## Saskatchewan Association of Optometrists APPENDIX "A" APPLICATION FOR PROFESSIONAL CERTIFICATE

(Please note you must initial beside the statement that applies in #4, and #6)

## TO: THE REGISTRAR, SASKATCHEWAN ASSOCIATION OF OPTOMETRISTS

	APPLICATION of		
	(Full Name)		
1.	I,of,		
	(Full Name) (Address) of the City of in the Province of, hereby		
	make application for registration as a member of the Saskatchewan Association of Optometrists and for		
	the issuing of a Professional Certificate under the provisions of Section 17 of the Optometry Act.		
2.	I successfully completed the examination or examinations set by the Board of Examiners and required		
	under Section 17 of The Optometry Act.		
3.	I am submitting herewith the registration fee in the amount of \$200 (The Jurisprudence Fee is increased to		
	\$500 effective September 1, 2019).		
4.	I am a Canadian citizen by birth or naturalization and submitted herewith is the following proof of such		
	citizenship: - or -		
4.	I am entitled to reside and be employed in Canada pursuant to an Employment Visa issued under the		
	Immigration Act (Canada) or otherwise and submitted herewith is the following proof of such entitlement.		
5.	I have never been refused a Certificate or License to engage in the practice of optometry in Saskatchewan		
	or in any other jurisdiction. (If this statement is not correct, set out the full particulars of such refusal on a separate		
	sheet attached to this application and signed by yourself).		
6.	I have never been certified or licensed to engage in the practice of optometry in Saskatchewan or in any		
	other jurisdiction or -		

- 6. (a) I have been engaged in the practice of optometry in the following jurisdictions during the following years
  - (b) The nature and extent of my practice of optometry in the aforementioned jurisdictions was as follows:
  - (c) I have never been found guilty of an act or professional misconduct in any jurisdiction where I have engaged in the practice of optometry.
  - (d) There are no current proceedings against me for professional misconduct in any jurisdiction where I have engaged in the practice of optometry.
  - (e) I am not under suspension or otherwise disqualified from the practice of optometry in any jurisdiction where I have engaged in the practice of optometry.

- (f) I have never been reprimanded, fined, suspended or had my license cancelled or revoked in any jurisdiction where I have engaged in the practice of optometry.
- (g) I have never had conditions or restrictions imposed upon my license to practice optometry in any jurisdiction where I have engaged in the practice of optometry.

(If any of the above statements are not correct, set out full particulars on a separate sheet attached to this application and signed by yourself).

- 7. I have never been convicted in Canada of an indictable offence nor have I been convicted outside Canada of an offence that would be an indictable offence if committed in Canada. (*If this statement is not correct, set out full particulars on a separate sheet attached to this application and signed by yourself*)
- **8.** I submit herewith two testimonials of good character and conduct or a letter of good standing from my current respective College.
- **9**. I am fluent in the following languages:

		, in the Province of
this	day of	A.D. 20
This is Exhibit "	'A" to the Affidavit of	, sworn before me at the City
of		, in the Province of
this	day of	A.D. 20
A COMMISSIO	NER FOR OATHS in and for th	Province of
My commission	n expires December 31, 20 _	
- OR-		
Being a SOLICI	FOR	