

**Registered Professional Hygienist Registration and Examination Board  
Hong Kong Institute of Occupational and Environment Hygiene**

**Application for Registered Professional Hygienist (RPH)**

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

COMPANY \_\_\_\_\_

POST \_\_\_\_\_

TELEPHONE: Work \_\_\_\_\_ Home \_\_\_\_\_

FAX: \_\_\_\_\_ e-mail: \_\_\_\_\_

**MEMBERSHIP OF HKIOEH :**

	YEAR
<input type="checkbox"/> FELLOW MEMBER	_____
<input type="checkbox"/> MEMBER	_____
<input type="checkbox"/> ASSOCIATE MEMBER	_____
<input type="checkbox"/> AFFILIATED MEMBER	_____

**PROFESSIONAL QUALIFICATIONS TO SUPPORT THE APPLICATION**

- Written result of the Registered Professional Hygienist examination (Examination Board of HKIOEH) (Please state the year of examination if relevant: \_\_\_\_\_).
- Any of the Professional Occupational Hygiene Examinations recognised under the current list of NAR Committee of IOHA. Please state the examination body: \_\_\_\_\_.
- Oral result of the Registered Professional Hygienist examination (RPH Examination Board of HKIOEH) (Please state the year of examination if relevant: \_\_\_\_\_).

Please provide photocopy of certificate/ relevant documents of your professional qualifications

Signature \_\_\_\_\_

Date \_\_\_\_\_

REMARK: By signing the document, the successful applicant would be abided by the Code of Ethics under the Hong Kong Institute of Occupational and Environmental Hygiene (HKIOEH).