

NEW GRADUATE FROM A NON-ACCREDITED SCHOOL OF OPTOMETRY

APPLICATION CHECKLIST, PRELIMINARY APPLICATION FORM & STATUTORY DECLARATION

Please be advised that all graduates of non-accredited Schools of Optometry are required to:

- a) Pass the FORAC credentialing process. Complete credentialing information is available on the FORAC website: www.forac-faroc.ca
- b) Successfully complete the International Optometric Bridging Program (IOBP) at the University of Waterloo. Complete program and registration information is available at www.optometry.uwaterloo.ca/iobp before being allowed to challenge OEBC exam and submit their Preliminary Application to the ACO.
- 1. <u>Preliminary Application Registration Fee</u> The Preliminary Application Registration Fee is \$400.00 (Canadian funds only). The ACO office accepts VISA, MasterCard, money orders, cheques or cash.
- 2. <u>Official Transcripts</u> Please ensure that official copies of all of your post-secondary transcripts are forwarded to the ACO office. You may request that the 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., O.D., Ph.D. or other equivalent program(s).
- 3. <u>Certification</u> The ACO requires that all new Regulated Members be TPA certified and Advanced Scope certified (definitions on pages 5 & 6). A Practice Permit will not be issued unless the applicant is both TPA and Advanced scope certified.
- 4. <u>CPR Certification</u>- A copy of your current (Level C) Health Care Practitioner (HCP) Cardiopulmonary Resuscitation (CPR) Certificate must accompany your application. CPR certificates are available from a variety of providers such as Red Cross, Heart & Stroke Foundation, YMCA, St. John's Ambulance, etc.

- 5. <u>ACO Jurisprudence Exam</u> The ACO Jurisprudence Exam is a one hour, closed book exam based on provincial legislation (available on the ACO website) and ACO Standards of Practice. It is structured in a true/false and multiple choice format. The exam can be written:
 - a) At the Alberta College of Optometrists office in Edmonton; or,
 - b) At the office of a member of the ACO Registration Committee in Calgary.

Please contact the Alberta College of Optometrists office for registration and additional information about this process.

- 6. <u>Criminal Records Check</u> The ACO requires a Criminal Records Synopsis that includes a Vulnerable Sector Search for all new applicants. The fee for obtaining this document from the Royal Canadian Mounted Police (RCMP) or local Police Detachment is the responsibility of the applicant. Please visit www.rcmp-grc.gc.ca for further information on this requirement. You must forward this documentation directly to the ACO office in its **original sealed envelope**. Opened or unsealed envelopes will not be accepted.
- 7. **Recent Notarized Picture**: Must be included with your application package.
- 8. Optometry Degree and/or Diploma Please forward a certified copy of your optometry Degree and/or Diploma. Copies are considered certified when they are notarized by a lawyer, public notary, Justice of the Peace, University official or Commissioner of Oaths.
- 9. National Optometry Board Exam Once you have successfully completed the FORAC Credentialing Process and passed the IOBP, you may apply to the OEBC to challenge the OEBC Exam. Once you have successfully passed the OEBC Exam, please mail (or drop off) one original copy of your successful completion to the Alberta College of Optometrists office (as fax and email scan copies are not accepted).

PLEASE COMPLETE AND SUBMIT YOUR PRELIMINARY APPLICATION FORM, STATUTORY DECLARATION, APPLICATION FEE AND REQUIRED DOCUMENTS (AS NOTED ABOVE) TO:

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

Dr. Gordon Hensel, Registrar and CEO

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

- or -

ACO General Administrative Office

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 APPLICATION REGISTRATION CHECKLIST

Completed, Signed and Dated Preliminary Application Registration Form **Completed, Signed and Dated Statutory Declaration Attach Preliminary Application Registration Fee (Canadian funds only)** Official Transcripts of all Post-Secondary Pre-Optometry Programs **Official Transcript of Optometry Program** Certified Copy of Optometry Degree and/or Diploma □ Certified Copy of Letter of Successful Completion of International Optometric **Bridging Program (IOBP)** Original Copy (with official seal) of OEBC Exam Results **Current CPR Certificate – Health Care Professional (HCP) Level C** □ RCMP or Local Police Detachment Criminal Records Check which includes a **Vulnerable Sector Search** □ ACO Jurisprudence Exam **Certified Copy of TPA Certification (if applicable)** □ Certified Copy of Advanced Scope Certification (if applicable)



NEW GRADUATE (NON-ACCREDITED OPTOMETRY SCHOOL) PRELIMINARY APPLICATION REGISTRATION FORM

Please be advised that by signing this form you hereby authorize and consent to the collection, use and disclosure of your personal information as described in the ACO Privacy Policy. This form cannot be processed if not signed and dated.

