



General
Osteopathic
Council

Declaration to the General Osteopathic Council (GOsC) in pursuant to Article 7 of the EC Professional Qualifications Directive (2005/36/EC) concerning the temporary provision of services

1. Identity of Applicant

1.1 Name of Applicant:

First Name

Surname/Family Name

Previous Surnames(s)

1.2 Nationality

- AT BE BG CH CY CZ DE DK EE
 EL ES FI FR HR HU IE IS IT
 LI LT LU LV MT NL NO PL PT
 RO SE SI SK SK

Other(s)

1.3 Passport Number or Identity Card Number

Country of issue Number

Country of issue Number

1.4 Gender

- Male Female

2. Provision of service – application details

2.1 This declaration concerns:

A first provision of services in the United Kingdom (please complete sections 1 to 6)

An annual renewal of the declaration (please complete sections 1 to 4 and 7 to 9)

2.2 Profession

My application concerns the practise of a profession which corresponds to the GOsC Register.

Osteopath

2.3 Previous Applications

Have you previously applied for registration with the GOsC or have you previously been registered with the GOsC?

Yes No

If you answered yes please give your previous registration number:

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3. Profession Concerned

3.1 Profession pursued in your Home State¹

Home State (Country) where you provided your services	Professional Title in the language of that State	Professional Title in English

3.2 Please state the professional activities (i.e. delivery of treatment to a specific patient) for which you will be providing services on a temporary basis in the United Kingdom (list the professional activities).

Professional activities:

1

2

¹ Please indicate the title of the profession in the language of the Member State(s) in which you are established and in English.

3

4

5

4. Legal Establishment in one or more relevant European States:

For the purposes of this declaration, "legal establishment" refers to the pursuit of the profession in compliance with the rules relating to professional qualifications, including the related training conditions, and all the rules specific to the pursuit of the profession. Legal establishment precludes any prohibition, albeit temporary, from pursuing the profession.

4.1 Is this profession **regulated** in the relevant European State(s) in which you are established?

Yes No I do not know

If you answered **no** please move to question 4.4

Any comments:

4.2 Are you **legally established** in the relevant European State(s) in which you are established?

Yes No

If you answered **yes**, in which relevant European State are you legally established?

AT BE BG CH CY CZ DE DK EE
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Other(s)

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If **no**, please explain:

4.3 Are you subject to authorisation or supervision by a competent administrative authority?

Yes No

If your answer is **yes**, please indicate which one, giving the relevant contact details and your registration or licence number. Please provide supporting evidence:

Name of Competent Authority

Contact details

Your registration / licence no.

4.4 If the profession referred in 3.1 is **not regulated** in the relevant European State(s) in which you are established and you have not undergone regulated education and training for the profession in 3.1 have you acquired professional experience for that profession of at least **two years** during the last ten years within the territory of that State(s)?

Yes No If you answered **yes** please provide supporting evidence.

Any comments:

4.5 Do you belong to a professional association or an equivalent body?

Yes No

If your answer is yes, please indicate which one, giving the relevant contact details and your registration number.

Name of professional association

Contact details

Your registration/licence number.

