

**Stage 1: Application for Proposal to Apply
ASSOCIATE REGISTERED NUTRITIONIST**



Applicant Details	
Name	
Address	
Phone	Home: Work: Mobile:
Email	
Date of birth	
Citizenship	<input type="checkbox"/> New Zealand citizen <input type="checkbox"/> Permanent resident of New Zealand <input type="checkbox"/> Holder of a New Zealand temporary work permit

Qualifications	Provide a photocopy of most recent qualification
Institution and date qualification gained	
List majors, thesis topics (if applicable)	

Intention for qualifying period	Please state your intention for the following year to meet the criteria for Associate Registration through post-graduate study or work experience (paid or voluntary). If not currently in employment, state whether you are seeking employment.
Intention for employment or further study	

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Mentor Provide the following details of your mentor.	A mentor is a Registered Nutritionist, Registered Dietitian or nutrition professional who is recognised and respected in the field of nutrition. The Registration Panel may contact the mentor during the application process. The mentor must commit to meeting with the applicant at least once every 3 months, and completing a report at the end of the mentoring period.
Mentor Name	
Address	
Phone	
Email	
Main qualification	
Current (or recent) employment	
Expertise	
Details of proposed mentoring (frequency and form of communication)	

Application Checklist	Send to The Registrar, NZNS, 60 Renwick Place, Nelson 7010 by the closing dates of 28 February and 31 July each year.
Current Member of NZNS	
Application Fee of \$110	Cheque or Internet bank 0207270453705-00, state name and Nut Reg
7 copies of application	
Qualification	One copy of most recent tertiary qualification

DECLARATION

The above information is true and correct.

Signed

Date:

