



# FIJI TEACHERS REGISTRATION AUTHORITY

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## FTRA FORM 1 APPLICATION FOR THE NEW REGISTRATIONS

**T- Registration Number** \_\_\_\_\_

**Email:** [NewRegistration@ftra.com.fj](mailto:NewRegistration@ftra.com.fj)

(for official use only):

### **Application Type:**

- Limited Authority to Teach (LAT)**  
 **Provisional Registration**

### **Section:**

- ECE  
 Primary  
 Secondary  
 Teacher Educator

Certified Passport  
Photo

(Staple on the edge  
of the photo &  
Applicants Name to  
be written at the  
back of the photo)

**NOTE: Completed registered & recognised Formal Teacher Training Qualification is a Mandatory Requirement for all Teachers applying for the FTRA Registration. For LAT / Non-Teaching Applicants, contact the FTRA Office prior to submission.**

**FTRA Registration Requirements Checklist** – Please ensure the “FTRA Form 1” is fully and accurately completed. Please tick the following respective box:

Requirements Checklist	Applicant	Office use
1. Completed FTRA Form 1	<input type="checkbox"/>	<input type="checkbox"/>
2. Original Birth Certificate	<input type="checkbox"/>	<input type="checkbox"/>
3. Certified Passport size photo	<input type="checkbox"/>	<input type="checkbox"/>
4. FTRA Payment Receipt ( <i>Applications lodged at other Centres</i> )	<input type="checkbox"/>	<input type="checkbox"/>
5. Certified copies of Academic Transcripts & Certificates ( <i>Relevant Tertiary Qualifications only</i> )	<input type="checkbox"/>	<input type="checkbox"/>
6. Full Medical Report	<input type="checkbox"/>	<input type="checkbox"/>
7. Police Clearance ( <i>with no adverse record</i> )	<input type="checkbox"/>	<input type="checkbox"/>
8. FTRA Induction Certificate Copy	<input type="checkbox"/>	<input type="checkbox"/>
9. Work Permit Copy ( <i>for Expatriates</i> )	<input type="checkbox"/>	<input type="checkbox"/>

**Please do not submit your Application until all sections of the form are accurately completed; attach the requirements with the Completed FTRA Form 1 as stipulated above.**

**FTRA FORM 1**  
**APPLICATION FOR THE NEW REGISTRATIONS**

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**1. PERSONAL DETAILS**

[Names as per the Birth Certificate (*Fiji Citizens*) or Passport (*for Expatriates*)]

Surname: \_\_\_\_\_

Given Names: \_\_\_\_\_

Title: (Ms/Mr/Mrs/Miss/Dr): \_\_\_\_\_ Male  Female

Date of Birth: \_\_\_\_\_ Place of Birth: \_\_\_\_\_

Country: \_\_\_\_\_ Town/City: \_\_\_\_\_

T.I.N Number: \_\_\_\_\_ FNPF Number: \_\_\_\_\_

**Contact Details** (*Compulsory*)

Telephone (W): +679 \_\_\_\_\_

Telephone (H): +679 \_\_\_\_\_

Mobile: +679 \_\_\_\_\_

Email: \_\_\_\_\_

Postal Address: \_\_\_\_\_

Residential Address: \_\_\_\_\_

Payment Amount: \$ \_\_\_\_\_ for  Years (Please Specify Number of Years)

Date of Payment: \_\_\_\_\_ Mode of Payment: \_\_\_\_\_

Receipt No: \_\_\_\_\_ Office Payment Made at: \_\_\_\_\_

Please tick appropriate box(es)	2022	2023	2024	2025	2026	2027	2028	2029	2030
Registration required for year(s)									

**2. CURRENT SCHOOL APPOINTMENT** (*If Applicable*)

Name of School/Institution: \_\_\_\_\_

Commencement date: \_\_\_\_\_

Full-time  Part-time  Reliever  Others (*Specify*)

Nature of appointment if not classroom teacher: \_\_\_\_\_

**FTRA FORM 1**  
**APPLICATION FOR THE NEW REGISTRATIONS**

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**3. FIJI CITIZENSHIP/RESIDENCY/WORK VISA**

Are you a Fijian Citizen Yes:  No:

If not a Fijian Citizen; Provide Citizenship Details: \_\_\_\_\_

Do you hold Permanent Residency in Fiji? Yes:  No:

Do you hold a valid Work Permit to work in Fiji? Yes:  No:

**4. MEDICAL REPORT**

- All new Applicants/Teachers are to fill the Medical Report Form provided by the Fiji Teachers Registration Authority.
  
