

Form A – Dispensing Experience Verification Form

Please PRINT all information clearly if you are not filling out this form electronically. The College understands the importance of protecting personal information. The information contained on this form will be used by the College in carrying out its regulatory activities only; for the purpose of regulating the profession in the public interest.

Please complete this form if you did not graduate from an accredited Canadian program, or if your graduation letter does not verify your practical fitting and/or dispensing experience. Complete one form for every practice being used to confirm your hours. For information on practical requirements, please refer to the Practicum Policy.

A. Personal Information			
First Name:	Middle Name:	Last Name:	Registration Number:
B. Dispensing Experience			
Business Name:			
Address:			
City:	Province:	Country:	Postal Code:
Phone Number:	Fax Number:	Email Address:	
First Day of Dispensing:		Last Day of Dispensing (if applicable):	
How many hours did/do you dispense per week at this practice location?			
How many hours total have you dispensed at this practice location?			
Number of eyeglass fittings: (=>250)		Number of contact lens fittings: (=>20)	
Number of multi focal: (=>100)		Number of soft:	
Number of high myopic: (=>25*)		Number of rigid gas permeable: (=>5)	
Number of hyperopic: (=>25*)		*You are required to have either 25 high myopic or 25 hyperopic fittings, or a combination of both.	

C. Supervisor Declaration	
<p>This section should be completed by the registered optician, optometrist, or medical doctor who supervised your dispensing.</p> <p>I verify and confirm that the individual named above has dispensed under my supervision and that the information in this form is complete and accurate.</p>	
Supervisor Name:	Supervisor Name:
Registration Number:	Registration Number:
Regulatory Authority:	Regulatory Authority:
Signature:	Signature:
Date:	Date:

Submit this form by email to registration@collegeofopticians.ca or by fax to 416-368-2713. In keeping with our goal to move to a paperless environment, documents received by mail will not be accepted.