



# AUSTRALIAN INSTITUTE OF MEDICAL AND CLINICAL SCIENTISTS

## APPLICATION FOR SKILLS ASSESSMENT

Medical Laboratory Scientist (ANZSCO 234611)

Medical Laboratory Technician (ANZSCO 311213)

Applicants are advised to read the **GUIDELINES FOR SKILLS ASSESSMENT OF OCCUPATIONS** before completing this form.  
**The application cannot be processed if it is incorrect or incomplete.** Please complete the checklist at the end of this form.

### SECTION 1. PERSONAL INFORMATION

Preferred title: Dr  Ms  Mr  Mrs  Miss  Other  .....

Last name / Surname: .....  
*(as shown in your passport)* If no Last name / Surname on your passport, please tick this box

First name(s): .....  
*(as shown in your passport)*

Middle name(s): .....  
*(as shown in your passport)*

Previous name(s) (if applicable): .....  
*Include a colour scan of evidence of name change e.g., Marriage Certificate, or official Name Registration.*

Date of birth: \_\_\_\_ / \_\_\_\_ / \_\_\_\_ Gender: Male  Female  Other   
*DD MM YYYY*

Are you currently living in Australia? Yes  No

### CONTACT INFORMATION OF THE APPLICANT

E-mail Address: .....

Home Address: Line 1: .....

Line 2: .....

Line 3: .....

Suburb / City: .....

State (if applicable): .....

Postcode (if applicable): .....

Country: .....

**Telephone numbers** - *Include country code, area code and extension numbers as applicable.*

Mobile: .....

Work: .....

Home: .....

**SECTION 2. AGENT / REPRESENTATIVE DECLARATION**

Do you, the Applicant, authorise an agent or representative to act for you in matters concerned with this application?

YES  or NO

**AGENT'S / REPRESENTATIVE'S INFORMATION**

Provide the details of a migration agent or other person acting on behalf of the applicant. AIMS will email the skills assessment results letter to the agent's / representative's email address provided in this section.

Agent's / Representative's Name: .....

Company Name (if applicable): .....

MARA Registration Number (if applicable): .....

E-mail Address: .....

Address Line 1: .....

Line 2: .....

Line 3: .....

Suburb / City: .....

State & Postcode: .....

Country: .....

Daytime Phone Number: .....

**AGENT'S / REPRESENTATIVE'S DECLARATION**

I declare that:

- I am the nominated agent authorised by the applicant to correspond with AIMS for all matters concerning this application.
- I understand that the applicant may withdraw this authority in writing at any time.
- I will inform AIMS, in writing, of any changes to the applicant's circumstances while this application is being considered.

Agent's / Representative Signature: ..... Date: ..... / ..... / .....  
DD MM YYYY

**IMPORTANT: Do not insert scanned or photocopied signatures. The Agent's / Representative's signature must be signed in ink.**

### SECTION 3. ENGLISH LANGUAGE ASSESSMENT

Include your valid English proficiency test report.

All applicants **must** provide an English proficiency test report. There are **no** exemptions to this requirement.

AIMS considers the English proficiency test report to be valid if it is received by AIMS, with your skills assessment application, within three (3) years from the test date.

AIMS will **only** accept one (1) of the following English language test reports:

- International English Language Testing System (IELTS) – (Academic or General Training);
- Test of English as a Foreign Language (TOEFL);
- Pearson Test of English Academic (PTE Academic) - **must** be submitted online to the **Australian Institute of Medical Scientists**. Online submission instructions can be found on the [PTE website: pearsonpte.com/scoring](https://pearsonpte.com/scoring);
- Occupational English Test (OET) - **must** be completed in a profession that AIMS considers relevant to medical laboratory science, i.e., Medicine, Nursing, Dentistry, Pharmacy, or Veterinary Science. A copy of your downloaded online *Statement of Results* report must be submitted as a **colour** scan and submitted online to AIMS. Instructions can be found on the [OET website](#);
- Cambridge C1 Advanced Test.

The English language requirements align with the Department of Home Affairs requirements for [Proficient English](#). Please refer to the Department of Home Affairs [website](#) for the required test scores for each of English Language Tests listed above.

Date of test:     /     /       
                  DD   MM   YYYY

Mark one (1) of the testing authority's reports that you are submitting with this application:

- IELTS            Include a copy of your test report.
- TOEFL            Include a copy of test your report.
- Pearson PTE Academic
- Test Score Code: ..... Registration ID: .....
- PTE [Online submission](https://pearsonpte.com/scoring) instructions: ( <https://pearsonpte.com/scoring> )
- OET            Include a copy of your downloaded *Statement of Results* report.
- and also**
- Submit an online copy to AIMS. Instructions can be found on the [OET website](#).
- Cambridge C1    Include a copy of test your report.

### SECTION 4. PRIMARY AND SECONDARY EDUCATION DETAILS

Which years did you start and finish school? Start:     /     /     Finish:     /     /       
                                  DD   MM   YYYY                                    DD   MM   YYYY

Number of years you were at primary school: ..... Number of years you were at secondary school: .....

Country where you obtained your secondary education: .....

**Note:** *Do not* include documentary proof or course transcripts of your primary and secondary education.

## SECTION 5. TERTIARY EDUCATION

Provide details for **all** tertiary level educational qualifications you have completed.

For each qualification you must include:

- A colour scan of the Certificate / Testamur or a Statement of Completion issued by the institution, and
- A colour scan of the complete official academic transcript issued by the institution, **PLEASE READ THE INSTRUCTIONS ON THE LAST PAGE REGARDING OFFICIAL ACADEMIC TRANSCRIPTS**; and
- A black and white scan of the syllabus / unit descriptions issued by the institution for all **relevant** subjects undertaken as part of your tertiary qualification.

**Note:** Graduates of [AIMS Accredited Degrees](#) **do not** need to supply syllabus / unit descriptions.

If you have completed a PhD or MPhil or Masters by Research you must include:

- A colour scan of your Certificate / Testamur or a Statement / Letter of Completion issued by the institution; and
- An abstract of your thesis, which includes your research methods.

### TERTIARY EDUCATION - QUALIFICATION

Qualification title (in English): .....

Qualification title (in original language): .....

Educational Institution Name: .....

Campus: .....

Street Address Line 1: .....

Street Address Line 2: .....

Suburb / City: .....

State & Postcode: .....

Country: .....

Date started: .. / .. / ..  
DD MM YYYY

Date completed: .. / .. / ..  
DD MM YYYY

Studied full-time:  Studied part-time:  Combination of full-time and part-time:

Normal length of full-time course: Years: ..... Semesters: .....

Length of time you took to complete the course: Years: ..... Semesters: .....

Was a period of compulsory practical or clinical experience a requirement of the course? Yes\*  No

\*If **Yes**, length of time involved e.g., years, months, weeks or semesters: .....

## SECTION 5. TERTIARY EDUCATION (CON'T)

Provide details for **all** tertiary level educational qualifications you have completed.

For each qualification you must include:

- A colour scan of the Certificate / Testamur or a Statement of Completion issued by the institution, and
- A colour scan of the complete official academic transcript issued by the institution, **PLEASE READ THE INSTRUCTIONS ON THE LAST PAGE REGARDING OFFICIAL ACADEMIC TRANSCRIPTS**; and
- A black and white scan of the syllabus / unit descriptions issued by the institution for all **relevant** subjects undertaken as part of your tertiary qualification.

**Note:** Graduates of [AIMS Accredited Degrees](#) **do not** need to supply syllabus / unit descriptions.

If you have completed a PhD or MPhil or Masters by Research you must include:

- A colour scan of your Certificate / Testamur or a Statement / Letter of Completion issued by the institution; and
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### TERTIARY EDUCATION - QUALIFICATION

Qualification title (in English): .....

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Educational Institution Name: .....

Campus: .....

Street Address Line 1: .....

Street Address Line 2: .....

Suburb / City: .....

State & Postcode: .....

Country: .....

Date started: .. / .. / ..  
DD MM YYYY

Date completed: .. / .. / ..  
DD MM YYYY

Studied full-time:  Studied part-time:  Combination of full-time and part-time:

Normal length of full-time course: Years: ..... Semesters: .....

Length of time you took to complete the course: Years: ..... Semesters: .....

Was a period of compulsory practical or clinical experience a requirement of the course? Yes\*  No

\* If Yes, length of time involved e.g., years, months, weeks or semesters: .....

### Additional Tertiary Qualifications

If you have additional qualifications that you wish to include, please make a copy of this page, complete the information, and include appropriate colour scans of the documents as detailed above.

**SECTION 6. PROFESSIONAL REGISTRATION / LICENSURE**

If you work in a country that requires registration or licensure then the REGISTRATION field/s must be completed.

Are you registered or licensed with a professional body? No  Yes  (If **Yes**, please provide details below):

**REGISTRATION 1.**

Name of registration or licensure body: .....

Country: .....

Date started:     /     /     Current  OR Date finished:     /     /      
DD MM YYYY DD MM YYYY

How will AIMS be able to verify your membership with the professional association (i.e. email or online verification system)?

.....  
.....

*Include **colour** scans of evidence of registration / licence.*

**REGISTRATION 2.**

Name of registration or licensure body: .....

Country: .....

Date started:     /     /     Current  OR Date finished:     /     /      
DD MM YYYY DD MM YYYY

How will AIMS be able to verify your membership with the professional association (i.e. email or online verification system)?

.....  
.....

*Include **colour** scans of evidence of registration / licence.*

Have you ever been refused a professional license, or registration, or had your professional license, or registration revoked?

No  Yes (if **Yes**, please provide details): .....

.....  
.....





