

**CONFIRMATION OF GOOD STANDING**

Prior to applying for Fellowship, please confirm that you are in good standing in relation to the following:

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| a. | Are you currently registered to practice with your country’s licensing authority | Yes |  | No |  |
|  |  |  |  |  |  |
| b. | Are you subject to any conditions on your registration?  If yes, please give details: | Yes |  | No |  |
|  |  |  |  |  |  |
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|  |  |  |  |  |  |
| c. | Are your College membership fees up to date? | Yes |  | No |  |
|  |  |  |  |  |  |
| d. | Do you hold any roles or positions that might enhance or complement your prospective College work? | Yes |  | No |  |
|  | If yes, please describe: |  |  |  |  |
|  |  |  |  |  |  |
|  | | | | | |
|  |  |  |  |  |  |
| e. | In the past two years, have you accepted any funds, fees, gifts, expenses, etc or other payments or similar from an organisation which might gain or lose from your involvement with the College? | Yes |  | No |  |
|  |  |
|  | If yes, please describe: |  |  |  |  |
|  |  |  |  |  |  |
|  | | | | | |

I confirm that if any of the information given at the time of my election or appointment should change I will notify the College immediately

I understand that if a complaint is made against me under the College’s Complaints Procedure and that complaint is upheld, I may be removed from appointed office at the discretion of the Honorary College Officers.

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| --- | --- | --- | --- |
| Signature |  | Date |  |

*(Please type if emailing)*

The College’s Data Protection Statement can be viewed at: <https://www.rcpsych.ac.uk/about-us/legal/data-protection/members-privacy-notice>

Please send the completed form to [MembershipServices@rcpsych.ac.uk](mailto:MembershipServices@rcpsych.ac.uk) by **15 September 2024.**