



ORDRE DES
PSYCHOLOGUES
DU QUÉBEC

PERMIT APPLICATION
FORM

2010-2011

A large, empty rectangular area with a light gray gradient, intended for the application form content.

CANDIDATE INFORMATION

Identification

Surname: _____

(Maiden name in the case of married women)

Given Names: _____

Domicile: _____

Telephone home: () _____ Work: () _____

E-mail: _____

Date of birth: _____

Sex

Female

Male

Mother tongue

French

English

Other

Language of work

French

English

Other

Citizenship or residence

Canadian citizen

Legally admitted to Canada as a permanent resident
(attach a proof of admissibility)

Other

Permit to practice (other province or U.S. state)

Do you have a permit to practice from another province or from a U.S. state?

Yes

No

Specify the jurisdiction: _____

CANDIDATE INFORMATION

Criminal or disciplinary offence

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

Yes No

If yea, specify:

Date of judgment: _____

Offence: _____

Sentence: _____

Record no.: _____ **Court:** _____

Province: _____ **District:** _____

Country: _____ **Court:** _____

Have you ever been the subject of a disciplinary decision by a Quebec professional order other than the Ordre des psychologues du Québec or by an equivalent professional body outside Quebec?

Yes No

If yes, specify:

Name of Quebec professional order: _____

Permit no.: _____

Date of decision: _____

Offence: _____

Sanction: _____

Name of professional body outside Quebec: _____

Province, territory, or country: _____

Permit no. issued by that body: _____

Date of decision: _____

Offence: _____

Sanction: _____

UNIVERSITY EDUCATION

Recognized University Diplomas

To be completed by candidates with diplomas recognized by law as giving access to a permit.

Describe studies, in chronological order.

University	Diploma	Date received
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

I understand that a false declaration will result in the refusal of my application, and that an application accepted under false pretences is null.

I request the issue of a permit from the Ordre des psychologues du Québec, and I certify that the information supplied is accurate.

Signature

Date