



APPLICATION CHECK-LIST

August 2018 version

Please review each element of this checklist and initial where indicated.

Application package:

- 1) Read all 7 parts of the application before completing the application, starting with the introduction to get an overview of the program
- 2) Where possible, we have provided fillable pdf forms for your convenience, but forms that require signatures and initials will still need to be printed, signed, then scanned for electronic submission to CCOS(C) at info@ccosc.ca
- 3) Convert all forms and documents, checking with the list below, into an electronic **pdf** format for submission
- 6) E-mail the completed package with an e-transfer for the \$500 application fee by e-mail to info@ccosc.ca no later than **November 1, 2018**.

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

Documents to be submitted to CCOS(C) by Applicant as one package:

- 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 Academy of Chiropractic Orthopedics examination
- Waiver of Right to Inspect reference letter (this form is to be sent to CCOSC as part of your package and to your referee)
- Page 2 of the checklist, initialed where necessary

Documents 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

Documents 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.
- Any foreign-institution transcripts to World Education Services with instructions to send the evaluated transcripts directly to info@ccosc.ca

Notes on the Letters of reference:

- 1) When a referee agrees to write you a reference, print and sign the consent for the letter and the waiver of the right to review the letter and send those signed forms to the referee along with the fillable pdf Letter of Reference form for them to fill in
- 2) Instruct the referee to submit the letter of reference to CCOS(C) by e-mail at info@ccosc.ca
- 3) Give your referees clear timelines for completion and submission.

Applicant Acknowledgements

Applicant Name: _____ **Date:** _____ (YYYY/MM/DD)

_____ Applicant Initials: if my application is accepted in November 2018, I agree to attend the 2-day Cumming fracture courses in Banff, Alberta on **January 17 and 18, 2019.**

_____ Applicant Initials: I agree with the timeline for completion of the Program and I agree that costs outlined are subject to change.

_____ Applicant Initials: I agree that the registration fee, payable if my application is accepted, is separate from and in addition to the application fee.

_____ Applicant Initials: I agree that the application and registrations fees are non-refundable.

_____ Applicant Initials: I agree that the Executive Board of the CCOS(C) has the right to cancel or postpone admission to the Graduate Studies Program at the Board's discretion, even if there are qualified applicants in the applicant pool.

_____ Applicant Initials: I agree that, should I be accepted as a candidate for the Graduate Studies Program, the Executive Board has the right to modify elements stated to be constituent parts of the program at the time of my acceptance into the Program.

_____ Applicant Initials: I agree that, should I be accepted as a candidate for the Graduate Studies Program, the Executive Board has the right to add elements necessary to complete the program if I take longer than 3 years to complete the constituent parts of the program at the time of my acceptance into the Program.