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MIGRATION PROCEDURE CYPRUS

| Competent Authority: | Competent Authority: CYPRUS REGISTRATION BOARD Contact Details: Address: P.O BOX 16295 NICOSIA 2087 CYPRUS Contact Person: MRS IRIS ROUSOU (PRESIDENT) Telephone: 00357 99533379 Fax: |
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| | Fax: Email: cyprusphysioregistration@cytanet.com.cy Web: |

| Applications should be sent to: | MINISTRY OF HEALTH Registrar of physiotherapists |
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| | 1 P rodromou & 17 Chilonos St. 1449 Nicosia Cyprus |

| The Application | |
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| The Applications Enclosures: | Application for registration in the Cyprus register of physiotherapists (PART A & PART B) as it is provider by the The physiotherapists registration laws 1989 TO 2005 |
| | Degree/ Diploma Certificate of birth Certificate of marriage for married non Cypriots Detailed curriculum of studies Certificate of practical training (for new qualified) |
| | Certificate of clean criminal record(a period of three months from the date of issue must not have passed) |
| | • The Board may request a certificate of recognition of the professional title of studies by the competent authorities of the country of studies |
| | Passport copy |
| | Licence to practise the profession (Certificate of term of working experience) |
| | Certificate of employment by a Cypriot employer (if provided) |

| Further Requirements | |
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| (i.e. Language Aptitude, Test Recognition) | Knowledge of Greek language |
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Rue de Pascale, 36, B -1040 Brussels, BELGIUM Tel.: +32 2 2315063 Fax: +32 2 2315064 http://www.physio-europe.org info@physio-europe.org

Page 1 of 2

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| Migrants in Education: | Direct communication with the education institute. |
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| Additional Information: | |

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Page 2 of 2