

Application for Recognition of Qualifications and Professional Registration of Diagnostic and Therapeutic Technician, according to articles 4, 5 and 7 of Decree-Law n.º 320/20 of 11th of August

(For EU citizens)

President of the Executive Board
Administração Central do Sistema de Saúde, I.P.
Parque de Saúde de Lisboa, Ed. 16
Av. do Brasil n.º 53
1700 – 063 Lisbon

Name: _____

Nationality: _____

Date of Birth: _____ Identity Card/Passport n.º: _____

Tax Identification Number: _____

Address: _____

Zip Code: _____ City: _____

Phone/ Mobile Number: _____

Email: _____

Qualified with diploma/certificate _____,

issued in (date) _____, (city) _____.

Intending to work in Portugal as _____ (identify activity),

I hereby require the recognition of the afore mentioned diploma / certificate, under the Directive 2005/36 / EC of the Parliament and of the Council, of 7th of September, transposed to domestic law n.º 9/2009, of 4th of March. Additionally, I hereby request the recognition of my professional title as _____, as well as my professional registration, under the terms of articles 4, 5 and 7 of Decree-Law n.º 320/20 of 11th of August.

Signature: _____

Date: _____

Failure to complete this form may render your application invalid.

Notes

Anexes:

- Certified copy of the diploma / certificate of the professional qualification attained;
- Document issued by the competent authority of the Member State of origin or the Member State from which the foreign national comes from, proving that the applicant fulfils the requirements laid down by that State for the same profession;
- Copy of the Identity Card or Passport;
- Study Plan of the course issued by the school (subjects, hours and credits);
- Documents proving professional experience (optional);
- Photo, original and updated;
- Copy of the Tax Identification Number
- Exclusively for Speech Therapist: Send original statement issued by a speech therapist (duly authorized for practice in Portugal) proving the inexistence of speech and/or voice disturbance and dominates the Portuguese language spoken or written.
- Proof of payment (50,00 euros)

Payment methods:

- Bank transfer to the following NIB/IBAN (indicating the name of the professional who requests the recognition of qualifications)

NIB:	078101120000000840770
IBAN:	PT50078101120000000840770

- Proof of payment must accompany the application to be sent to ACSS;
- It won't be accepted any cash payments sent by post.

After conclusion of the professional recognition and registration, the information on the name and professional area will be included in the Diagnostic and Therapeutic Technician listing, available at www.acss.min-saude.pt. You may exercise the right of opposition provided for in the Law on Protection of Personal Data, Law no. 67/98, of 26th of October.