

COUNCIL OR COMMITTE	E MEMBER INFO	DRMATION
First Name:	Felicia	
Last Name:	Assenza	
Status:	Registrant	
Date Submitted:	25-05-02 2:58	PM
Positions Held:	Council membe	er
CONFLICT OF INTEREST	NFORMATION	
Disclosure of Appointed		es Held
Do you or a member of y	•	No
hold appointed or electe If yes, title and organizat		
held (first).	ion of offices	
If yes, title and organizat	ion of offices	
held (second).		
Nature of Conflict:		
Disclosure of Ownership	or Possession o	f Outside Interests
Do you or a member of y	our family	No
own or possess interests	outside of the	
College?		
If yes, interest held (first).	
If yes, interest held (seco	ond).	

Nature and extent of outside interests	
held:	
Disclosure of Financial Compensation Re	eceived
Do you or a member of your family	No
receive financial compensation (either	
for services performed, as an owner or	
part owner, trustee or employee) from	
an outside organization?	
If yes, financial compensation received	
(first).	
If yes, financial compensation received	
(second).	
Nature and extent of conflict for	
financial compensation:	
Disclosure of Relationships with Externo	
Do you have any relationships or	No
Do you have any relationships or interests that could compromise or be	
Do you have any relationships or interests that could compromise or be perceived to compromise, your ability	
Do you have any relationships or interests that could compromise or be perceived to compromise, your ability to exercise judgement or decision-	
Do you have any relationships or interests that could compromise or be perceived to compromise, your ability to exercise judgement or decisionmaking independently and objectively	
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DECLARATION AND SIGN	NATURE INFORMATION
Declaration:	I declare that the information that I have provided on this form and in any follow up email to ceo@collegeofnaturopaths.on.ca is complete and accurate to the best of my abilities.
Approval Outcome:	I have affixed my signature to this form and indicated that this form and the information contained herein is bound directly to me.



COUNCIL OR COMMITTE	E MEMBER INFORMATION
First Name:	Amy
Last Name:	Armstrong
Status:	Registrant
Date Submitted:	25-05-05 6:50 PM
Positions Held:	Council member, Discipline/FTP Committee, Governance Committee, Risk Committee

Disclosure of Appointed or Elected Office	es Held
Do you or a member of your family hold appointed or elected offices?	Yes
If yes, title and organization of offices held (first).	Dad - elected Municipal Council member (Quinte West)
If yes, title and organization of offices held (second).	None
Nature of Conflict:	Unlikely to impact

Disclosure of Ownership or Possession o	f Outside Interests
Do you or a member of your family	No
own or possess interests outside of the	
College?	
If yes, interest held (first).	
If yes, interest held (second).	

Nature and extent of outside interests	
held:	
Disclosure of Financial Compensation Re	eceived
Do you or a member of your family	No
receive financial compensation (either	
for services performed, as an owner or	
part owner, trustee or employee) from	
an outside organization?	
If yes, financial compensation received	
(first).	
If yes, financial compensation received	
(second).	
Nature and extent of conflict for	
financial compensation:	
Disclosure of Relationships with Externo	
Do you have any relationships or	No
Do you have any relationships or interests that could compromise or be	
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Declaration:	I declare that the information that I have provided on this form and in any follow up email to ceo@collegeofnaturopaths.on.ca is complete and accurate to the best of my abilities.
Approval Outcome:	I have affixed my signature to this form and indicated that this form and the information contained herein is bound directly to me.



COUNCIL OR COMMITTE	E MEMBER INFORMATION
First Name:	Dean
Last Name:	Catherwood
Status:	Public member (appointed by OIC/Government)
Date Submitted:	25-05-01 7:44 AM
Positions Held:	Council member, Discipline/FTP Committee, Quality Assurance Committee

Disclosure of Appointed or Elected Offices Held	
Do you or a member of your family	No
hold appointed or elected offices?	No
If yes, title and organization of offices	
held (first).	
If yes, title and organization of offices	
held (second).	
Nature of Conflict:	

Disclosure of Ownership or Possession o	f Outside Interests
Do you or a member of your family	No
own or possess interests outside of the	
College?	
If yes, interest held (first).	
If yes, interest held (second).	