**SECTION 8. MEMBERSHIP OF PROFESSIONAL ORGANISATION(S)**

Are you a member of a professional organisation? No  Yes  (If **Yes**, please provide details below):

1. Professional Organisation Name: .....

Membership Title / Category: .....

Current  or Date finished:        /        /         
DD MM YYYY

How will AIMS be able to verify your membership with the professional association (i.e. email or online verification system)?

.....  
.....

2. Professional Organisation Name: .....

Membership Title / Category: .....

Current  or Date finished:        /        /         
DD MM YYYY

How will AIMS be able to verify your membership with the professional association (i.e. email or online verification system)?

.....  
.....

Have you ever been refused professional membership or had professional membership revoked?

No  Yes (if **Yes**, please provide details): .....

.....  
.....



## CHECKLIST

Please tick the box for each item. Incorrect or incomplete applications cannot be processed. AIMS will notify the applicant of any missing documents. Applicants will be given the opportunity to address issues with their application.

[Please click on this link to download the GUIDELINES](#)

### TRANSLATIONS OF SUPPORTING DOCUMENTS:

- Documents that are not in English must be translated by an **accredited** translator (if outside Australia) or a **NAATI Certified** translator (if translated in Australia).
  - For documents translated to English, include a colour scan of original documents in their original language, in addition to the certified translations.
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### IDENTITY DOCUMENTS

- a colour scan of the bio-data page of your valid passport, or identification card.
  - a colour scan of your birth certificate.
  - one (1) recent good quality headshot photograph taken within the last six (6) months. It must be taken against a plain light-coloured background. Self-taken photographs are **not** acceptable.
  - a colour scan of your proof of change of name (if applicable) such as a marriage certificate or name change registration.
  - a colour scan of at least one (1) or more secondary documents. Acceptable secondary forms of identification may include, but are not limited to:
    - National ID
    - Driver's Licence
    - Social security card
    - Marriage certificate
    - Student identity card
    - Australian visa.
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### ENGLISH PROFICIENCY TEST REPORT

- Copy of your English proficiency test report, dated within the last three (3) years.  
AIMS accepts IELTS (Academic or General), TOEFL, \*OET, \*Pearson PTE Academic, or Cambridge C1 Advanced.  
\* If OET or Pearson PTE Academic, the Test Report must also be submitted to AIMS **online**.
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### TERTIARY EDUCATION. For each qualification, you must include:

#### Proof of Completion:

- A colour scan of your certificate / testamur or statement of completion.

#### Academic Transcripts:

##### If your qualification was completed by an **Australian university**:

- You have submitted your academic transcript via the **My eEquals** system to [applications@aims.org.au](mailto:applications@aims.org.au)

**OR**

- You have included with your application a certified PDF file of your academic transcript created from within the **My eEquals** system.

##### If your qualification was completed by an **Australian Vocational Education and Training (VET)** organisation:

- Prepared your Unique Student Identifier (USI) academic transcript via the [USI Student Portal](#).

**If your qualification was completed overseas:**

- A colour scan of your **official** academic transcript(s) showing: subjects; examination marks / grades and explanation of the grading system, and, where applicable, details of practical hours and clinical placements.
- You have **requested** from the institution you attended to **post** or **courier** a copy of your official academic transcript directly to AIMS in a sealed envelope that is signed and stamped across the back flap by the appropriate official at the institution. If the institution gives you the document to send to AIMS, it must be in a sealed envelope. If the envelope is opened or there is no stamp or signature across the back flap, **AIMS cannot accept the document.**

**Unit Descriptions:**

- A black and white scan of syllabus / unit descriptions issued by the institution of all **relevant** subjects undertaken as part of your tertiary qualification.

**Note:** Graduates of [AIMS Accredited degrees](#) **do not** need to supply a syllabus / unit descriptions.

**Thesis Abstract:**

- PhD / MPhil / Masters by Research qualifications: abstract of thesis, which includes research methods.
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**PROFESSIONAL EMPLOYMENT**

- Colour scans of employment verification letter(s) from your employer(s) for each period of professional experience claimed.
  - Colour scans of your most recent payslip for each period of professional experience claimed.
  - If you are / were self-employed / sole trader: please provide coloured scans of as many official and verifiable documents as possible. This must include at least two (2) client testimonials indicating your primary tasks and responsibilities in carrying out your business. Other documents can include business registration details, evidence of business activity statements, client invoices, bank statements and official taxation evidence.
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**PROFESSIONAL REGISTRATION / LICENSURE (if applicable)**

- Colour scans of official documents for each professional license or registration.
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**PROFESSIONAL MEMBERSHIP (if applicable)**

- Colour scans of official documents for each professional membership.
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**AGENT / REPRESENTATIVE DECLARATION (if applicable)**

- Your agent has signed the declaration.
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**APPLICANT DECLARATION**

- You, the applicant, have carefully read and signed the 'Applicant Declaration' section **in ink.**