DANGEROUS DRUGS ACT [CHAPTER 15:02] APPLICATION FOR ISSUE OF A LICENCE TO A PERSON TO ACQUIRE, POSSESS AND ADMINISTER DANGEROUS DRUGS.

(To be submitted in duplicate)

1.	Full names
2.	Date and place of birth
3.	Qualifications
4.	Registration number with the Health Professions Council, if applicable (A copy of the registration certificate and the current practising certificate must accompany this application).
	(Number of Practising Certificate with the Health Professions Council, if applicable)
5.	Address (Home)
	(Business)
	(e-mail)
6.	Telephone number (<i>Home&Business</i>)
7.	Present place of employment
8	Position of applicant at place of employ ment (e.g. owner, manager, etc.)
9.	Have you been convicted of any offence relating to drugs? YES/NO*
	If Yes state details
•••••	Б.
	Date
	Signature of applicant

*Delete the inapplicable.

Note:	The appropriate fee, etc., are required to be attached to the application. Copies of	
	original documents must be properly certified.	
	If any document or fee required to be attached is not attached, the application cannot	
	be accepted.	
	If an applicant's Practising Certificate is not renewed by the Health Professions	
	Council for any reason any licence issued in terms of these Regulations will	
	immediately become valid.	
Drugs you wish to have included on your licence		
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