



Change of mentor form

Type: **Endorsement for scheduled medicines - Pathway B**

Profession: **Podiatry**

This form is to be used by registered podiatrists and podiatric surgeons who are undertaking a period of supervised practice under Pathway B of the Podiatry Board of Australia's (Board) *Registration standard: Endorsement for scheduled medicines* and want to advise the Board that they have changed their mentor and are submitting a new signed mentor agreement.

You should refer to the Board's *Guidelines: Endorsement for scheduled medicines* (Appendix 1) for information about mentors. The guidelines can be found on the Board's website www.podiatryboard.gov.au.

Your details

Name	Registration number
<input type="text"/>	<input type="text"/>
Email	
<input type="text"/>	

SECTION A: Details of your supervised practice

What date did you apply to commence supervised practice and submit evidence of your approved qualification in podiatric therapeutics (or equivalent), completion of 15 approved online case studies, and a signed mentor agreement?

What date were you advised in writing that the Board was satisfied that you had met the prerequisites for supervised practice?

SECTION B: Details of your new mentor

What is your new mentor's profession?

Mark only one box

- Podiatrist or podiatric surgeon with endorsement for scheduled medicines - *Provide your new mentor's details below*

Name of your new mentor

Date new mentor agreement signed

Years holding endorsement for scheduled medicines

- Medical practitioner - *Provide your new mentor's details below*

Name of your new mentor

Date new mentor agreement signed

Years of clinical experience in use and prescribing of scheduled medicines



Please attach a copy of your new signed and dated mentor agreement.

Practitioner declaration

I declare that the information in this form is true and correct.

Practitioner signature

Date

**Please post this form with
required attachments to:**

AHPRA
GPO Box 9958
IN YOUR CAPITAL CITY *(refer below)*

You may contact AHPRA on
1300 419 495 or you can lodge an enquiry
at www.ahpra.gov.au

Sydney NSW 2001
Adelaide SA 5001

Canberra ACT 2601
Perth WA 6001

Melbourne VIC 3001
Hobart TAS 7001

Brisbane QLD 4001
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