

The following requirements must be submitted to the Alberta College and Association of Chiropractors (ACAC) before your application will be processed.

Indicate the requirements that are included with your application:

- \$300 non-refundable application fee
(payable by cheque, money order, or Visa/Mastercard)
- Completed notarized application form
(signed and stamped by a Notary Public or Commissioner for Oaths)
- Notarized official passport photo taken within the last 12 months
(signed and stamped by a Notary Public or Commissioner for Oaths)
- Proof of citizenship or that you have been lawfully admitted to Canada and are entitled to work in Canada (e.g., copy of passport or birth certificate, or copy of Canadian work visa if you are not a Canadian citizen)
- Results of (proof of passing) the CCEB Clinical Competency Examination
If the results are not included, have they been requested? Yes No
- Your official Doctor of Chiropractic transcript mailed directly from your chiropractic college.
Fax/email/photocopies are not accepted.
Has your official transcript been requested? Yes No
- Letter of standing mailed directly from any other jurisdiction where you are or have been licensed.
Fax/email/photocopies are not accepted.

Mail your completed application and additional requirements to:

**Alberta College and Association of Chiropractors
11203 70 St NW
Edmonton AB T5B 1T1**

Questions?

If you have questions regarding the application and registration process, contact Debra-Lynn Clouthier, Director of Administration and Regulatory Services, directly at the ACAC office: 780-420-0932.

Revised November 24, 2016

Registration Process

The registration process can take up to six weeks. Candidates are strongly advised to refrain from entering contractual arrangements for practice until they have satisfied all the requirements for licensure, including obtaining the required professional liability protection and subsequent ACAC practice permit.

Once the requirements listed on the previous page have been met:

1. We will email you within five business days to confirm receipt of your application and indicate if anything is outstanding.
2. The email will include a calculation of fees owing for the remainder of the ACAC year (July 1 – June 30), pro-rated quarterly based on the expected date of licensure. Fees are payable by cheque, money order, or Visa/Mastercard.
3. Upon payment of all fees owing, we will email you an open book registration exam. The passing grade for the exam is 100%.
4. Upon successful completion of the exam, we will provide instructions to you to secure professional liability protection.
 - Members must hold at least \$5 million per claim, and \$5 million aggregate amount per year on their policies.
 - Professional liability protection must be secured before a practice permit is issued.
 - Be advised that you cannot yet practice chiropractic in Alberta.
5. After we receive proof of professional liability protection, the ACAC office generally requires five business days to activate your practice permit.

You have three months to complete your registration for a practice permit with the ACAC. If you have not taken the steps to have your practice permit activated, your application will be closed and none of the fees paid will be returned. The ACAC will not retain any documentation associated with a closed application. Should you want to register after your application has been closed, you will need to initiate a new application.

All sections must be completed. Print clearly.

Application Type

- General Class (new grads, applicants from outside Canada) Agreement on Internal Trade (AIT) (currently hold an active chiropractic licence within Canada)

Applicant Information

Name:

Current address: City/PR: Postal code:

Mailing address (if different): City/PR: Postal code:

The ACAC is primarily an electronic communicator. Invoice notices, membership renewal notices, regulatory updates, newsletters, and notices of Practice Visit/X-ray reviews are issued only electronically. Members are required to provide a current email address and to check it regularly as part of their professional obligations.

- I consent to receive information electronically from the ACAC.

Email address:

Phone number: Emergency contact number:

Fax number: Date of birth: M D Y

Are you legally eligible to work in Canada? Yes No

Provide proof of citizenship/that you have been lawfully admitted to and are entitled to work in Canada.

Date you would like to be licensed: M D Y

Chiropractic Educational Background

Name of chiropractic college program attended:

Location: Graduation date: M D Y

Chiropractic Professional History

List all chiropractic associations or licensing bodies where you have held a license to practice.

Include beginning and end dates.

Name	Initial date of registration			Registration ended (if applicable)		
1.	M	D	Y	M	D	Y
2.	M	D	Y	M	D	Y
3.	M	D	Y	M	D	Y

A letter of standing is required from all jurisdictions where you are or have been licensed to practice and must be mailed to the ACAC directly from those licensing bodies. Fax/email/photocopies are not accepted.

Acupuncture

In Alberta, acupuncture is an advanced restricted activity. To provide needle acupuncture, chiropractors must be certified and provide demonstration of training to the satisfaction of the Registrar.

Will you be providing needle acupuncture? No Yes

If yes, provide a copy of your certificate of completion.

Denial of Registration

Have you ever been denied registration by a chiropractic association or licensing body? No Yes

If yes, provide details for each denial (date, organization name, reason).

Discipline History

Have you ever been disciplined by a chiropractic association or a licensing body, or are you currently undergoing an investigation, alternative complaint resolution process, hearing or appeal related to unprofessional conduct? No Yes

If yes, provide details (e.g., location, charge(s), outcome(s)).

Criminal History

Have you ever pleaded guilty to or been found guilty of a criminal offence for which you have not been pardoned? No Yes

If yes, provide the location and details of the charge(s).

Do you have any current outstanding criminal charges against you? No Yes

If yes, provide details of the charge(s).

Disclosure of Applicant Information

Where applicable, be advised that as part of the licensing process, the ACAC is required to provide some of the information provided in these application materials to the Canadian Chiropractic Association (CCA) and the Canadian Chiropractic Protection Association (CCPA) for the purposes of activating your practice permit.

I understand that information provided as part of this application process may be provided to CCA/CCPA.

The \$300 application fee is non-refundable. An application received prior to issuance of an ACAC practice permit will remain active and valid for a period of three months from the date of receipt at the ACAC office.

Applicant signature

Date

