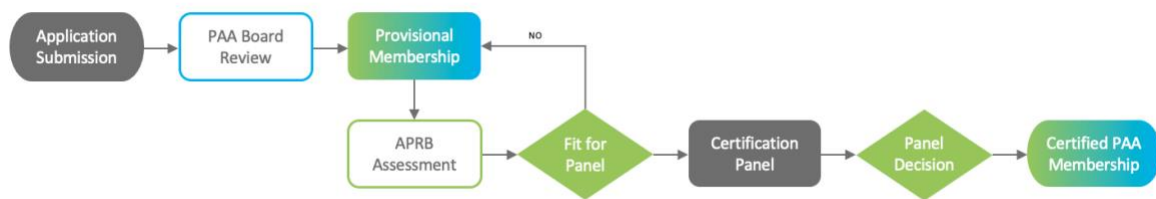


# Certified Membership Application Form

## What you will need to complete this form:

- Proof of Identity
- Evidence of relevant educational qualifications, professional memberships and/or training certificates
- Curriculum Vitae (CV)
- Statement addressing competency standards (Section 7)
- Two professional referees
- Application fee (to be paid at submission)

## Membership & Certification Process



## Membership & Certification Fees

Fee Type	Due Date
Application fee	Payable on application submission. Non-refundable.
PAA membership fee	Payable after PAA Board approval (pro-rata).
Certification panel fee	Payable after APRB approval.

Current fees can be found on the [PAA website](#). Payment is made via the website, and applicants will receive a receipt following payment.

Certification Panels are usually held bi-annually. Standard panels cost \$330 per applicant. An individual certification panel for one person can be arranged and provided for a non-refundable application fee of \$990.

**Please complete each section and provide supporting documentation where requested.**

## 1. Personal Information

**Title:**

**Given Name/s:**

**Family Name:**

**Preferred Pronoun:**

**DOB:**

**Origin:** Please select

**Phone:**

**Email:**

**Street address:**

**Suburb:**

**Town/City:**

**State/Territory:** Please select

**Postcode:**

Please provide certified proof of identity e.g. passport, driver's licence, or birth certificate. 📎 **Please upload a copy when you submit this form.**

## 2. Certification Level

Please indicate the membership and certification level sought:

**Certified Pedorthic Retailer (CRetPed Au)**

**Certified Pedorthist Custom Maker (CPedCM Au)**

## 3. Education and Training

**CRetPed Au** applicants should have completed the [Pedorthic Retailer Courses](#) OR relevant study that aligns with these programs OR aligns with the historical Textiles Clothing and Footwear Training Package - LMT07 Medical Grade Footwear.

**CPedCM Au** applicants should have completed a bachelor level program that is accredited by the PAA e.g., Bachelor of Pedorthics from Southern Cross University (SCU) or equivalent.

Please refer to Sections 3.1 and 3.2 in the [Criteria for Certification in Pedorthics](#) for more information.

Please list relevant education and training, starting with your most recent course of study. 📎 **Please upload copies of certificates when you submit this form.**

Start date	End date	Course duration	Course	Course Provider

#### 4. Employment History and Work Experience

Please list any relevant pedorthic employment or work experience, starting with your current or most recent role. Please refer to Section 3.3 in the [Criteria for Certification in Pedorthics](#) for further information.

📎 **Please upload a Curriculum Vitae (CV) / Résumé when you submit this form.**

Start date	End date	Organisation	Position	Responsibilities

## 5. PAA Mandatory Declarations

Mandatory declarations must be made by all individuals who join the PAA and are legally binding statements where individuals self-assess their suitability for certified membership.

Please refer to the [PAA Mandatory Declarations Policy](#) for more information.

### **Mandatory Declarations:**

I hereby apply for registration as a PAA Certified Member and agree to the publication of my name, contact and registration details in the Register. I confirm that:

- a. I know of no information that could cause the Pedorthic Association of Australia not to be satisfied that I am a suitable person to be a member of the Association.
- b. I have read and understood the [PAA Privacy Policy](#).
- c. I declare that all information provided is true and accurate and agree to notify the Association of any changes in a reasonable period of time.
- d. I have read and agree to abide by and uphold the [PAA Code of Ethics and Standards](#).
- e. I have read and declare that I meet the [Recency of Practice](#) requirements.
- f. I have read and agree to abide by the PAA [Continuing Professional Development \(CPD\)](#) annual requirement.
- g. I am in professional good standing and have no existing restrictions to practice and/or no pending disciplinary actions domestically or internationally.
- h. I have not been convicted by any court in Australia, or elsewhere, of any offence punishable by imprisonment.
- i. I understand that at any time I may be subject to a random audit of the CPD and Recency of Practice program or any of these declarations.

**Applicant Signature:**

**Date:**

## 6. Statement of Key Pedorthic Competencies

Please provide a summary detailing your current understanding and experience (if applicable) relevant to the certification level you are applying for. Competency standards are listed in Section 3.5 of the [Criteria for Certification in Pedorthics](#) and described in detail in the [PAA Competency Standards for Australian Professional Pedorthists](#). **Please upload a statement of key pedorthic competencies when you submit this form.**

## 7. References

Please provide details of two professional referees who can verify the information contained within this application and validate your skills, knowledge, and experience.

➤ [You must have permission from your referee to include them in the application.](#)

### Referee 1

**Full Name:**

**Position:**

**Relationship to applicant:**

**Organisation Name:**

**Street:**

**Suburb:**

**Town/City:**

**State:** Please select

**Postcode:**

**Phone:**

**Email:**

### Referee 2

**Full Name:**

**Position:**

**Relationship to applicant:**

**Organisation Name:**

**Street:**

**Suburb:**

**Town/City:**

**State:** Please select

**Postcode:**

**Phone:**

**Email:**