Application for
Clinical Coder Certification

Student Code

Title

Given Names

Surname

Female ☐ Male ☐ Date of Birth / /19

Home Address (or Post Office box if applicable)

State

Postcode

Country

Telephone ( ) Fax ( )

Mobile

email

Business Address

Position

Department

Organisation

Address

State

Postcode

Country

Telephone ( ) Fax ( )

email

Preferred mailing address ☐ Home ☐ Business

Preferred email ☐ Home ☐ Business

I am currently coding ☐ Yes ☐ No

Size of hospital ☐ over 350 beds ☐ 100-350 beds ☐ under 100 beds
Examination dates (please tick)

Examinations are held on the first Monday in February, June and November each year.
If the examination date is a public holiday then the examination should be taken on the next business day.
Applications for examination with payment, if applicable, and supervisor nomination form must be received no later than
- February examination: 13 December
- June examination: 30 April
- November examination: 1 October
Applications received after the specified date for the examination will not be processed

- February
- June
- November
- Edition
- 6th
- 7th
- 8th
- 10th

Payment

- I received the Statement of Attainment for HLTADM007 Complete highly complex clinical coding or Certificate of Achievement for Advanced ICD-10-AM, ACHI and ACS within the last twelve months $00.00
- I received the Statement of Attainment for HLTADM007 Complete highly complex clinical coding more than twelve months ago (Australia-based candidates) $185.00
- I received the Certificate of Achievement for Advanced ICD-10-AM, ACHI and ACS more than twelve months ago (Overseas candidates) $215.00

Australia-based candidates cheque or money order payable to Health Information Management Association of Australia Limited
Overseas candidates bank draft in Australian dollars payable to Health Information Management Association of Australia Limited
EFT payment (phone 61 2 9887 5898 or email education@himaa.org.au for details)

Please note a surcharge of 1.8% applies to payments by credit card

- MasterCard
- Visa
- American Express

Card No. _____________________________
Expiry Date _____________________________
Cardholder’s Name _____________________________
Cardholder’s Signature _____________________________
Organisation’s Name (If business credit card) _____________________________

- Please invoice my organisation

Contact person _____________________________
Phone ( ) _____________________________
Organisation _____________________________
Billing address _____________________________
email _____________________________

Where to send your application and payment

Student Services and Administration Officer HIMAA Education Services Locked Bag 2045 North Ryde NSW 1670 Australia
Phone 61 2 9887 5898 Fax 61 2 9887 5895 email education@himaa.org.au
If sending by courier please use our street address Level 1 51 Wicks Road North Ryde NSW 2113 Australia
Please use black or blue pen

<table>
<thead>
<tr>
<th>Title</th>
<th>Given Names</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td>Surname</td>
<td></td>
</tr>
</tbody>
</table>

**Business Address**

<table>
<thead>
<tr>
<th>Position</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Department</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Organisation</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Address</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>State</th>
<th>Postcode</th>
<th>Country</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Telephone</th>
<th>Mobile</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Email</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
</tr>
</tbody>
</table>

**Mailing Address for examination paper if different to above address**

<table>
<thead>
<tr>
<th>State</th>
<th>Postcode</th>
<th>Country</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Venue Name if different to business address**

<table>
<thead>
<tr>
<th>Venue Name</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Address</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>State</th>
<th>Postcode</th>
<th>Country</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Examination Supervisor – Conditions

1. The duration of the examination is two hours plus fifteen minutes' reading time and must be held on the scheduled date. Examinations are held on the first Monday in February, June and November. If the examination date is a public holiday the examination should be taken on the next business day.

2. The time of the examination should be arranged between you and the candidate.

3. You must provide a quiet room for the examination and a table large enough to accommodate the five coding volumes required by the candidate to complete the examination.

4. You must be present at all times during the examination.

5. An email confirming your approval as supervisor with instructions and rules attached will be sent after receipt of both the application for examination and supervisor nomination form.

6. Examination papers will be sent to you in a sealed envelope. If you do not receive the examination paper by the date specified in our email please contact the Student Support and Administration Officer HIMAA Education Services.

7. The candidate may only use those extra materials specified in the rules for the examination.

8. Fifteen minutes before finishing time the candidate should be warned of the time. At the finish candidates must stop writing immediately and hand in the examination paper and any paper on which they have written.

9. Worked and unworked papers and the completed supervisor’s record should be sealed in the express post envelope provided (Australia-based candidates only) and mailed to HIMAA Education Services on the same day as the examination takes place. Overseas supervisors are required to return the examination paper by registered airmail or courier on the same day as the examination takes place.

10. The examination paper must not be photocopied, copied manually or reproduced in whole or part by any means.

I have read the above conditions and agree to act as examination supervisor for

________________________________________________________________________ on ________________

Signature _______________________________ Date ________________

Please return this form to the candidate applying to sit the examination

For further information please contact
Student Support and Administration Officer
HIMAA Education Services
Locked Bag 2045
North Ryde NSW 1670 Australia

Phone 61 2 9887 5898 Fax 61 2 9887 5895 email education@himaa.org.au