



# Human Genetics Society of Australasia

ARBN 076 130 937 (Incorporated Under the Associations Incorporation Act)  
The liability of members is limited

## Appendix 3

### Course Accreditation for Master of Genetic Counselling: Notification of Variation / Change Form

Use this form to notify the Board of Censors for Genetic Counselling of a change to the delivery of an HGSA Accredited Master of Genetic Counselling Program. A separate form should be submitted for each independent (unrelated) change to be documented. Multiple forms can be submitted in one submission. Only one payment is due per submission.

Submit this form, supporting documentation and evidence of payment to the HGSA Genetic Counselling Course Accreditation Committee via email [gcaccreditation@hgsa.org.au](mailto:gcaccreditation@hgsa.org.au) and copy to [secretariat@hgsa.org.au](mailto:secretariat@hgsa.org.au).

Payment can be made by bank transfer to the following account:

Bank: NAB

SWIFT Code: NATAAU3303M

Account Name: Human Genetics Society of Australasia Incorporated

Branch Number (BSB): 082 282

Account Number: 71 909 2911

Reference: *University Name*

Date of Request	
Name of Program	
Program Director/Primary Contact	
Email	
Phone Number	

Projected date and period of time for the change to be implemented:

Reference the section(s) of the HGSA Course Accreditation for Master of Genetic Counselling Policy to which the changes apply:

Provide a brief overview of the rationale for the request:

HGSA Course Accreditation for Master of Genetic Counselling.

Policy Number 2023 PL02

Dated: 31 March 2023

#### All correspondence to

PO Box 6012, Alexandria, NSW 2015

Telephone 02 9669 6602

Fax 02 9669 6607

[secretariat@hgsa.org.au](mailto:secretariat@hgsa.org.au)

[www.hgsa.org.au](http://www.hgsa.org.au)

ABN 17 076 130 937



Describe how faculty will be informed and supported:

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Describe how students will be informed and supported:

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Resources required to implement, support, and sustain (including budget impacts):

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Interim or transitional arrangements:

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Impact on the Program over the accreditation period:

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Describe how outcomes and effectiveness will be assessed and evaluated:

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Interim or transitional arrangements:

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List of supporting documents attached:

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