



## Educational Credential and Qualifications Assessment

### Application Form

**For Office Use Only**

Client ID: \_\_\_\_\_

**Please check one:**

1. Initial Application

Re-opened File Application

Reassessment Application

2. Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_  
Day Month Year

3. Mr.  Ms.  Mx.

**4. FULL LEGAL NAME (as it appears on your supporting identity document):**

Last Name(s)/Surname(s): \_\_\_\_\_

First Name(s)/Given Name(s): \_\_\_\_\_

Middle Name(s) \_\_\_\_\_

Former Last Name (if any of your documents are in a name other than the name above):  
\_\_\_\_\_

**5. ADDRESS:**

Suite/Apt: \_\_\_\_\_ Street (number and name): \_\_\_\_\_

City: \_\_\_\_\_ Province/State: \_\_\_\_\_

Canadian Postal Code: \_\_\_\_\_ Other Country Postal Code/Zip Code: \_\_\_\_\_

Country: \_\_\_\_\_ Home Telephone (including country code): \_\_\_\_\_

\*Email Address: \_\_\_\_\_ (\*must be completed)

**6. Please list the university you attended and the degree you obtained for your entry-to-practice physiotherapy education.**

Name of Institution	City, Country	Start Date, End Date	Date degree/diploma certificate was issued	Full Title of Degree/Diploma/Certificate	Full Title of Degree/Diploma/Certificate (in native language)



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Canadian Alliance  
of Physiotherapy  
Regulators

**ACORP**  
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organismes de réglementation  
de la physiothérapie

**7. Credentialling Fee: \$1486.00 for Initial Applications; \$546.00 for a Re-opened File/Reassessment Application; in Canadian funds, payable to: "Canadian Alliance of Physiotherapy Regulators" (Fees may change without notice)**

*Note: This fee is not refundable. You must send the fee with this application form. You may pay:*

- by certified cheque (personal cheques are not accepted), postal/bank money order, bank draft negotiable without charge in Canada (i.e. can be drawn from a Canadian bank without charge) **OR**
- by Credit Card (Visa or MasterCard only. Debit cards and debit credit cards are not accepted) See page 5 for Payment by Credit Card **OR**

I have received a British Columbia Ministry of Health Bursary. My HMBC # is

**8. Provinces/Territories in which you expect to apply for registration (Indicate your first, second, etc. choices by writing 1, 2, etc.):**

YT\_\_ BC\_\_ AB\_\_ SK\_\_ MB\_\_ ON\_\_ QC\_\_ NL\_\_ NB\_\_ NS\_\_ PE\_\_

**IMPORTANT NOTES:**

- We will not start your assessment until we have received all required materials.<sup>1</sup> If your application is not complete, your assessment will be delayed.** Our goal is to complete assessments within 10 to 12 weeks of receiving all documentation if we have a precedent case. (A precedent case is a previously completed credential review of an applicant from the same physiotherapy program as you, in the same year, with a similar course of study, using the same credentialling standards.) Our goal is to complete assessments that do not have a precedent case in 16 to 18 weeks. Your assessment will take longer if the assessment agency needs to do more research or if we need more information. **We do not guarantee that we will complete your assessment within 10 to 18 weeks. We will not "fast track" applications for any reason. You should avoid taking action (such as moving or applying for a job) in anticipation of a positive result or a result by a certain time.**
- Official documents we receive from the issuing institutions and notarized photocopies we receive from applicants and representatives become the property of CAPR and will NOT be returned or released.
- We verify that persons who are qualified in the field of international educational credential assessment will assess credentials, but we cannot guarantee that the recipient of an assessment will agree with the results. International Qualifications Assessment Service (IQAS), World Education Service (WES), other credential assessment bodies approved by CAPR and external physiotherapist assessors retained by CAPR help us review credentials.
- Assessment reports may differ depending upon the period in which they were completed, and the documents submitted. This results from new and updated information being made available to us on a continual basis and from revisions to our credentialling standards. We base our decisions on the most recent information available.
- Applications are valid for one year. We will close your file if we have not received all your required documents to begin your assessment within a year of when you applied.

<sup>1</sup>We can begin your assessment before we receive proof of language proficiency in English or French or your degree (only if you have not received your degree due to the timing of your convocation at the time you apply for credentialling). However, we cannot complete your assessment nor provide you with results until we receive proof of language proficiency and/or your physiotherapy degree (see Policies for more information).



