ORDRE DES OPTOMÉTRISTES DU QUÉBEC

APPLICATION FOR THE ISSUE OF A PERMIT TO PRACTICE OPTOMETRY ON THE BASIS OF A LEGAL AUTHORIZATION TO PRACTICE OUTSIDE QUÉBEC (CANADA AND UNITED STATES)

1. GENERAL INFORMATION

The holding of a doctorate in optometry from the Université de Montréal is required for the issue of a permit to practice optometry by the Ordre des optométristes du Québec and of special permits with respect to the use of medication. However, a person not holding such a doctorate who is authorized to practice optometry elsewhere in Canada or the United States or who considers that the diploma (s) held and/or training received is (are) equivalent to this doctorate may apply to have the Ordre issue such a permit if the person is able to establish that this authorization or equivalence is held in accordance with the applicable legislative and regulatory requirements (see the relevant references and regulatory provisions on equivalence standards in Appendix I).

To submit an application, you must provide the Ordre with the following documents:

1. This form, duly completed and signed;
2. A certified cheque or postal money order in the amount of **Canadian** $114.98 ($100 + GST and QST), payable to the "Ordre des optométristes du Québec," for the examination of your application and issuance of permits (these funds are not refundable)
3. For any authorization with respect to the practice of optometry in a jurisdiction outside Québec to which you refer in the form, a **certificate of professional status**, duly completed by the responsible regulatory authority and sent directly to the Order;

The evaluation and processing of the application will be performed in accordance with applicable legislative and regulatory requirements, as a function of the information provided on this form and the related documents.

In due course, any information or decision about your application will be conveyed to you at the email address that you enter in Part 2 below.

Please note that to be issued a regular permit to practice optometry in Québec, a person must have sufficient knowledge of French, in accordance with the requirements of the *Charter of the French language* (R.S.Q., c. C-11). However, a temporary permit to practice, valid for a period of at most one year and renewable three times according to certain conditions, may be issued to a person without sufficient knowledge of French.

A fee of $574.88 Canadian ($500 + GST and QST) is required for the issuance of a temporary permit (the $114.98 fee already paid will be subtracted).

Moreover, participation in an information session on aspects of professional ethics associated with the practice of optometry in Quebec is required prior to the issue of a permit to practice by the Ordre.

1265, rue Berri, bureau 505
Montréal (Québec) H2L 4X4
T 514 499.0524 **F** 514 499.1051

2. IDENTIFICATION AND CONTACT INFORMATION

Family name: **First name:**

No. and street: **Apartment:** **City:**

Province/State: **Postal code** **Country:**

Telephone: **E-mail:**

Date of birth: **Language(s) spoken:** **French** **English**

Other(s):

3. OPTOMETRY DIPLOMAS AND TRAINING

Titre du diplôme : **Année d'obtention :**

Institution de formation :

4. EXAMINATIONS REQUIRED TO PRACTICE OPTOMETRY

I have already successfully completed:

Examination of the Optometry Examining Board of Canada Yes No Year:

Examinations of the National Board of Examiners in Optometry (US) Yes No Year:

5. AUTHORIZATION TO PRACTICE OPTOMETRY OR ANOTHER PROFESSION IN QUÉBEC OR IN A JURISDICTION OUTSIDE QUÉBEC

Please indicate below if you are or have been holder of an authorization to practice optometry or another profession in Québec or outside Québec. You may attach additional pages if necessary.

For any authorization to practice **optometry** that you have currently or did have outside Québec, you must ask the regulatory authority responsible for completing and directly send us a certificate of professional status pursuant to Appendix I.

Name of the authorized profession:

Name of the jurisdiction (country, province, state):

Validity period of the authorization: from to

day/month/year day/month/year

Right regarding the administration or prescription of:

- medications for the purpose of eye examinations: Yes No
- medications for treating eye conditions: Yes No

Places of practice:

Name and address of the clinic or facility

Period (start and end date (month/year):

Name of the authorized profession:

Name of the jurisdiction (country, province, state):

Validity period of the authorization: from to

day/month/year day/month/year

Right regarding the administration or prescription of:

- medications for the purpose of eye examinations: Yes No
- medications for treating eye conditions: Yes No

Places of practice:

Name and address of the clinic or facility

Period (start and end date (month/year):

6. DISCIPLINARY AND JUDICIAL RECORD

Please answer the questions below about your disciplinary or judicial record. You may attach additional pages if necessary.

Have you already been the subject of a disciplinary decision by a professional order or equivalent organization imposing a disciplinary penalty?

Yes No

Name of the professional order or equivalent organization:

Date of the decision: File No.:

day/month/year

Nature of the offence:

Nature of the penalty:

Length of the penalty: to

day/month/year day/month/year

Have you ever been found guilty of a criminal offence by a Canadian or foreign court? (Answer "no" if you have obtained a pardon)

Yes No

Court:

District: Province/State: Country:

Date of the decision: File No.:

day/month/year

Nature of the offence:

Sentence imposed:

7. OTHER RELEVANT INFORMATION

Please mention below any other information relevant to this application and attach any relevant documents. You may attach additional pages if necessary.

8. SOLEMN AFFIRMATION

I, the undersigned, solemnly affirmed that all of the information provided on this form and appearing on the attached documents are true and authentic.

Signature of the person identified in Part 2 of this form: **Date:**

Useful information

- ***Charter of the French Language*** **(CQLR c. C-11)**
- ***Professional Code*** **(CQLR c. C-26)**
- ***Regulation respecting the diplomas issued by designated educational institutions which give access to permits or specialist's certificates of professional orders*** **(CQLR c. C-26, r. 2)**
- ***Regulation respecting legal authorizations to practise optometry outside Québec that give access to the permit of the Ordre des optométristes du Québec*** **(RLRQ, c. O-7, s. 4)**