Nature and extent of outside interests	
held:	
Disclosure of Financial Compensation Re	eceived
Do you or a member of your family	No
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part owner, trustee or employee) from	
an outside organization?	
If yes, financial compensation received	
(first).	
If yes, financial compensation received	
(second).	
Nature and extent of conflict for	
financial compensation:	
Disclosure of Relationships with Externo	
Do you have any relationships or	No
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DECLARATION AND SIGNATURE INFORMATION	
Declaration:	I declare that the information that I have provided on this form and in any follow up email to ceo@collegeofnaturopaths.on.ca is complete and accurate to the best of my abilities.
Approval Outcome:	I have affixed my signature to this form and indicated that this form and the information contained herein is bound directly to me.



COUNCIL OR COMMITTEE MEMBER INFORMATION	
First Name:	Lisa
Last Name:	Fenton
Status:	Public member (appointed by OIC/Government)
Date Submitted:	25-05-02 12:44 PM
Positions Held:	Council member, Discipline/FTP Committee, Registration Committee

Disclosure of Appointed or Elected Offices Held	
Do you or a member of your family	No
hold appointed or elected offices?	No
If yes, title and organization of offices	
held (first).	
If yes, title and organization of offices	
held (second).	
Nature of Conflict:	

Disclosure of Ownership or Possession of Outside Interests	
Do you or a member of your family	No
own or possess interests outside of the	
College?	
If yes, interest held (first).	
If yes, interest held (second).	

Nature and extent of outside interests	
held:	
Disclosure of Financial Compensation Re	eceived
Do you or a member of your family	No
receive financial compensation (either	
for services performed, as an owner or	
part owner, trustee or employee) from	
an outside organization?	
If yes, financial compensation received	
(first).	
If yes, financial compensation received	
(second).	
Nature and extent of conflict for	
financial compensation:	
Disclosure of Relationships with Externo	
Do you have any relationships or	No
Do you have any relationships or interests that could compromise or be	
Do you have any relationships or interests that could compromise or be perceived to compromise, your ability	
Do you have any relationships or interests that could compromise or be perceived to compromise, your ability to exercise judgement or decision-	
Do you have any relationships or interests that could compromise or be perceived to compromise, your ability to exercise judgement or decisionmaking independently and objectively	
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DECLARATION AND SIGNATURE INFORMATION	
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Approval Outcome:	I have affixed my signature to this form and indicated that this form and the information contained herein is bound directly to me.



COUNCIL OR COMMITTEE MEMBER INFORMATION	
First Name:	Brenda
Last Name:	Lessard-Rhead
Status:	Registrant
Date Submitted:	25-05-09 9:37 AM
Positions Held:	Council member, Governance Committee, Governance Policy Review Committee, Inquiries, Complaints & Reports Committee

Disclosure of Appointed or Elected Offices Held	
Do you or a member of your family	No
hold appointed or elected offices?	No
If yes, title and organization of offices	
held (first).	
If yes, title and organization of offices	
held (second).	
Nature of Conflict:	

Disclosure of Ownership or Possession of Outside Interests	
Do you or a member of your family own or possess interests outside of the College?	Yes
If yes, interest held (first).	Partner of BRB CE Group
If yes, interest held (second).	

held:	I am a partner of the business BRB CE Group, which provides continuing education courses for Naturopathic Doctors, through live conferences as well as online recorded webinars and audio recordings
	and audio recordings.

