

Subject:	Declaration by the Applicant – Short Term Training	Ref. No.	ETA-IMG-041
-----------------	---	-----------------	--------------------

I

declare that

- I am the applicant in the Application to be assessed for Short Term Training in a Medical Specialty Pathway in Australia.
- The statements made, and the information provided, in this application form and in the certified documents attached to my application are true, correct and complete.
- I have familiarised myself with RACS policies and procedures, and will comply with the requirements for short term training.
- I have familiarised myself, and will comply with, all relevant requirements of the Medical Board of Australia as apply during my short term training.
- I will provide all documentation requested by RACS in support of my application; and
- I understand and acknowledge that RACS relies on representations and statements made by me, orally and in writing (including supporting documentation), in considering my application for short term training.

Signature:

Date: