



# AIOH

AUSTRALIAN<sup>®</sup>  
INSTITUTE OF  
OCCUPATIONAL  
HYGIENISTS



CELEBRATING 40 YEARS OF PROTECTING AUSTRALIAN WORKER'S HEALTH

## APPLICATION for RETIRED COH STATUS

**TO:**

**The Honorary Secretary**

**Australian Institute of Occupational Hygienists**

**FULL NAME**

*Note: Retired Certified Occupational Hygienist (COH) status is not a membership grade; it is a special financial status relating to member's fees.*

As a Retired COH member you may continue to practice in occupational hygiene as an active Member. If you wish to become a Retired Member, please complete the Retired Member Form. ([Click here](#))

1. I hereby request that my current status of COH<sup>®</sup> be amended to **Retired** COH (COH<sup>®</sup>(Ret)).
2. I have reviewed and acknowledged the following conditions for Retired COH status:

<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>

I am able to use the post nominal COH<sup>®</sup>(Ret).

I can no longer use the AIOH COH seal or stamp.

My name will be removed from the AIOH active COH Register and website list.

I no longer need to maintain my CM points or pay COH fees.

I may choose to reactivate my COH status within two years of this letter but only on one occasion.

I am still subject to the AIOH ethics case procedure provisions and voluntary surrender terms.

Return the completed form to [membership@aioh.org.au](mailto:membership@aioh.org.au)

**SIGNATURE** \_\_\_\_\_

**DATE** \_\_\_\_\_