

Provider Directory Data authorised recipient data release application or renewal (M0003)

When to use this form

Use this form when you need to apply for or renew an authorised recipient's access to your organisation's data and to receive correspondence.

This form must be signed by the Chief Executive Officer or the Public Officer of an incorporated body (for example, Health Sector Entity Representative).

The authorised recipient will be authorised by Services Australia and your organisation to access data and to receive correspondence.

For more information

You can now access the Provider Directory data via Health Professional Online Services (HPOS).

To access the Provider Directory data via HPOS, you will need to register for an individual Provider Digital Access (PRODA) account before submitting this application.

For information on PRODA account registration, go to servicesaustralia.gov.au/proda or call **1800 700 199** Monday to Friday, 8 am to 5 pm Australian Western Standard Time.

Note: Call charges may apply.

Filling in this form

- Use black or blue pen
- Print in BLOCK LETTERS

Application or renewal

1 Is this a new application or a renewal?

New application

Renewal Give User ID details

Organisation details

2 Name of organisation

3 Address

 Postcode

4 Business area

Tick one only

Administration and/or Finance

Pathology and/or Radiology

Information System

Other Give details

5 PRODA Registration Authority (RA) number

Authorised recipient's contact details

6 Mr Mrs Miss Ms Other

Family name

First given name

7 Position held

8 Daytime phone number

Mobile phone number

Fax number

Email

9 Authorised recipient's signature

Date

continued on next page

