



**Hong Kong Institution of Physicists in Medicine**  
**香港醫學物理學院**

**Application for Professional Certification through Exemption**

**Personal and Contact Details**

HKIPM Membership Number .....

Surname ..... Given Name .....

Institution .....

Email Address .....

Contact Phone Number .....

**Medical Physics Specialty** (Please '√' as appropriate)

Radiation Oncology Physics

Medical Imaging Physics

**Professional Medical Physics Certification Awarded**

Certification Body .....

Medical Physics Specialty .....

Date of Award .....

## Declaration by Applicant

I declare that all the information given in this application and in the attached supplementary documentations if any is true and correct to the best of my knowledge.

Signature..... Date.....

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## For Official Use Only

Date of Receipt.....

Application Form  Complete  Incomplete

Supplementary Document  Submitted  Not Submitted

Application Fee  Submitted  Not Submitted

Application Status  Accepted  Declined

Remarks.....

## Notes for Applicants

1. Who may apply?
  - (a) HKIPM Members who have been granted professional certification in either Radiotherapy Physics or Imaging Physics by a professional medical physics certification body recognized by HKIPM.
  - (b) Members may apply for certification in the specialty in which he/she is granted certification by a HKIPM recognized professional medical physics certification body.
  - (c) Applicants shall be practicing medical physics in medicine.
2. A Member who has been granted professional certification in either Radiotherapy Physics or Imaging Physics by a professional medical physics certification body recognized by HKIPM, may be granted professional certification by HKIPM on condition that the Member passes a professional interview conducted by the Certification Board.
3. Each application shall be considered by the Certification Board on a case by case basis.
4. The decision of the Certification Board shall be final. The Certification Board is not obliged to give any reasons for its decision.
5. Members granted the status of Professional Certification shall receive a certificate and shall have his/her name entered in the register of Certified Medical Physicists and shall be posted on the HKIPM website ([www.hkipm.org](http://www.hkipm.org)).
6. Application fee
  - (a) HKD 500 per specialty.
7. Support documents to be submitted with the application
  - (a) Completed application form.
  - (b) Proof of present employment as practicing medical physics in medicine.
  - (c) Certified true copy of the certificate granted by a professional medical physics certification body.
  - (d) Any other supporting documents as may be required by the Certification Board for assessment of the application.
8. Completed application form with documentary proof and a cheque of the application fee shall be submitted to the Secretary of HKIPM:  
  
Dr. Kimi YANG,  
c/o Medical Physics Department,  
3/F, 3 Tung Wong Road, A Kung Ngam,  
Shau Kei Wan, Hong Kong.
9. Please refer to ‘A Scheme for Professional Certification of Medical Physicists’ which can be downloaded from HKIPM website ([www.hkipm.org](http://www.hkipm.org)) for details.
10. For enquiries, please contact the Secretary of HKIPM, Dr. Kimi YANG, at ‘secretary@hkipm.org’.