

THE HEALTH PROFESSIONS COUNCIL OF ZAMBIA

The Health Professions Act, 2009 (Act No. 24 of 2009)

The Health Professions (General) Regulations, 2012

APPLICATION FOR VARIATION OF TERMS/CONDITIONS OF LICENCE					
Licence No.		Shaded fields for official use only	Licence Code		
			Date and Time		
	Information Required	Information Provided		✓	′
1	Holder of Licence				
2	Expiry date				
	(a) Name (s) of applicant	Individual Part	nership Company Partner	ship NGO	
	(b) Type of				
	applicant (c) Business				
3	Address				
		(a)			
		(b)			
	Proposed	(c)			
	amendments	(d)			
		(e)			
4		(f)			
5	Appendices				
	Appendix No. 1	Justification for prop	osed amendments		
	Appendix No. 2	Record of meeting and resolutions			

Receipt number					
Name:					
Signature of applicant	(individual or authorized company representative):				
To be signed by authorized officer					
Name:					
Signature of officer:					