Disclosure of Financial Compensation Received	
Do you or a member of your family	No
receive financial compensation (either	
for services performed, as an owner or	
part owner, trustee or employee) from	
an outside organization?	
If yes, financial compensation received	
(first).	
If yes, financial compensation received	
(second).	
Nature and extent of conflict for	
financial compensation:	

Disclosure of Relationships with External Organizations	
Do you have any relationships or	No
interests that could compromise or be	
perceived to compromise, your ability	
to exercise judgement or decision-	
making independently and objectively	
and with a view to the public interest	
and best interests of the College?	
If yes, what is the relationship with or	
interest in an outside organization	
(first).	
If yes, what is the relationship with or	
interest in an outside organization	
(second).	
Nature and extend of Outside	
organizational Conflict:	

DECLARATION AND SIGNATURE INFORMATION	
Declaration:	I declare that the information that I have provided on this form and in any follow up email to ceo@collegeofnaturopaths.on.ca is complete and accurate to the best of my abilities.
Approval Outcome:	I have affixed my signature to this form and indicated that this form and the information contained herein is bound directly to me.



COUNCIL OR COMMITTEE MEMBER INFORMATION	
First Name:	Denis
Last Name:	Marier
Status:	Registrant
Date Submitted:	25-04-30 2:04 PM
Positions Held:	Council member, Equity, Diversity, Inclusion and Belonging Committee, Patient Relations Committee

Disclosure of Appointed or Elected Offices Held	
Do you or a member of your family	No
hold appointed or elected offices?	No
If yes, title and organization of offices	
held (first).	
If yes, title and organization of offices	
held (second).	
Nature of Conflict:	

Disclosure of Ownership or Possession of Outside Interests	
Do you or a member of your family	No
own or possess interests outside of the	
College?	
If yes, interest held (first).	
If yes, interest held (second).	

Nature and extent of outside interests	
held:	
Disclosure of Financial Compensation Re	eceived
Do you or a member of your family	No
receive financial compensation (either	
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If yes, financial compensation received	
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Nature and extent of conflict for	
financial compensation:	
Disclosure of Relationships with Externo	
Do you have any relationships or	No
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Approval Outcome:	I have affixed my signature to this form and indicated that this form and the information contained herein is bound directly to me.



COUNCIL OR COMMITTEE MEMBER INFORMATION		
First Name:	Marija	
Last Name:	Pajdakovska	
Status:	Public member (appointed by OIC/Government)	
Date Submitted:	25-04-29 3:06	PM
Positions Held:	Council membe	er
CONFLICT OF INTEREST I	NFORMATION	
Γ		
Disclosure of Appointed		es Held
Do you or a member of your family hold appointed or elected offices?		No
If yes, title and organizat held (first).	ion of offices	
If yes, title and organizat	ion of offices	
held (second).		
Nature of Conflict:		
Disclosure of Ownership or Possession of Outside Interests		
Do you or a member of y	•	No
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College?		
If yes, interest held (first)).	
If yes, interest held (seco	ond).	

Nature and extent of outside interests	
held:	
Disclosure of Financial Compensation Re	eceived
Do you or a member of your family	No
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Nature and extent of conflict for	
financial compensation:	
Disclosure of Relationships with Externo	
Do you have any relationships or	No
Do you have any relationships or interests that could compromise or be	
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DECLARATION AND SIGNATURE INFORMATION	
Declaration:	I declare that the information that I have provided on this form and in any follow up email to ceo@collegeofnaturopaths.on.ca is complete and accurate to the best of my abilities.
Approval Outcome:	I have affixed my signature to this form and indicated that this form and the information contained herein is bound directly to me.



COUNCIL OR COMMITTEE MEMBER INFORMATION	
First Name:	Paul
Last Name:	Philion
Status:	Public member (appointed by OIC/Government)
Date Submitted:	25-04-29 7:53 PM
Positions Held:	Council member, Discipline/FTP Committee, Registration Committee

Disclosure of Appointed or Elected Offices Held	
Do you or a member of your family	No
hold appointed or elected offices?	INO
If yes, title and organization of offices	
held (first).	
If yes, title and organization of offices	
held (second).	
Nature of Conflict:	

Disclosure of Ownership or Possession of Outside Interests	
Do you or a member of your family own or possess interests outside of the College?	No
If yes, interest held (first).	
If yes, interest held (second).	

