



ALBERTA college
of OPTOMETRISTS

EXISTING PRACTITIONER FROM ANOTHER PROVINCE IN CANADA

APPLICATION CHECKLIST, PRELIMINARY REGISTRATION FORM & STATUTORY DECLARATION

1. **Letter of Good Standing** - Have the Registrar in your province forward a letter directly to the Registrar of the Alberta College of Optometrists (ACO) stating that you are currently a member in good standing. In addition, the letter must state whether you are currently under investigation or whether you have ever been found guilty of unprofessional conduct in the past. The letter must be dated within 30 days of processing your application.
2. **Summary of Continuing Education Credits** - Request that the Registrar in your province forward a summary of your continuing education credits for the past three years directly to the ACO Registrar.
3. **Agreement on Internal Trade (AIT) Labour Mobility** - Effective April 01, 2009, all provinces in Canada have agreed to a labour mobility agreement which allows for easy transfer of practitioners from one province to another. As a result, practitioners licensed in one province do not have to challenge the CSAO exam when moving to another province; however, applicants may have to demonstrate their competence through a practice assessment or quality assurance appraisal. Each application will be reviewed on its own merits. For further information, please contact the ACO office.
4. **Preliminary Registration Fee** - The Preliminary Registration Fee is \$400.00. Please attach your cheque or money order when mailing your Preliminary Registration Form, Statutory Declaration and all other required documents to the ACO office. (NOTE: At the present time, the ACO does not accept credit card or debit card payments.)
5. **Official Transcripts** - Please ensure that official copies of all of your post-secondary transcripts are forwarded to the ACO office. You may request that the College or University send your transcript(s) directly to the ACO office or have them sent to you. If the transcript(s) is sent directly to you, you must forward this documentation to the ACO office in its original sealed envelope. Opened or unsealed envelopes will not be accepted. Official transcripts include courses taken during your B.Sc., M.Sc., and O.D., Ph.D. or other equivalent program(s).
6. **Post-Secondary Degree and/or Diploma** - A certified copy of your degree or diploma in optometry must accompany your application. Copies are considered certified when they

are notarized by a lawyer, public notary, Justice of the Peace, University official or Commissioner of Oaths.

7. **TPA Certification** - The ACO requires all new regulated members to be TPA certified. For all 1996 and earlier graduates of accredited Schools of Optometry please forward a copy of your Therapeutic Pharmaceutical Agent (TPA) certificate or have the Registrar in your province write a letter stating that you are TPA certified. The minimum TPA Certification Course should be 100 hours long (of which 60 hours are didactic and 40 hours are clinical). For all 1997 and later graduates, successful completion of the Ocular Therapeutics (OT) portion of the CSAO is considered proof of competency. Graduates of non-accredited Schools of Optometry will be assessed on an individual basis.

8. **ACO Jurisprudence Exam** - The jurisprudence exam is a one hour, closed book exam based on provincial legislation and is structured in a true/false and multiple choice format. The exam can be written:
 - a) at the same time as the CSAO exams at the University of Waterloo or the University of Montreal;
 - b) at the Alberta College of Optometrists office in Edmonton; or,
 - c) at a remote location in North America to be proctored by an approved proctor. Please contact the Alberta College of Optometrists office for additional information about this

9. **CPR Certificate** - All applications must include a current Health Care Practitioner (HCP) Cardiopulmonary Resuscitation (CPR) Certificate. CPR certificates are available from a variety of sources such as Red Cross, Heart & Stroke Foundation, YMCA, St. John's Ambulance, etc.

10. **Criminal Records Check** - The ACO requires a Criminal Records Synopsis for all new applicants. The fee for obtaining this document from the Royal Canadian Mounted Police (RCMP) is the responsibility of the applicant. In addition, the document must be submitted directly from the RCMP to the ACO office. Please visit www.rcmp-grc.gc.ca for further information on this requirement

***PLEASE COMPLETE YOUR APPLICATION FORM AND STATUTORY DECLARATION;
ENCLOSE THE APPLICATION FEE AND THE REQUIRED DOCUMENTS (AS NOTED ABOVE);
AND, MAIL OR COURIER TO:***

**The Alberta College of Optometrists
#102, 8407 Argyll Road NW
Edmonton, Alberta
T6C 4B2**

Should you require additional information please contact:

Dr. Gordon Hensel

Registrar and CEO

Tel: (780)466-5999 or E-Mail registrar@collegeofoptometrists.ab.ca

- or -

Mrs. Bonnie Sniedze

Administrative Assistant

Tel: (780)466-5999 or E-Mail admin@collegeofoptometrists.ab.ca

Visit our website at www.collegeofoptometrists.ab.ca for additional information about the governance and practice of Optometry in Alberta.



PRELIMINARY REGISTRATION CHECKLIST

- Completed, Signed and Dated Preliminary Registration Form**
 - Completed, Signed and Dated Statutory Declaration**
 - Attach Preliminary Registration Fee (cheque or money order)**
 - Letter of Good Standing from the Registrar of your current Jurisdiction**
 - Summary of Your Continuing Education Credits for the Past Three Years**
 - Official Transcripts of all Post-Secondary Pre-Optometry Programs**
 - Official Transcript of Optometry Program**
 - Certified Copy of Optometry Degree or Diploma**
 - Certified Copy of Your Letter of Successful Completion of International Optometric Bridging Program (IOBP) (if applicable)**
 - Original Copy (with official CEO seal) of CSAO Exam Results (if applicable)**
 - Certified Copy of Your TPA Certification (if applicable)**
 - Current CPR Certificate – Health Care Professional (HCP) Level**
 - RCMP Criminal Records Check**
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CPR CERTIFICATION

[] CPR Certificate - Please attach a copy of your current CPR certificate - Health Care Practitioner (HCP) Level

ACADEMIC INFORMATION:

Pre-Optometry Education:

Degree	Date	School
Degree	Date	School

Optometry Education:

School Name: _____

School Address: _____

Length of Program: _____

Program Commenced: _____ Date Completed: _____

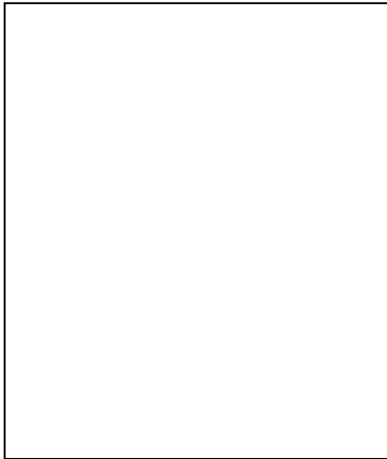
International Optometric Bridging Program (for graduates of non-accredited Schools):

Date Commenced: _____ Date Completed: _____

TPA Education: Please list the number of hours of didactic & clinical (or residency) TPA instruction you received:

Practice Information: List jurisdiction(s) in Canada or elsewhere in which you are now, or ever had been registered as a practicing optometrist:

Please attach a notarized picture of yourself in this space.



TPA CERTIFICATION

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For all 1997 and later graduates, successful completion of the Ocular Therapeutics (OT) portion of the CSAO is considered proof of competency.

Graduates of non-accredited Schools of Optometry will be assessed on an individual basis.

EVIDENCE OF GOOD CHARACTER

Canadian Police Information Centre (CPIC) Criminal Records Synopsis: (Please check)
 To be submitted by the RCMP directly to the Alberta College of Optometrists

Have you ever been found guilty of a criminal offense in any jurisdiction: yes no

Have you ever had your license or registration refused or rejected in any jurisdiction:
 yes no

Have you ever had any disciplinary action in any other jurisdiction: yes no

ACO JURISPRUDENCE EXAM

Please indicate your preference to challenge the ACO Jurisprudence exam.

- I wish to challenge the ACO Jurisprudence Exam at the same time as the CSAO Exams in Montreal or Waterloo.
- I wish to challenge the ACO Jurisprudence Exam in the ACO office in Edmonton.
- I wish to challenge the ACO Jurisprudence Exam at a remote location in North America administered by a proctor approved by the ACO.

If you wish to have the exam proctored in your community, please provide the name and address of the proctor plus the time and date you have arranged with this individual. The proctor must be a professional person, but not an optometrist. Application must be made via this form before the jurisprudence exam can be forwarded to your chosen proctor. Any cost associated with the appointment of a proctor outside of the College is the financial responsibility of the applicant.

Proctor Name: _____

Proctor's Mailing Address: _____

_____ [postal code]

Time & Date I have selected to undertake the exam:

Time

Date

(PLEASE NOTE* Allow at least 4 weeks after your application is forwarded to the ACO office before selecting the time and date. This time frame is required to ensure that your chosen proctor receives a copy of the ACO jurisprudence exam in ample time prior to the date you have selected.)

Signed: _____ Date: _____

_____ [postal code]



STATUTORY DECLARATION

In the matter of my application to the Alberta College of Optometrists for approval for registration:

I, _____, of _____
(City/Town)

in the Province/State of _____ DO SOLEMNLY

DECLARE:

[1] That I was born on _____ at _____
[month day year] [place]

Immigration status in Canada _____

[2] That I am the person referred to in the documents submitted in support of my application, and that these documents present a true and accurate account of my qualifications;

and

[3] That the following is a true chronological summary of my post-secondary educational history, giving names of institutions attended, dates of attendance and degrees or diplomas achieved:

and I make this solemn declaration conscientiously believing it to be true and knowing that it is of the same force and effect as if made under oath and by virtue of the "Canada Evidence Act".

[4] I hereby attest that I have never challenged the CSAO Examinations before the date of this declaration.

-or-

I have previously challenged the CSAO Examinations and I hereby list all of the previous dates.

_____ [date] _____ [Applicant from which province]

_____ [date] _____ [Applicant from which province]

_____ [date] _____ [Applicant from which province]

[5] That I am TPA certified via:

Successfully completing a TPA course

Passing the OT portion of the CSAO

[6] That I am currently not under any investigation in my province.

[7] That I:

Have never been found guilty of unprofessional conduct

That I have been found guilty of the following (include dates)

Declared before me at _____

in the Province/State of _____ this _____ day of

_____, 20____.

Declarant's Signature

Commissioner for Oaths, Notary Public or Justice of the Peace in

and for the Province/State of _____.