

Dear Sir/Madam,

הנידון: הודעה לתיירים המבקשים לגשת לבחינות הרישוי הממשלתיות Re: Important Notice for Tourists Who Have Requested to Take The Governmental Licensing Exams

According to Israeli law, in order to receive professional certification in medical professions from the Ministry of Health, one must either be a citizen or a resident of Israel.

The Ministry's General Director has authorized that medical professionals from abroad will be allowed to take these Governmental Exams on a tourist visa.

A passing score on the Exam – will only be valid for 3 years.

Medical professionals who have passed the Governmental Exam but do not have the civil status (citizen or resident) required by law within the above time frame, will be required to retake the exam in order to receive professional certification from the Ministry of Health in their professions.

In order to receive approval to take the Governmental Exams in these professions, you must sign the attached affidavit before a licensed Israeli lawyer, and submit it to our office within 30 days prior to the exam.

Sincerely,

Division of Medical Professions Ministry of Health

Division of Medical Professions Ministry of Health call.habriut@moh.health.gov.il **Tel**: * 5400 **Fax**: 02-5655969 39 Yirmiyahu St. Jerusalem 9446724



האגף לרישוי מקצועות רפואיים משרד הבריאות ת.ד.1176 ירושלים 91010 call.habriut@moh.health.gov.il 02-5655969 : פקס *5400 טל:

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AFFIDAVIT - תצהיר לתייר

I, the undersigned ______, holder of a ______ passport, Passport Number ______, hereby declare that I am aware that, beyond the letter of the law, I have been granted approval to sit for the Governmental Examination in _____. If I pass the Examination successfully, but do not hold Israeli Citizenship or Residency within 3 years, the Examination results will become null and void.

I understand that if I do not hold Israeli Citizenship or Residency within 3 years, the validity of the Examination will expire, and I will once again be required to pass the Examination successfully.

I am aware that the permission to take a Governmental Examination is subject to all the conditions applying to all licensed professionals in the field of ______, in the State of Israel.

I hereby declare and agree in advance, that I will have no claim whatsoever against the State or any public or private institution whatsoever, should the validity of the Examination be cancelled after 3 years.

Signature: _____ Date:

Signed before me: _____, Adv.

Who hereby affirms that on _____, there appeared before me in my office

Mr./Mrs. _____, whom I identified according to Passport Number _____, and after cautioning him/her to tell the truth and that he/she would be liable to the penalties prescribed in the law if s/he failed to do so, approved the accuracy of the above declaration and signed same.

Signature and Stamp of Attorney: Date: _____

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