**SCHOOL OF HEALTH SYSTEMS AND PUBLIC HEALTH**



**UNIVERSITY OF PRETORIA**

Faculty of Health Sciences

# DOM&H Exam Enrolment and Deregistration Form

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| --- | --- |
| NAME and SURNAME |  |
| STUDENT NUMBER |  |
| PROGRAMME REGISTERED FOR  (DOM&H or DOH) |  |

Registration for examination



|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| CODE |  | Date | Register (Mark X) | Deregister (Mark X) |
| PHM 776 (Part 1) \* | Diploma in Occupational Medicine & Health Exam (Part 1) |  |  |  |
| PHM 777 (Part 2) \* | Diploma in Occupational Medicine & Health Exam (Part 1) |  |  |  |

*\*Please note that the entry criteria to enrol for the PHM 776 & 777 examination are the successful completion of* ***all*** *modules.*

**Students must ensure that they meet these criteria before enrolling for these exams.**

I hereby confirm that I meet all the requirements for enrolment of the exam/s:

Student Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Contact details in case of cancellation: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

All registrations must go through the SHSPH Student Administration Office Tel: +27 (0) 12 356 3292. E-mail: [lesiba.mpati@up.ac.za](mailto:lesiba.mpati@up.ac.za)