



CORRESPONDING MEMBER APPLICATION FORM

Instructions

This form is for applications for **Corresponding Membership** only. Corresponding Membership is for practising urologists who are full members of another recognised Urological Association in a country other than Australia or New Zealand and who have an interest in urology in Australasia.

Your application will be considered by the Board of Directors at the first meeting which falls immediately after your completed application has been received by USANZ. The Board meets four times a year, typically in February, April, August and November. You will receive confirmation of your membership status and an invoice for membership fees shortly after the meeting.

Complete this form and submit by email to: secretary@usanz.org.au along with your CV and supporting documentation. Hardcopy submissions can be posted to: USANZ, Suite 512 Eastpoint, 180 Ocean Street, Edgecliff NSW 2027.

- Your application must be accompanied by a letter from an international urological association (other than Australia or New Zealand) recognised and approved by USANZ in its discretion, from time to time, endorsing the application and confirming the your current membership category and membership status.
- Members of the Urological Association of Asia (UAA) may be entitled to a discounted rate. Proof of UAA current membership must be included in your application.

Type of Membership

I am applying to become a Corresponding Member of USANZ

I am a full member of the UAA and wish to apply for the discounted rate.

Your Details (please note: your postal address is published in the USANZ member directory)

Title: First Name(s):..... Last Name:.....

Postal Address

.....
.....

City: State: Postcode:

Country:

Tel (Hm) Telephone (Wk): Telephone (Mob):

Email:

Qualifications

Medical Registration

Jurisdiction*: (* ie country/state/organisation governing your registration as a urological surgeon)

Medical Registration Number:

Additional information (Please attach a separate sheet if you need more space)

Date of Birth: **Gender:**

University and Degree(s):

Year Awarded	Name of University and Degree Awarded
.....
.....

Other Post Graduate Qualifications (include years)

Year Awarded	Name of Other Post Graduate Qualification
.....
.....
.....

Hospital/ Scientific Positions held in last 5 years

Year	Position Held
.....
.....
.....

Training posts in Urology (if any).

Year	Details including the name of Urologist in charge
.....
.....

Research publications relevant to urology : (list)

.....

.....

.....

Current hospital appointment(s)

Commencement Date	Name of Hospital and position held
.....
.....

Do you practise Urology exclusively? (select yes or no from dropdown)

Privacy statement and consent

When you sign up to become a Member, USANZ collects and stores your personal information in order to manage your membership, send you information about USANZ events, urological news, and to liaise with external providers to facilitate your access to forums such as USANZ Communities. By applying for membership you are explicitly giving consent to receive the USANZ enews, Uroscope and messages from the staff or USANZ officers and for USANZ to store and manage your information for activities related to your membership. You may elect to unsubscribe from specific email lists by clicking the “unsubscribe” option at the footer of the emails or by sending a request to secretary@usanz.org.au. Questions or concerns about your personal information should also be directed to this email address.

Some membership categories are entitled to benefits provided by external organisations who are based overseas. Specifically, USANZ funds the membership fee of the European Urological Association for Full Members, Associate Urological Members and Provisional Members. USANZ also facilitates access to BJUI Knowledge based in London which requires us to share your personal contact and identifying information. To access these benefits, you are required to give your consent to USANZ sharing your information with those organisations. You can amend your consent at any time by updating your individual member profile through the USANZ website.

Applicant’s Declaration

If you are not, or do not wish to register registered for digital signature, please print, sign and scan form.

I am eligible for membership of the Society in the Class of Membership shown. I agree to be bound by the Constitution of the Urological Society of Australia and New Zealand. The Constitution is available for download by clicking [here](#).

(Signature)

.....
(Date)

Endorsement Option A - application supported by two current Full Members or Fellows of USANZ

We, the undersigned, are members of the Urological Society of Australia and New Zealand and we testify that the above named applicant is personally known to us and is in every way a suitable candidate for election.

.....
(Signature)

.....
(Date)

.....
(Signature)

.....
(Date)

Endorsement - Option B

(letter of support from international urological organisation)

Where the applicant is unable to secure the endorsement of existing USANZ members as set out under Endorsement Option A, the applicant may submit a letter from an international urological association (other than Australia or New Zealand) endorsing the application and confirming the applicants current membership category and membership status.

CHECKLIST USANZ Membership Application Form - Corresponding Membership

Before you submit your application please ensure that you have:

- * Read the requirements for the membership categories as set out in the constitution to ensure you are applying for the correct class of membership
- * Signed the application form
- * Application has been signed by two USANZ members OR a letter from an international urological association confirming your membership status and category is attached.
- * Your CV is attached to your application
- * You are aware that, if your membership application is approved, you will be invoiced for an annual membership at the rates set out at the link below.

