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|  | Application for recognition of the professional qualification of midwife | | ZOZO-01-2**40213** |
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|  | **Afbeelding met tekst, Lettertype, Graphics, wit  Automatisch gegenereerde beschrijving**  **Flemish Care Fund and Care Professions Division**  **T:** 1700 or 32 2 553 1700 from abroad  **E:** [internationaal.niet-universitair@vlaanderen.be](mailto:internationaal.niet-universitair@vlaanderen.be)  www.departementzorg.be | Date received | |
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|  | What is this form used for? |

In compliance with European Directive 2005/36/EC of the European Parliament and of the Council of 7 September 2005 on the recognition of professional qualifications, any person who has gained a diploma within the European Economic Area (EEA) or Switzerland can apply for recognition of his or her professional qualification as a midwife. This Directive only applies to nationals of the Member States of the European Economic Area (EEA) and Switzerland or persons treated as such. The European Economic Area consists of the Member States of the European Union, Norway, Iceland, and Liechtenstein.

This form can also be used when in possession of a non-European diploma which is recognized in an EU Member State.

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|  | Which documents/evidentiary items do you need to submit? |

If you **have a European diploma and you possess the nationality of a European Member State***,* you must enclose the following documents with your application form:

* A motivation letter;
* Proof of nationality or copy of your identity card (recto verso);
* A certificate of good character in your name issued by the competent authority of the Member State of origin or the Member State of last residence. This certificate must not be more than three months old when presented;
* A certificate of good professional conduct issued by the professional organization concerned. This certificate must not be more than three months old when presented;
* Copies of the qualifications (diplomas, certificates, or other evidence of professional training) which give access to the profession of midwife in the Member State of origin.

If you are holder of **a European diploma which is in compliance** with European Directive 2005/36/EC of 7 September 2005 on the recognition of professional qualifications**as well as of a certificate of compliance**, enclose with your application form next **additional** document:

* The certificate of compliance of your diploma with European Directive 2005/36/EC of 7 September 2005 on the recognition of professional qualifications issued by the competent authority of the Member State where you earned your diploma. This certificate concerns diplomas obtained in an EEA country or Switzerland and is usually delivered by the Ministry of Public Health.

If your **European diploma is not in conformity** with European Directive 2005/36/EC of 7 September 2005 on the recognition of professional qualifications and you are therefore **unable to submit a certificate of compliance**, please submit in such case the following **additional** documents (if you do have a certificate of compliance, you do not have to submit the following documents):

* Information concerning the course followed: summary of the subjects taken during your training with credits/ hours per subject (total number of theoretical and practical hours) with details about your work placement (number of hours and work placements), title and summary of your term paper (1 A4 page);
* Your curriculum vitae that covers your professional activities and mentions in which countries those activities have been carried out and/or work certificates;
* Your proof of professional experience as a midwife, as well as details about the experience and the duration of the activities.

If you have a **non-European diploma which is recognized in an EU Member State**, you must enclose the following **additional** documents with your application:

* Official proof of your recognition if you have a non-European diploma and have been recognized as a midwife in another EEA country or Switzerland;

A certificate issued by the competent authority of an EEA country or Switzerland where you obtained recognition and by which you provide evidence of a three years' professional experience as a midwife on the territory of that country. This certificate refers to Article 3, third paragraph, of European Directive 2005/36/EC of 7 September 2005 and is usually delivered by the Ministry of Public Health of the country where you obtained recognition. **Please note:** If you are unable to provide evidence of three years' professional experience, you must first apply to NARIC-Vlaanderen requesting issuance of an equivalence certificate of your diploma;

* Information concerning the course followed: summary of the subjects taken during your training with credits/ hours per subject (total number of theoretical and practical hours) with details about your work placement (number of hours and work placements), title and summary of your term paper (1 A4 page);
* Your curriculum vitae that covers your professional activities and mentions in which countries those activities have been carried out and/or work certificates;
* Your proof of professional experience as a midwife, as well as details about the experience and the duration of the activities.

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|  | Points of attention when completing this application form: |

The original documents supplied in connection with this application will not be returned. Therefore, please send copies of the original documents.

All documents to be attached to your application that are not drawn up in Dutch must be accompanied by a translation into Dutch, except for a certificate of nationality, a marriage certificate (if required for the application) and a certificate of good conduct and morality. These certificates do not need to be translated into Dutch.

**Please note**: The copies of the original documents must be present together with the translations.

Recognition is only issued in Dutch.

If you have designated a third-party to assist you with your application (e.g.: employment agency), you must enclose a power of attorney with your application. In this way, the persons mentioned in the power of attorney can also contact the department about your application.

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|  | How should you submit this application? |

Send your application by e-mail to: [internationaal.niet-universitair@vlaanderen.be](mailto:internationaal.niet-universitair@vlaanderen.be) (PDF format)

Or send your application by post to:

**Department of Care**

Flemish Care Fund and Care Professions Division

Healthcare Professions Team

Koning Albert II-laan 15, box 496

1210 BRUSSELS

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|  | Information for the recognition committee |

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|  | | **The applicant** | | | | | | | | | | |
|  | First and last name | |  | | | | | | | | |
|  | Date of birth | | Day | |  | Month | |  | Year |  |  |
|  | Gender | |  | Male | |  | Female | | | | |
|  | Current nationality | |  | | | | | | | | |
|  | Telephone or mobile number | |  | | | | | | | | |
|  | E-mail | |  | | | | | | | | |

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|  | | **Postal address** | | |
|  | Street and number | |  |
|  | Postal code and municipality | |  |
|  | Country | |  |

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|  | | **Data relating to the diploma** | | | | | | | | |
|  | Country where the diploma was issued | |  | | | | | | |
|  | Date of issue of the diploma | | Day |  | Month |  | Year |  |  |
|  | Countries where you are currently authorized to exercise your profession | |  | | | | | | |

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|  | Signature of the candidate | | | | | | | | |
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|  | |  | | --- | | ***I solemnly swear that I filled this form according to the truth.*** | | | | | | | | | |
|  | Date | Day |  | Month |  | Year |  |  | |
|  | Signature |  | | | | | | |
|  | First and last name |  | | | | | | |