



Authorization for Release of Information (Regulatory History)

THIS SECTION TO BE COMPLETED BY THE APPLICANT

I,
(Name of Applicant)

hereby authorize
(Name of Regulatory Authority)

to deliver to Ordre des ergothérapeutes du Québec the required information on my registration status.

When in your province, I was registered as:

Name First name

Registration number Date of birth (yyyy/mm/dd)

Period of membership

Signature Date

Witness name

Signature Date

THIS SECTION TO BE COMPLETED BY THE REGULATORY AUTHORITY

Please return directly to the address above

1. Has this applicant ever gotten a practice permit/license under your territory's jurisdiction?

No Yes Permit issued on (yyyy/mm/dd)

2. Has this applicant now or ever been a member in good order of your regulatory organization?

No Yes If yes, indicate the time periods of active membership

3. Are or were there any conditions/restrictions to his/her permit or registration?

No Yes If yes, please describe



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4. Has this applicant been the subject of any disciplinary action by your organization?

No Yes If yes, please describe the motive, the decision and sanction imposed

5. Is there a reason why this applicant would not be entitled to register in your jurisdiction at the present time?

No Yes If yes, please explain

Name of the authorized person _____

Title _____

Signature of the authorized person _____ Date _____

Name of Regulatory Authority _____ Affix Corporate Seal here

Address of Regulatory Authority _____

The information collected on the present form is necessary for the exercise of the rights and powers of the Ordre des ergothérapeutes du Québec. It is collected for the purpose of supervising the practice of the profession, to ensure the protection of the public as well as for statistics. It will be accessible to the authorized personnel of the order as well as to anyone authorized to do so according to the law. The information collected on the present form is mandatory and any omission may result in the denial of his request.

Anybody may access his file and ask for the rectification of the information it contains. In order to do so, please send a written request to the secretary of the order.