

# NURSES COUNCIL OF ZIMBABWE

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## **REQUIREMENTS FOR APPLICATION FOR CHANGE OF NAME**

<b>1.</b>	<b>Typed application letter (signed by applicant) addressed to the Registrar Nurses Council of Zimbabwe</b>  <b>N.B. Letter to include the applicant's Registration Number, Email address and contact number(s)</b>
<b>2.</b>	<b>Certified copies of the following documents:</b> a) <b>Current Practising Certificate</b> b) <b>Birth certificate</b> c) <b>National Identity card</b> d) <b>Marriage certificate or Notarial Deed or other relevant document</b>
<b>4.</b>	<b>Proof of payment of the prescribed non- refundable processing fee</b>

- N. B:**
- 1. Council does not accept inadequate and incomplete documents**
  - 2. Turnaround time is 3 months.**
  - 3. The application lapses after 6 months (if Council requests for additional information and the applicant does not provide it) therefore the applicant has to reapply after this period**