



POPULATION HEALTH

APPLICATION FOR RE-AUTHORISATION AS A VACCINATOR

Application is being sought by:

Name	
Employer	
Postal Address <i>(including PO Box)</i>	
Email Address	
Phone Number	

Please find enclosed photocopies of:

- Annual Practicing Certificate (must include NCNZ number)
- Current CPR certificate (age appropriate and includes airway management)
- Proof of Indemnity Insurance (letter indicating insurance is current)
- Vaccinator Update certificate
- Completed Peer Review form
- Summary of immunisation practice over preceding 12 months (refer to 'Immunisation Standards for Vaccinators' section of the Immunisation Handbook)

We must receive ALL the above documentation to complete this application

Current Clinical Setting:

- School Based Programme
- Primary Care
- Outreach Immunisation Services
- Occupational Health
- Influenza
- Off-site Programmes
- Pharmacy
- Other (brief description).....

Signed by Applicant	Date
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Please send all documents to:

Dr Felicity Dumble, Population Health, Private Bag 3200, HAMILTON 3204

For applicants from overseas, or other enquiries regarding authorisation please contact Population Health on 07 838 2569 or 0800 800 977 or alternatively the IMAC Education Facilitator (Midland) 0274 384 867 edmidland@imac.org.nz