## **CONSENT / WAIVER:**

By applying for credentialling and signing below, the Applicant;

1. certifies that any information or document supplied with respect to their application is true and accurate to the best of their knowledge.
2. realizes that this assessment is not binding on any institution or organization, and releases CAPR and its directors, officers, employees, member physiotherapy regulators and agents (including for example, International Qualifications Assessment Service (IQAS), World Education Service (WES), or other credential assessors or assessment bodies such as those listed on the Canadian Information Centre for International Credentials (CICIC) website (the “Credential Assessment Bodies”)) from any actions, claims, demands or liability from damages incurred due to the use of an assessment report.
3. agrees to indemnify CAPR and its directors, officers, employees, member physiotherapy regulators and agents including Credential Assessment Bodies for all costs, including legal expenses, that they may incur as a result of any claim or demand that they (or anyone having any interest in their earnings or services) may make based upon the assessment determination.
4. agrees that they will be eligible to apply to write the Physiotherapy Competency Exam (PCE) if their assessment result is successful. The first attempt of the Written Component of the PCE must happen before eligibility expires, which is two years from the date on the successful result letter.
5. acknowledges that, if CAPR or its agents determine, in their discretion, that ANY document or test result submitted with respect to an application is fraudulent, altered, irregular or involved cheating, or the physiotherapy education documents were issued by a “degree mill” or a “diploma mill” organization, the assessment will be terminated, the fee will not be refunded and CAPR will notify its agents, Credential Assessment Bodies, educational institutions, and Canadian physiotherapy regulators.
6. releases CAPR, its directors, officers, employees, member physiotherapy regulators and agents including Credential Assessment Bodies from ANY liability for the loss of or damage to documents submitted with respect to an application for an assessment.
7. agrees that the fees, once paid, are not refundable, except in the case of overpayment.
8. agrees that while CAPR takes reasonable steps to ensure the accuracy and completeness of information, resources and reports, CAPR is not responsible for damages in the event of errors or omissions. CAPR is not responsible for impacts of a personal, professional or financial nature. This includes such impacts as loss of income, loss of salary, other damages and/or expenses incurred by an employer, a contractor or an applicant. Each applicant who applies for the Educational Credentials and Qualifications Assessment must read and understand the limits of liability. Further, applicants must advise those interested parties (such as employers) about the limits of liability.
9. by applying for the Educational Credentials and Qualifications Assessment, the Applicant agrees that they shall take no action or other proceedings against CAPR or any of its directors, officers, employees, member physiotherapy regulators or agents including Credential Assessment Bodies for anything done or omitted to be done in good faith or for any neglect or default related to the Educational Credentials and Qualifications Assessment or the outcome of it, and the Applicant further agrees to indemnify CAPR and its directors, officers, employees, member physiotherapy regulators and agents including Credential Assessment Bodies for any and all costs, including legal expenses, that may incur as a result of an such action or proceedings.
10. consents to the collection, use and disclosure of their personal information in accordance with CAPR Privacy Policy. The Applicant agrees that the information they have provided may be verified by CAPR, and that in the course of such verification CAPR may need to disclose to third parties the information provided by the Applicant. The Applicant consents to such disclosure by CAPR. The Applicant also consents to the disclosure of personal information by third



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parties to CAPR that may be necessary for CAPR to process the Applicant's application and to verify the information provided.

11. agrees to let CAPR disclose their personal information to Credential Assessment Bodies so they can assess the Applicant's educational credentials.
12. authorizes the disclosure of non-identifying data for research purposes.
13. authorizes the disclosure of the status of their credentialing application and Educational Credential and Qualifications Assessment results to any and all Canadian physiotherapy regulatory agencies.
14. authorizes the disclosure of any information regarding the Applicant's professional conduct, fitness to practice or any other issues of a regulatory nature received by CAPR during the assessment process to any and all Canadian physiotherapy regulatory agencies.
15. authorizes the disclosure of their personal information and Educational Credential and Qualifications Assessment results to Canadian bridging programs approved by CAPR. This may include information regarding physiotherapy education, the status of the credentialing assessment, verification of language proficiency, PCE exam status, or PCE exam results.
16. confirms they have not attempted the Written and/or Clinical component of the Physiotherapy Competency Examination.
17. certified that they have read and fully understand the above and agrees with the terms outlined.

Signature of Applicant \_\_\_\_\_ Date \_\_\_\_\_

*Certifying agreement to the limits and conditions of assessment of educational credential and qualifications*

We will not process this application unless we receive the completed and signed application and fees, along with all necessary documentation that is required directly from the applicant. If your application is not signed or not sent with all applicable fees or does not have all the required documentation noted on the Application Checklist, we will return your application, fees and any documents we have received from you by regular mail. We do not accept electronic signatures.

**SEND YOUR COMPLETED APPLICATION, APPLICATION CHECKLIST, FEES AND SUPPORTING DOCUMENTATION TO:**

**1243 Islington Avenue, Suite 501  
Toronto, ON  
M8X 1Y9  
Canada**



## Credit Card Authorization Form

### Client details:

<b>Full name:</b>	
<b>Signature:</b>	

### Payment details:

I authorize the Canadian Alliance of Physiotherapy Regulators to charge my credit card in accordance with the below information. *Note: Debit cards are not accepted.*

<b>Amount (\$CAD):</b>	
<b>Payment Method:</b>	
<b>Name on card (print):</b>	
<b>Card number:</b>	
<b>Expiration Date:</b>	<i>Month:</i>
	<i>Year:</i>
<b>CVC</b> (Card Verification Code)	
<b>Billing address:</b>	<i>Address Line 1:</i>
	<i>Address Line 2:</i>
	<i>Address Line 3:</i>
	<i>City:</i>
	<i>Province/State:</i>
	<i>Postal Code:</i>
	<i>Country:</i>
<b>Cardholder's Signature:</b>	
<b>Date:</b>	