act 2011) 2. To the best of my knowledge, I am not suffering from, and have never suffered from, any physical or mental condition which impairs my fitness to |
| practise in my profession, and I am not undergoing and have not undergone any |
| treatment for such condition except for |
| (give particulars of any such condition and treatment) |
| 3. Since the removal of my name from the |
| (state relevant register in the Allied Health Professions Act 2011) |
| I have been residing at |

| Signed | |
|-----------------------|--|
| Declared at day of 20 | |
| Befo | ore me |
| | nature and title of officer before m the declaration is made). |

4. The grounds of my application are in the attached statement, and I make this solemn declaration by virtue of the Oaths and Declarations Act (Cap. 211), and subject to the penalties provided by that Act for making false statements in statutory declarations, conscientiously believing the statements contained in this

declaration to be true in every particular.