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APPLICATION CHECK-LIST

April 2020 version

Please review each element of this checklist and initial where indicated. E-mail the completed package with an e-transfer for the \$500 application fee by e-mail to info@ccosc.ca by August 15, 2020.

The following items must be submitted for your application to be complete. All submissions should be sent to info@ccosc.ca

<u>Documents to be submitted to CCOS(C) by Applicant as one package</u>:

	Personal Information Application Form		
	Personal Essay		
	A letter from your provincial regulatory body indicating that you have a current license or registration to practice, that you are in good standing with the provincial regulatory body, and that you are not under investigation for any complaints of professional misconduct		
	Proof of eligibility to work in Canada		
	Proof of CCPA professional liability coverage		
	The required application fee as an e-transfer to info@ccosc.ca A copy of government-issued photo identification		
	If submitting foreign-language documents, scans of certified true copies of original documents and notarized English translations		
	Disclaimer regarding the International Academy of Neuromusculoskeletal Medicine examination		
	Waiver of Right to Inspect reference letter, sent to your referees.		
	Page 2 of the checklist, initialed where necessary		
<u>Docu</u>	ments to be submitted to CCOS(C) by Others:		
	A letter of recommendation from three sources able to comment on your suitability for specialist training; at least one, but preferably two, of these referees should be current Fellows of one of the 5 Federation of Canadian Chiropractic-recognized chiropractic specialty colleges. The referees need to submit directly to info@ccosc.ca		
	One set of official transcripts of relevant previous college or university work from the		
	institution(s) attended submitted directly to info@ccosc.ca		
	If submitting evaluated transcripts from institutions outside Canada, an evaluation by World Education Services submitted directly to info@ccosc.ca		
<u>Docu</u>	ments to be submitted to Others by Applicant:		
	One copy of the Letter of Recommendation Form, with the Waiver to Inspect the Letter of Recommendation signed, to each of your 3 referees, along with your signed Letter of Recommendation Consent for the referee to provide the reference. Referees will keep the consent for their own records and submit to CCOS(C) together with the letter of recommendation .		
	Any foreign-institution transcripts to World Education Services with instructions to send the evaluated transcripts directly to info@ccosc.ca		

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Applicant Acknowledgements

Applicant Name:	Date:	(YYYY/MM/DD)
Applicant Initials: I agree outlined are subject to change.	e with the timeline for completion of	f the Program and I agree that costs
Applicant Initials: I agree separate from and in addition to	e that the registration fee, payable if the application fee.	f my application is accepted, is
Applicant Initials: I agree	e that the application and registratio	ons fees are non-refundable.
	e that the Executive Board of the CCO late Studies Program at the Board's on ant pool.	
	e that, should I be accepted as a cand s the right to modify elements stated tance into the Program.	
Program, the Executive Board has	e that, should I be accepted as a canonic the right to add elements necessar the constituent parts of the program	ry to complete the program if I take