



Human Resources Division Application for Vocational Allowance



See guidelines <http://www.otago.ac.nz/humanresources/policies/voc.html>

Medical Council website <http://www.mcnz.org.nz/FindaRegisteredDoctor/tabid/267/Default.aspx>

Dental Council website <http://www.dentalcouncil.org.nz/cgi-bin/searchohp.pl>

Please forward the original of this approval form to Human Resources

Details of Applicant		
Employee Name		
Employee Number		
Position Title		
Full-time or part/time <i>(if part-time, specify hours or FTE)</i>		
Start date with University		
Department		
Date of registration with the Medical/Dental Council of New Zealand		
Date Specialist Vocational Registration obtained		
Area of specialty		
Recommendations/Approval		
Signature of incumbent		Date:
Signature of Head of Department		Date:
Signature of Dean of School		Date: