



The College of Naturopaths of Ontario

Application for Pre-Registration

To ensure the information provided is legible, information must be typed into the necessary fields, with only the Sections 4 & 6 declarations completed by hand. Submitting a hand-written application or an application with incomplete, inconsistent, or inaccurate information will prevent your application from being processed. To avoid processing delays, please make sure to review this document carefully for accuracy and completion prior to submission.

Submitting your pre-registration

This application, together with valid photo identification may be submitted one of the following ways.

By e-mail:

If applying for Ontario Entry-to-Practise Examinations: exams@collegeofnaturopaths.on.ca

If applying for registration or the Prior Learning Assessment & Recognition (PLAR) program:

applications@collegeofnaturopaths.on.ca

By post: College of Naturopaths of Ontario,
150 John Street, 10th Floor,
Toronto ON M5V 3E3

By fax: 416-583-6011

**Note: Identification often does not transmit well via fax. Please take appropriate steps to ensure images are clear.*

Additional documentation

For information about additional documentation requirements for the making an application for registration or applying for the PLAR Program, please visit the [Applicant Resources](#) section of our website.

For information about documentation requirements for an entry-to-practise (ETP) examination, please visit the [ETP Exam Resources](#) section of our website.

1. Registration Eligibility

Which one of the following best describes you:

I graduated in _____ from the following CNME-accredited school:
(enter "month, date and year")

I am currently registered and practising naturopathy in another regulated Canadian jurisdiction.

I am applying for PLAR program*.

**Applicants who have not graduated from a naturopathic program accredited by the Council on Naturopathic Medical Education (CNME) must successfully complete the College's PLAR process prior to being eligible to sit entry-to-practise examinations or register with the College to practise naturopathy in Ontario.*

2. Personal Information

Mr. Ms. Mx.

Date of Birth (mm/dd/yyyy):

Name:

first name

middle name

surname

Are there any other names you are or have ever been known by? Yes No (e.g., maiden name, previous name) If the name provided to the College, or appearing on any supporting documentation, differs from the name on this application evidence of name change and additional documentation will be required by the College.)

Telephone:

Email:

Mailing Address:

Street Address

Apartment, unit, etc.

City

Province

Postal code

3. Confirmation of Identity

All Applications for Pre-Registration must include a copy of valid (not expired) government-issued photo identification, clearly showing full name, date of birth, face, and signature. Only the identification listed below are accepted by the College at this time. Please indicate the type of government-issued photo identification you are including with your application:

Canadian driver's licence

Temporary visitor's permit

Provincial identification card
Formerly known as the Age of Majority card

Canadian Passport

Other Passport (international)

Canadian Citizenship Card with photo

Canadian Permanent Resident card with signature

Secure Certificate of Indian Status Card issued on or after December 15, 2009.

Note: Photo health cards cannot be accepted

4. Language Proficiency

As a requirement for registration with the College, applicants must have sufficient language proficiency, in either English or French, to be able to communicate and comprehend effectively, both orally and in writing. To verify language proficiency, the College requires specific evidence, as noted in the [Language Proficiency Policy](#).

*Note: if the following declaration does **not** accurately reflect your level of language proficiency, please do not sign your name. You will instead be required to provide language test scores from a College approved language test, in accordance with the Language Proficiency Policy.*

Language Proficiency Declaration: I, PRINT LEGAL NAME, declare that I can comprehend, and communicate fluently, both orally and in writing, in either English or French.

If you are applying for PLAR, please specify the language your formal education was conducted in:

5. Naturopathic Registration History

Have you previously been registered to practise naturopathy in Ontario? Yes No

If yes, please provide your registration number: _____

Are you now or have you ever been registered to practice naturopathy in another jurisdiction? Yes No

If yes, please list the name of the regulatory body, and dates of registration:

Name and Location of the Naturopathic Regulatory Body	Registration Years
	to
	to
	to
<p>When applying for registration, you will be required to provide a letter from each regulatory body you are or have ever been registered with, in any profession, confirming you are in good standing or were in good standing at the time your registration terminated.</p>	
<p>6. Final Declaration</p>	
<p>I, <u>P R I N T L E G A L N A M E</u>, hereby declare the contents of this application to be true and complete to the best of my knowledge and belief. I understand and agree that if I make a false or misleading statement or representation in respect of my Application for Pre-registration, I shall be deemed not to have satisfied the Good Character requirements for issuance of a certificate of registration and will be referred to a panel of the Registration Committee upon application for registration with the College. I further understand and agree that if a certificate of registration is issued to me based upon a false or misleading statement or representation, the certificate may be revoked.</p> <p>_____</p> <p>HANDWRITTEN SIGNATURE OF APPLICANT</p> <p>_____</p> <p>DATE</p>	