1. PERSONAL INFORMATION:

Name:		
[Surname]	[Given Name(s)]	
Current Mailing Address:		_
	[postal code]	_
Permanent Mailing Address:		_
Home Telephone No. ()	[postal code]	
Personal Cell Number ()		
Date of Birth: day year	Gender: Male [] Female []
Current E-Mail Address:		
Permanent E-Mail Address:		_
Have you ever tested positive for HIV	yes [] no []	
Have you ever tested positive for Hepatitis B	yes [] no []	
Have you ever tested positive for Hepatitis C	yes [] no []	

2. ACADEMIC INFORMATION:

Pre-Optometry Education:

Optometry Education:	ate	School
1 1		
G 1 137		
School Name:		
School Address:		
Length of Program:		
Program Commenced:	Date Con	mpleted:
IOBP: Date Commenced:	Date	Completed:
TPA and Advanced Scope Education (description a	nd the number of hours of didactic
instruction and clinical experiences if	f taken separ	rately from optometry curriculum:

3. CERTIFICATION

The ACO requires <u>all</u> new Regulated Members to be TPA and Advanced Scope certified.

TPA certification is defined as:

- a) Passing the entire OEBC, CACO or CSAO exam for practitioners who graduated after January 1, 1996 from an accredited School of Optometry.
- b) Registering in another Canadian province with the NBEO and being declared TPA certified by that province before transferring to Alberta.
- c) Completing a separate TPA Certification Course (minimum of 100 hours long of which 60 hours are didactic and 40 hours are clinical) for practitioners who graduated before January 1, 1996.
- d) Completing appropriate therapeutic care clinical hours and patient experiences for graduates of non-accredited Schools of Optometry.

Advanced Scope certified is defined as:

- a) Graduating after January 1, 2015 and passing the entire OEBC or CACO exam.
- b) Graduating after January 1, 2012 and registering in another Canadian province with the NBEO and passing the Alberta Advanced Scope Certification Course final exam before transferring to Alberta.

- c) Graduating in 2012 to 2014 and passing the CACO exam; and, passing the Alberta Advanced Scope Certification Course final exam.
- d) Graduating in 2011 or earlier and passing the complete Alberta Advanced Scope Certification Course or equivalent.
- e) Being registered and certified in a jurisdiction with similar legislation and certification requirements and passing the Alberta Advanced Scope Certification Course final exam.

	CERTIFICATION ate - Please attach a copy of your current CPR certificate - Health Care HCP) Level
5. ACO J	URISPRUDENCE EXAM
Please indicar	te your preference to challenge the ACO Jurisprudence exam.
[]	I wish to challenge the ACO Jurisprudence Exam in the ACO office in Edmonton.
[]	I wish to challenge the ACO Jurisprudence Exam at the office of a member of the ACO Registration Committee in Calgary.

Location, time and date I request to undertake the exam:

6. EVIDENCE OF GOOD CHARACTER
Canadian Police Information Centre (CPIC) Criminal Records Synopsis: 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
Practice Information: List jurisdiction(s) in Canada or elsewhere in which you are now, or ever had been registered as a practicing optometrist:
7. Please attach a recent notarized picture of yourself in this space:
Signed: Date:



STATUTORY DECLARATION

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

	,of					
		(City/Town)				
n the	the Province/State of DO	SOLEMNLY				
EC	ECLARE:					
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 application, and that these documents present a true and accurate qualifications;					
3]	That the following is a true chronological summary of my post-seco educational history, giving names of institutions attended, dates of attendance degrees or diplomas achieved:					
	and I make this solemn declaration conscientiously believing	g it to be true and				

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 OEBC, CACO or CSAO Examinations before the date of this declaration.				
	-or-				
		y challenged the OEBC, CACO or CSAO Examinat f the previous dates.	ions and		
	[date]	[Applicant from which province]			
	[date]	[Applicant from which province]			
	[date]	[Applicant from which province]			
[5]	[] I hereby attest that following dates:	at I successfully completed the IOBP during the			
Date	Commenced	Date Completed			
Decla	red before me at				
in the	Province/State of	this	day of		
	,	. 20			
		Declarant's	Signature		
	nissioner for Oaths, Notor the Province/State of	tary Public or Justice of the Peace in			