*International Medical Physics Certification Board*



**Application form and checklist**

**Certification of Individuals by the International Medical Physics Certification Board (IMPCB)**

IMPCB

The International Medical Physics Certification Board (IMPCB) has the objective to support the practice of medical physics through an accreditation programme for national/regional certification boards and an individual certification program for individuals where national certification systems are not available in accordance with the guidelines of the International Organization for Medical Physics (IOMP).

This form and checklist is for individuals who seek certification in one or more of the three subspecialties of medical physics. Please note that IMPCB only offers certification for individuals where national certification systems are not available. Details of the typical knowledge, skills and expertise expected in the exam can be found in the document ‘requirementsV10b.pdf’ available in the IMPCB.org website. The training course series documents for Medical Physics offered by the IAEA (TCS 37, 47 and 50) provide additional useful guidance.

Persons who seek certification by IMPCB are invited to contact IMPCB prior to submitting their application. Please contact

Raymond Wu, CEO of IMPCB ([raykwu@gmail.com](mailto:raykwu@gmail.com)) or

Tomas Kron, Chair of the Accreditation Committee of IMPCB ([Tomas.Kron@petermac.org](mailto:Tomas.Kron@petermac.org))

Payment of the fees must be received prior to being able to sit the exam. Please refer to the impcb.org website for payment information

Before filling in the application please ensure you have accessed the IMPCB webpage (http://www.impcb.org) and studied the requirements for certification documents.

APPLICATION

Date:

Family name: Given name:

Male ( ) Female ( )

Age at time of application:

Home address:

Work address:

Current job title:

Academic qualifications  
B.S. Physics or Engineering or equivalent:  
MS or PhD Physics or Engineering or equivalent:

Email:

Work phone number:

Mobile phone number:

Citizenship:

Government issued picture ID card number (ID should have your photo, such as passport, driver’s license):

Application for examination in (please tick all that apply):

|  |  |
| --- | --- |
| Part I: General Medical Physics​ |  |
| Part II: Radiation Oncology Medical Physics |  |
| Part II: Diagnostic and Interventional Radiological Medical Physics | Not applicable |
| Part II: Nuclear Medicine Medical Physics | Not applicable |
| Part III: Radiation Oncology Medical Physics |  |
| Part III: Diagnostic and Interventional Radiological Medical Physics | Not applicable |
| Part III: Nuclear Medicine Medical Physics | Not applicable |
|  |  |

CHECKLIST

The following items must be submitted using the specified filenames. Applications will be rejected if incorrect filenames are used. Filesize not to exceed 0.5 MB per file:

* Cover letter with contact details and list of submitted items (01\_Cover Letter\_ FamilyName\_GivenName)\*
* Application form – check the specialty and the part(s) of the exam you wish to sit the examination for (02\_Application Form\_ FamilyName\_GivenName)\*
* Signed Agreement Document (03\_Agreement\_ FamilyName\_GivenName)\*
* Curriculum vitae – 2 to 4 pages long single space font size 11 (04\_CV\_ FamilyName\_GivenName)\*
* Undergraduate transcript showing the list of courses taken (05\_Undergrad Transcript\_ FamilyName\_GivenName)\*. If the transcript is not in English, include translation (05a\_Undergrad Transcript in English\_ FamilyName\_GivenName)\*. *(if multiple, 05-01, 05-02, etc.)*
* Advanced degree(s), Graduate school transcripts showing the list of courses taken (06\_Grad Transcripts\_ FamilyName\_GivenName)\*\*. If the transcript is not in English, include translation (06a\_Grad Transcript in English\_ FamilyName\_GivenName)\*. *(if multiple, 06-01, 06-02, etc.)*
* Copy of certificates of undergrad and graduate school degrees (07\_Degree Certificates\_ FamilyName\_GivenName)\*
* Documentation of any other courses and education such as IAEA training etc (08\_Other ET­Course\_ FamilyName\_GivenName)
* Documentation of any relevant publications or presentations (if not part of cv) (09\_Other Pub\_ FamilyName\_GivenName)
* Documentation of other relevant documents such as commissioning reports, audits, reviews etc (10\_Portfolio\_ FamilyName\_GivenName)
* Applicable work experience attested by a qualified medical physicist. Please make sure it is clear that the work experience pertains to the specialty for which examination is applied for (11\_ Attestation by a QMP\_ FamilyName\_GivenName)\*\*
* Other relevant work experience (12\_Other Relevant Work Experience\_ FamilyName\_GivenName)
* Signed declaration by candidate that he/she meets the academic and training requirements described in requirementsV10b.pdf   
  (13\_Signed Declaration\_ FamilyName\_GivenName)\*
* Any other material that is deemed to be helpful in assessing the application (14\_Any Other Materials\_ FamilyName\_GivenName)
* Payment method (15\_Payment method\_ FamilyName\_GivenName)\*

\* Required for all applicants

\*\* Required for all applicants applying for Part II or Part III exams