- All new Applicants/Teachers are to provide a full Medical Report from a Medical Practitioner of their choice. **The report must be stamped by the Medical Practitioner or Hospital.**

**5. PERMISSION TO RELEASE INFORMATION**

I hereby authorize the Fiji Teachers Registration Authority or its delegates to make enquiries and exchange information with any Teacher Registration Authority/Board, employer and relevant institution concerning my registration to teach or other related matters.

I also give my consent and permission if relevant for the Fiji Teachers Registration Authority or its delegates to access my academic records.

Signature of Applicant: \_\_\_\_\_

Date: \_\_\_\_\_

**6. DECLARATION**

- i. Have you ever had your registration as a teacher on any other entitlement to teach cancelled, suspended or withdrawn: **Yes**  **No**
  
- ii. Have you ever been refused registration as a teacher in Fiji or in any other Country?  
**Yes**  **No**
  
- iii. Have you ever been dismissed from a teaching position in Fiji or from any other country?  
**Yes**  **No**
  
- iv. Have you ever been, or are you currently, the subject to disciplinary proceedings, or any other action that might lead to such proceedings, in relation to your employment in Fiji or in any other country?  
**Yes**  **No**
  
- v. Have you ever been convicted or found guilty of any offence?  
**Yes**  **No**

**FTRA FORM 1**  
**APPLICATION FOR THE NEW REGISTRATIONS**

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- vi. Have you ever been charged with any offence, whether or not you have been found guilty?  
Yes  No
- vii. Are there any charges in relation to any offence pending?  
Yes  No
- viii. Are you declared an undischarged bankrupt?  
Yes  No

I, \_\_\_\_\_  
(Full Name of Applicant)

of \_\_\_\_\_  
(Full address of applicant)

declare that I have read the completed application for the FTRA Registration and confirm that the information provided by myself is true and correct.

*For more details in regards to teacher registration, please refer to the FTR Act 2008 on [www.ftra.com.fj](http://www.ftra.com.fj)*

Declared by \_\_\_\_\_ at \_\_\_\_\_  
(Signature of applicant) (Place)

this \_\_\_\_\_ day of \_\_\_\_\_  
(Day) (Month and year)

before me \_\_\_\_\_  
(Full name of witness)

Signed \_\_\_\_\_  
(Signature of witness)

Phone (H/W): \_\_\_\_\_  
Mobile: \_\_\_\_\_

Stamp: \_\_\_\_\_

***(To be witnessed by one of the following: Justice of Peace, Commissioner of Oath, Divisional/SEO, Barrister or Solicitor)***

**FTRA FORM 1**  
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**PAYMENT DETAILS**

**(i) Provisional Registration**

A registration fee of \$30 must be paid before your application can be processed with \$10 lodgement fee; TOTAL \$40.00.

**(ii) Limited Authority To Teach Registration (LAT)**

A registration fee of \$15 must be paid before your application can be processed with \$10 lodgement fee; TOTAL \$25.00.

**(iii) Overseas Applications**

A registration fee of \$100.00 must be paid before your application can be processed with \$10 lodgement fee; TOTAL \$110.00.

❖ *Please note that there is no pro-rata of the registration fee.*

**FTRA fee can be made payable to Cashiers located at:**

- FTRA Suva office
- EDUCATION OFFICE: Lautoka, Ba, Rakiraki, Sigatoka, Savusavu, Labasa
- 13 Government Schools shown below:

1. Adi Cakobau School	2. Bucalevu Secondary School	3. Delainamasi Govt School
4. Labasa College	5. Levuka Public Sec. School	6. Nasinu Secondary School
7. Natabua Primary School	8. Natabua High School	9. Queen Victoria School
10. Ratu Kadavulevu School	11. Sila Central High School	12. Suva Grammar Secondary School
13. Vunisea Secondary		

**Note:**

**(1) Application Forms sent directly to FTRA Suva Office should be accompanied with a Bank Draft or Bank Cheque. Personal cheques are NOT accepted. All cheques are to be made payable to the Permanent Secretary for Education. (2) ONLINE Payment; refer to <https://ftra.com.fj/registration/>**

FTRA Chief Executive Officer's Approval: \_\_\_\_\_ Date: \_\_\_\_\_

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