



***Statement of Intention by
Overseas Specialist OR Overseas Specialist-in-Training
to return to country of training on completion of this
short-term training position in Western Australia***

I, Dr _____ confirm that it is my intention to leave Australia at the completion of the attached training position/program.

If my circumstances change, then I understand that I will be required to show evidence to the Medical Board of Western Australia of my progress via one of the following pathways to conditional registration:

- Competent Authority Pathway (AMC Certificate of Advanced Standing);
- Standard Pathway (successful completion of AMC-MCQ); or
- Specialist Pathway (Fellowship or report from College confirming comparability assessment)

Signature: _____

Date: _____