- * If you are applying for the UAA discounted rate, you must attached proof of your UAA Full Membership, ie subscription invoice, letter of membership currency from the UAA.

Current Membership Subscription Fees - See Join USANZ Page

SUBMITTING YOUR APPLICATION

You can submit your application by emailing it to: secretary@usanz.org.au.

MEMBERSHIP

14. The subscribers to this Constitution and such other persons as shall have agreed to be bound by this Constitution, shall be admitted to membership in accordance with the provisions of the Constitution, and none others, shall be members of the USANZ and shall be entered in Register accordingly.
15. Membership of the USANZ shall be limited to persons who are or have been engaged in the practice of urology, or take a special interest in urology and there shall be the following classes of membership which are limited as follows:

(A) FELLOW:

To persons who are Full Members of the Society who have in the opinion of the Board of Directors rendered distinguished service to the Society and the practice of urology.

(B) FULL MEMBER:

To surgeons resident in Australia or New Zealand and who practise exclusively or having retired and at the time of retirement having practised exclusively the specialty of urology and who hold the diploma of Fellowship of the Royal Australasian College of Surgeons (FRACS) in Urology or a degree or diploma whose training requirements are judged by the Board of Directors to be the equivalent of the FRACS (Urology), provided that except in cases judged by the Board of Directors to be special, an applicant for Full Membership must be a Trainee Member of at least three years standing or a Provisional Member of at least three years standing.

(C) PROVISIONAL MEMBER

To surgeons resident in Australia or New Zealand and who, with a view to practising or continuing to practise the specialty of urology and who hold a diploma of Fellowship of the Royal Australasian College of Surgeons in Urology (FRACS (Urology)) and who have been a trainee member for fewer than three years or who hold a degree or diploma whose training requirements are, in the opinion of the Board of Directors, the equivalent of the FRACS (Urology), provided that except in cases judged by the Board of Directors to be special, no person shall be a provisional member for more than five years.

Note – International Medical Graduates (IMGs): IMGs working under oversight may have their 'oversight time' as an Associate Urological Member (AUM) recognised, so that this period is taken off the three year period as a Provisional Member (PM). (*Board of Directors Resolution November 2009*)

(D) TRAINEE MEMBER

To registered medical practitioners resident in Australia or New Zealand and who are formally associated with the advanced training programme of the Royal Australasian College of Surgeons in Urology leading to the diploma of Fellowship of the Royal Australasian College of Surgeons in Urology and have not been awarded that diploma.

(E) CORRESPONDING MEMBER

To practising urologists who are full members of another recognized Urological Association in a country other than Australia or New Zealand and who have an interest in urology in

Australasia.

(F) ASSOCIATE UROLOGICAL MEMBER

To registered medical practitioners resident in Australia or New Zealand and who have some approved qualification or qualifications in urology that in the opinion of the Board of Directors is not equivalent to the diploma of Fellowship of the Royal Australasian College of Surgeons in Urology and whose medical practice is at least two-thirds in the field of urology.

Note – International Medical Graduates (IMGs): IMGs working under oversight may have their 'oversight time' as an Associate Urological Member (AUM) recognised, so that this period is taken off the three year period as a Provisional Member (PM). (*Board of Directors Resolution November 2009*)

(G) ASSOCIATE SCIENTIFIC MEMBERS

To residents of Australia and New Zealand who are:

- i) scientists who do not practise urology but who are actively interested in some phase or aspect of urology; and
- ii) registered medical practitioners who are a member of an approved non-urological medical society in Australia or New Zealand and who have an interest in continuing education in urology.

(H) HONORARY MEMBER

To persons who, in the opinion of the Board of Directors, have made a distinguished contribution to urology or the Society

(I) SENIOR MEMBER

A Member in the class of Full Member or Associate Urological Member or Associate Medical Member or Associate Scientific Member may be classified as “Senior Full Member”, “Senior Associate Urological Member”, “Senior Associate Medical Member” or “Senior Associate Scientific Member” respectively upon successful application by the member to the Board of Directors after the member has fully retired from practice or has had thirty years membership in their respective class or in other cases as determined by the Board of Directors.

- 16. Every application for membership or change of membership shall be accompanied or supported by such evidence as the Board of Directors may require of the qualifications of the applicant to be a member of the class to which he or she seeks admission. The Board of Directors shall have the power to reject or suspend an application for any class of membership or change of membership without assigning any reason thereof.
- 17. An application for admission to any class of membership of the USANZ must be signed by the applicant and the admission of the applicant to membership must be proposed and then seconded by two members of the USANZ who shall be Full Members or Fellows of the USANZ or a Full member and a Fellow of the USANZ.