

COMMISSION OF INQUIRY NO. 1 OF 2005
MEDICAL BOARD OF QUEENSLAND

This is the annexure marked "**MDG-21**" mentioned and referred to in the Statement of **MICHAEL STEVEN DEMY-GEROE** dated this 17th day of May 2005.

"MDG-21"

17 JAN 2003

QUEENSLAND HEALTH

HEALTH PRACTITIONER BOARDS
1 / JAN 2003
RECEIVED

APPLICATION FOR AREA OF NEED CERTIFICATION

This application form must be completed by all sponsoring employers requesting support for a Temporary Resident Doctor (TRD) to enter Australia under a temporary work visa (visa subclass 422).

This form is not required for other visa subclasses.

All sections of this form must be completed to enable prompt processing. A curriculum vitae must be attached if this is a new application.


Please type or print in black ink to enable clear photocopying and send the completed form to the Principal Medical Advisor, Queensland Health. Once signed by the Principal Medical Advisor, a copy of this form will be forwarded to the Medical Board of Queensland and the original form will be returned to the sponsor for attachment to the employers application (form 55) to the Department of Immigration and Multicultural Affairs for visa subclass 422.

| | | | |
|---|--------------------|--|----------------|
| Sponsored doctor: Surname PATEL | | First Name: JAYANT | |
| Sponsor/employer (hospital or practice name): BUNDABERG BASE HOSPITAL | | | |
| Proposed geographical location (town/s): BUNDABERG | | | |
| Is the proposed location: | Remote | Rural | X Other |
| Type of medical practice: | | | |
| Hospital | X | Position (please state)... Senior Medical Officer, Surgery | |
| General Practice | Solo | Group | Medical Clinic |
| | Deputizing Service | | Locum |
| Specialist Practice | Hospital | Private Practice | |
| Specialty (please state) | | | |
| Qualifications: (please state - include date and issuing institution) | | | |
| MBBS - Saurashtra University, India - 1973 | | | |
| MS (General Surgery), Saurashtra University, India - 1976 | | | |
| Postgraduate experience and training (please state): | | | |
| REFER TO ATTACHED CV | | | |
| Total number of years of postgraduate experience: | | | |
| For non-specialist applications, specify postgraduate experience in: | | | |
| emergency medicine | - | months | no |
| Date of Visa/Registration Requested: from: 1 st April 2003 to: 31 st March 2004 | | | |

Is this a: new application extension of existing sponsorship

Note: the sponsored doctor must have agreed to the proposed period of sponsorship or the extension of the period of sponsorship.

Sponsor: I confirm that the details on this application are correct and that I have obtained at least two independent referee reports about the sponsored doctor specific to this application.

Signature of sponsor: 

Name, title and address (please print) DR. KEES NYDAM
A/DIRECTOR OF MEDICAL SERVICES
BUNDABERG BASE HOSPITAL
PO BOX 34
BUNDABERG Postcode 4670

Telephone: (07) 41502210

Fax: (07) 41502029

For Queensland Health Use Only

QUEENSLAND HEALTH

ENDORSEMENT OF AREA OF NEED APPLICATION


The application for Dr JAYANT PATEL

to obtain a visa to work in Australia as a Temporary Resident Doctor: is is not

consistent with the Ministerial Policy on Area of Need.

The application for registration under Section 135/S143A of the Health Practitioners Registration Act 2001 is supported: yes no

Comments:

Signature:  17 11 2003

(Principal Medical Advisor, Queensland Health)

The completed form should be returned to: Principal Medical Advisor
 Health Advisory Unit
 Queensland Health
 GPO Box 48
 BRISBANE QLD 4001
 (07) 3234 0062 (fax)
 (07) 3234 1386

Phone enquiries: