

For reasons of privacy, the Australian Medical Council will not send a reprint of a candidate's EICS Certificate to anyone but the candidate. The fee for this service is A\$100 (this fee is GST free) – a 0.9% Master/Visa card surcharge fee will be applied. It may take up to 10 working days to process this request. To order a reprint of your EICS Certificate, complete and return this form to the AMC for processing.

Identity of applicant	Office use only
Candidate number <input type="text"/> Family name (surname) <input type="text"/> Given name(s) <input type="text"/>	Date received stamp

Address of applicant

Address

State Postcode

Country

If your address has changed since you submitted your application to the AMC, your contact details will be updated to the details stated on this request form.

Contact details

Home phone Work phone

Mobile Facsimile

Email

Method of payment

Request a reprint of my EICS Certificate (A\$100) – a 0.9% Master/Visa bank card surcharge fee will be applied

Bank cheque or money order Attach your bank cheque or money order, made out to Australian Medical Council Limited, to this application.

*Master/Visa card Include your *Master/Visa card details below. The recording of your signature is taken as consent to process payment.
 (*A 0.9% bank card surcharge fee will be applied.)

Credit card number

Name on card

Cardholder's signature

Card expiry date (mm/yy)

Date (dd/mm/yyyy)

Privacy statement

Your privacy is respected by the AMC. Information collected by the AMC may be used for administering the AMC examinations and may be provided to the AMC examination sections as well as the Medical Board of Australia, AHPRA (the Australian Health Practitioner Regulation Agency) and specialist medical colleges, as applicable.

If you have any privacy concerns or would like to verify information held about you, please contact the Privacy Officer, Australian Medical Council Limited, PO Box 4810, KINGSTON ACT 2604, Australia.

Consent to collect information

Signature

Date

Please sign inside the box to ensure that the AMC is recording your full signature

Send your completed form to:

Email: assessments@amc.org.au