Nature and extent of outside interests	
held:	
Disclosure of Financial Compensation Re	eceived
Do you or a member of your family	No
receive financial compensation (either	
for services performed, as an owner or	
part owner, trustee or employee) from	
an outside organization?	
If yes, financial compensation received	
(first).	
If yes, financial compensation received	
(second).	
Nature and extent of conflict for	
financial compensation:	
Disclosure of Relationships with Externo	
Do you have any relationships or	No
Do you have any relationships or interests that could compromise or be	
Do you have any relationships or interests that could compromise or be perceived to compromise, your ability	
Do you have any relationships or interests that could compromise or be perceived to compromise, your ability to exercise judgement or decision-	
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COUNCIL OR COMMITTE	E MEMBER INFO	ORMATION
First Name:	Jacob	
Last Name:	Scheer	
Status:	Registrant	
Date Submitted:	25-04-29 10:1	4 AM
Positions Held:	Council member, Discipline/FTP Committee, Examination Appeals Committee, Registration Committee	
CONFLICT OF INTEREST	INFORMATION	
Disclosure of Appointed	or Elected Office	es Held
Do you or a member of y hold appointed or elected	nember of your family	
If yes, title and organizat held (first).		
If yes, title and organizat held (second).	ion of offices	
Nature of Conflict:		
Disclosure of Ownership	or Possession o	f Outside Interests
Do you or a member of y	our family	No

own or possess interests outside of the

If yes, interest held (first).

If yes, interest held (second).

College?

Nature and extent of outside interests	
held:	
Disclosure of Financial Compensation Re	eceived
Do you or a member of your family	No
receive financial compensation (either	
for services performed, as an owner or	
part owner, trustee or employee) from	
an outside organization?	
If yes, financial compensation received	
(first).	
If yes, financial compensation received	
(second).	
Nature and extent of conflict for	
financial compensation:	
Disclosure of Relationships with Externo	
Do you have any relationships or	No
Do you have any relationships or interests that could compromise or be	
Do you have any relationships or interests that could compromise or be perceived to compromise, your ability	
Do you have any relationships or interests that could compromise or be perceived to compromise, your ability to exercise judgement or decision-	
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Jordan	
Sokoloski	
Registrant	
25-05-02 5:30	PM
Council membe Committee	er, Discipline/FTP Committee, Quality Assurance
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our family	No
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on of offices	
	Sokoloski Registrant 25-05-02 5:30 Council member Committee

Disclosure of Ownership or Possession of Outside Interests

Do you or a member of your family own or possess interests outside of the

If yes, interest held (first).

If yes, interest held (second).

College?

Nature and extent of outside interests	
held:	
Disclosure of Financial Compensation Re	eceived
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Nature and extent of conflict for	
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COUNCIL OR COMMITTEE MEMBER INFORMATION		
Twydell		
Amy		
Public Representative (appointed by Council)		
25-06-13 10:40 AM		
Council member		
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Nature and extent of outside interests	
held:	
Disclosure of Financial Compensation Re	eceived
Do you or a member of your family	No
receive financial compensation (either	
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(first).	
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Approval Outcome:	I have affixed my signature to this form and indicated that this form and the information contained herein is bound directly to me.	



COUNCIL OR COMMITTEE MEMBER INFORMATION	
First Name:	Erin
Last Name:	Psota
Status:	Registrant
Date Submitted:	25-05-02 11:20 AM
Positions Held:	Council member, Examination Appeals Committee, Inquiries, Complaints & Reports Committee

Disclosure of Appointed or Elected Offices Held	
Do you or a member of your family	No
hold appointed or elected offices?	No
If yes, title and organization of offices	
held (first).	
If yes, title and organization of offices	
held (second).	
Nature of Conflict:	

Disclosure of Ownership or Possession of Outside Interests		
Do you or a member of your family	No	
own or possess interests outside of the		
College?		
If yes, interest held (first).		
If yes, interest held (second).		

Nature and extent of outside interests	
held:	
Disclosure of Financial Compensation R	eceived
Do you or a member of your family	No
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(first).	
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(second).	
Nature and extent of conflict for	
financial compensation:	
Disclosure of Relationships with Externo	
Do you have any relationships or	nl Organizations No
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