

ALLIED HEALTH PRACTITIONERS COUNCIL OF ZIMBABWE

PRACTISING CERTIFICATE RENEWAL FORM – YEAR 2023

INSTRUCTIONS

PLEASE NOTE THIS INFORMATION WILL BE USED FOR THE DIGITAL PLATFORM WE ARE INTRODUCING IN THE NEAR FUTURE. KINDLY ENSURE ACCURACY (ESPECIALLY ON NAME, REGISTRATION NUMBER AND ID NUMBER) AND FILL IN ALL SECTIONS

1. **Profession** - Clearly state your registered profession

NB

i. Counsellors:

Also state your registered qualification e.g **Counsellor - Certificate**

ii. Radiographers and Ultrasonographers:

➤ Clearly specify if you are Diagnostic or Therapeutic and your ultrasonography registration status, i.e. Student, Ultrasonographer or Specialist) e.g **Therapeutic Radiographer and student**

Ultrasonographer

iii. Psychologists

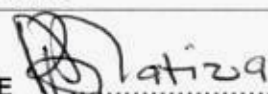
➤ Clearly specify your area of Specialty e.g. **Occupational Psychologist**

2. Save the document in your name and Profession eg. 'Mateka Telmore Radiographer Renewal 2022'

1. BASIC INFORMATION	
Full Name – as on ID (Start with surname)	MATIZA BENIAS
Profession	AMBULANCE TECHNICIAN
AHPCZ Registration Number	A/AT 2095
Phone Number	+263 777 3 946 439
Email Address	colinsaunderspa@tongaat.com
ID - Number	22 – 131384 B 83
2. REGISTERED CATEGORY (TICK WHERE APPLICABLE)- Verify your registered category on your Registration Certificate	
a. Main Register	✓
b. Internship	
c. Provisional	
3. PRACTISING STATUS (TICK WHERE APPLICABLE)	
a. Practising in Zimbabwe	✓
b. Practising Out of Zimbabwe	
i. Maintenance only	
ii. Requires Practising Certificate	
c. Not Practicing	
i. Maintenance Only	
ii. Requires Practising Certificate	
4. CPD POINTS ATTAINED (for selected professions)	38 POINTS
5. PAYMENT DETAILS	
a. Amount Paid and Code of payment	67USD
b. Date of Payment	27 FEBRUARY 2023
c. Payment Platform (Ecocash/CBZ/SCB/Nostro)	NOSTRO

DATE: **21 MARCH 2023**

SIGNATURE



1. Kindly save the document in your name eg. 'Mateka Telmore Radiographer Renewal 2022'

Date	Category	Topic	Stamped/Signed by
25/02/23	8	CARDIAC EMERGENCY	<div style="border: 1px solid red; padding: 2px;"> Captain: [Signature] House: [Signature] Captain: [Signature] House: [Signature] P.O.: [Signature] </div>
28/02/23	7	POISONING MANAGEMENT	
29/2/23	8	CHEST INJURIES	
01/3/23	8	HEART ILLNESS	
15/3/23	7	CONVULSIONS	

Date	Category	Topic	Stamped/Signed by