

General Optical Council
Application for restoration of a specialty

Section 1 – Application

First name(s)

Surname

Title

GOC number

Please indicate which specialty you wish to be entered against your name:

Dispensing optician

Contact lens specialty

Optometrist

Additional supply specialty

Supplementary prescribing specialty

Date of first GOC registration of specialty

Date of removal of specialty entry

Section 2 – Specialty qualification

Educational establishment

Qualification

Date passed

Diploma or certificate issued

Section 3 – Continuing Education and Training (CET)

I have _____ relevant specialist points

Signed

Date

You must be able to provide evidence of having earned six specialist CET points in the 12 months preceding your application for restoration.

If your first entry to the specialty was less than 12 months before this date of application, you must earn one point for each two full months that have passed from the date you first joined the specialty, to this date of application.
