



Application Instructions

Previously registered applicant

1. Personal Information

Name

Your registration record must contain all your names. This includes full legal name, previous name, maiden name, alias or adopted name. Married physiotherapists who adopt their spouse's last name but continue to use their maiden name in practice must still report their adopted name.

Full name: Enter your full name exactly as it appears on the government issued identification included with your application. This is the name that will appear on your practice permit and the member register, unless you've informed us that you will use a different name when practicing physiotherapy.

Practice name: You must practice in the name that appears on your practice permit. If you plan to use a name other than your full name reported above, enter it here.

Other last name: This includes your legal name, previous name, maiden name, alias or adopted name not reported in the full name field.

Gender

Indicate your gender by checking the appropriate box.

Date of birth

Enter your date of birth either written in full or using the format of month/day/year.

2. Current Residence Address

Provide your current residence address, telephone numbers and email so we may contact you regarding your application. If this information changes before your application is processed you must inform our office.

3. Academic Background

Provide details about your physiotherapy education as well as other degrees earned. You only need to report university-level education.

Physiotherapy education

- The type of degree(s) in physiotherapy, e.g., bachelor's, master's, doctorate.
- The full name and location (province/state/country) of the degree-granting institution.
- The year the degree was granted.

Education other than physiotherapy

This information is collected to fully understand the profile of physiotherapists and is used for research and planning.

- The type of degree(s) received.
- The name of the program completed, e.g., kinesiology, physical education.
- The full name and location (province/state/country) of the degree-granting institution.
- The year the degree was granted.

4. Physiotherapy Competency Examination

Provide dates for the written and clinical components to accurately reflect your examination status. Leave fields blank if they are not applicable.

5. Practice Hours

This is a record of hours you practiced as a physiotherapist during the last 5 years. You may include hours you provided physiotherapy services (assessment, diagnosis, treatment), engaged in research and administration or delivered education with respect to health services delivery and the science, techniques and practice of physiotherapy. You must report hours for the period October 1 to September 30 as this matches our registration year.

6. Language Proficiency

We ask applicants to let us know if they are able to provide physiotherapy services in a language other than English to assist the Alberta public looking for services in a specific language. This information appears in our online Find a Physiotherapist search function.

7. Employment History

Provide a comprehensive summary of your employment as a physiotherapist for the last 10 years. Start with your current or last employer. Print and include page 2 twice if more than 3 employers. For each employer provide:

- The dates of employment - beginning and end dates.
- Your title or position held.
- The name and location of your employer.

8. Registration

This section asks for information about your registration as either a physiotherapist or another regulated professional. Include details for the last 10 years. Include jurisdictions where you have been registered even if you did not practiced in that jurisdiction.

9. Alberta Employment

Complete this section only if you have accepted employment as a physiotherapist in Alberta. Provide your anticipated start date - keep in mind that you may not start to practice as a physiotherapist in Alberta until you are registered and we've issued you a practice permit. Tell us where you will provide services and details of the services provided to the extent you are able at this time. Print and include page 3 twice if more than 1 employer.

10. Good Character + Reputation

This section asks for information about your current and past practice as a physiotherapist, or another regulated professional, and criminal record. Provide a written explanation if you answer yes to questions A, B, C or D. You may include your explanation on your application or in a sealed envelop marked 'confidential'. The contents will only be disclosed to staff or committee members who have a need to know.

If in doubt, it is best to be honest and forthright by disclosing information rather than to risk dealing with a false report. Answering yes to a question does not necessarily mean that you will be refused registration. It does mean we may ask for and consider other information to make a decision about your character and reputation. You will have the opportunity to respond to any information provided by other sources.

11. Payment

You must pay the application and practice permit fee. We accept the following payment methods:

- Visa
- MasterCard
- Personal cheque
- Money order

If paying the fees by Visa or MasterCard, enter the credit card number and expiry date on the application. You may also pay by cheque or money order in Canadian dollars.

Fees will be charged to your credit card, or cheque/money order cashed, when your application file is complete and based on the fees applicable for the effective date of registration. If you cancel your application the non-refundable application fee will be collected at that time.

12. Email Consent

With the exception of regulatory notices, Physiotherapy Alberta will only send you electronic communication which you explicitly consent to receive. As well, your consent is required for Physiotherapy Alberta to share your name and email address with researchers who are looking for physiotherapists to participate in studies to promote innovative, quality physiotherapy care. Indicate your initial consent on the application form, You may change your consent at any time once registered through your Profile.

13. Applicant's Declaration

Read and complete the declaration carefully before signing your application.

Forms you will need:

Application for Registration as a Physiotherapist

This is the form required to start the registration process. The application is a fillable PDF form. You may download and complete it on your computer or print and manually fill out the form. Either way, you must print the form to add your signature.

Regulatory Reference

This is the form you will send to each jurisdiction where you have been registered or licensed as a physiotherapist, or another regulated professional, for the last 10 years. The jurisdiction must confirm your registration or license status and conduct history.

if you practiced but were not registered in a jurisdiction where the physiotherapy profession is subject to registration, licensing or any other form of regulation, you must send this form to the regulatory agency so they can confirm you were not registered.

*The reference must be received **directly** from the regulatory organization no more than 3 months before your application file is complete.*

Checklist

Use the Checklist to ensure you are submitting all the required documentation.

Continuing Competence

Members removed from the General Register after October 1, 2011 must also provide evidence of completing the Continuing Competence Program activities required for the last year they were registered.

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