# **SUBSIDIARY LEGISLATION**

# TABLE OF CONTENTS

# Regulations

Rg 1	Midwives Regulations	S 18/56
	Directions	
D 1	Directions under section 13(2) to regulate the practice of midwives	S 8/55

# MIDWIVES ACT (CHAPTER 139) MIDWIVES REGULATIONS

S 18/56

**REVISED EDITION 2012** 



Subsidiary

### SUBSIDIARY LEGISLATION

### MIDWIVES REGULATIONS

#### ARRANGEMENT OF REGULATIONS

# Regulation

- 1. Citation.
- 2. Form of register.
- 3. Form of Registrar's certificate.
- 4. Form of notice of intention to practise.
- 5. Form of notice of change of address.

FIRST SCHEDULE — REGISTER OF MIDWIVES

SECOND SCHEDULE — CERTIFICATE OF REGISTRAR OF MIDWIVES

THIRD SCHEDULE — NOTICE OF INTENTION TO PRACTISE MIDWIFERY

FOURTH SCHEDULE — NOTICE OF A CHANGE OF ADDRESS

B.L.R.O. 5/2012

Subsidiaryl

#### SUBSIDIARY LEGISLATION

#### Regulations made under section 15

#### MIDWIVES REGULATIONS

Commencement: 1st January 1956

#### Citation.

1. These Regulations may be cited as the Midwives Regulations.

### Form of register.

2. The register required to be kept by the Registrar under the provisions of section 3(1) shall be in the form set out in the First Schedule.

#### Form of Registrar's certificate.

3. The certificate required to be issued by the Registrar under the provisions of section 3(5) shall be in the form set out in the Second Schedule.

### Form of notice of intention to practise.

**4.** The notice required to be sent to the Registrar under the provisions of section 11(1) shall be in the form set out in the Third Schedule.

#### Form of notice of change of address.

**5.** Notice of change of address required to be sent to the Registrar under the provisions of section 12 shall be in the form set out in the Fourth Schedule.

[Subsidiary]

# FIRST SCHEDULE

(regulation 2)

# BRUNEI DARUSSALAM

# REGISTER OF MIDWIVES

Name of Midwife	Address	Area or Areas in which registration is effected	Date of registration	Remarks
	Name of Midwife	Name of Midwife Address		

### SECOND SCHEDULE

(regulation 3)

# BRUNEI DARUSSALAM

# CERTIFICATE OF REGISTRAR OF MIDWIVES

	This is to certify that on
	, has been —
	entered in*/ removed from* the Register of Midwives, under the provisions of the Midwives Act (Chapter 139), and that such entry*/ removal* is still in force.
	*Delete words which are inapplicable.
	Signed  Registrar of Midwives
	Date
То:	

### Midwives

[Subsidiary]

Sir,

### THIRD SCHEDULE

(regulation 4)

To:	The Registrar of Midwives, Medical Headquarters, Brunei Darussalam.
	Notice of intention to practise midwifery

I,	
of	
being a registered midwife, under the provisions o and in possession of Certificate No	
hereby give notice of my intention to practise midwi	
	Signed
	Date

**Notes:** The midwife should fill in her full name and address in the spaces provided in lines 1 and 2 above, and her certificate number in the space provided in line 5. The area in which she intends to practise i.e. Bandar Seri Begawan, Seria, Kuala Belait etc., should be inserted in line 6, and the date when she intends to start practising there in the last space i.e. 1st January 1985 etc., in the case of yearly renewals.

# FOURTH SCHEDULE

(regulation 5)

То:	The Desigtrer of Midwiyes
	The Registrar of Midwives, Medical Headquarters,
	Brunei Darussalam.
	Notice of a change of address
	· ·
Sir,	
I,	
of	
bein	a registered midwife, under the provisions of the Midwives Act (Chapter 139),
and i	n possession of Certificate No.
here	y give notice of a change of address. As from
my a	ddress will be —
••	
	Signed
	Date