



**INSTRUCTIONS**

This application form is for candidates who are applying to retake components of the Alberta Acupuncturist Registration Examination. Please complete and submit form prior to the spring/fall application deadline. This form must be submitted for each exam cycle. Incomplete applications may delay the registration process.

**PERSONAL INFORMATION**

CANDIDATE LAST NAME	CANDIDATE FIRST NAME	EXAM DATE <input type="checkbox"/> Spring <input type="checkbox"/> Fall
HOME ADDRESS		APT/SUITE/UNIT
CITY	PROVINCE	POSTAL CODE
EMAIL ADDRESS		PHONE NUMBER
SPECIAL ACCOMMODATIONS REQUEST ENCLOSED <input type="checkbox"/> YES <input type="checkbox"/> NO (Must be included with application)		

**EXAMINATIONS & FEES**

<i>Please indicate the examination(s) that you need to complete/retake.</i>		
EXAMINATION	FEE	ATTEMPT #
<input type="checkbox"/> Pan-Canadian Acupuncturists Examination	\$880.00	
<input type="checkbox"/> Safety & Jurisprudence	\$200.00	
<input type="checkbox"/> Modalities	\$300.00	
<input type="checkbox"/> Acupuncture Points	\$300.00	
<b>TOTAL</b>	<b>\$</b>	

\* Candidates who fail any part of the Alberta Acupuncturist Registration Exam are required to retake that part only. Pan-Canadian Examination and CAA Practical components are offered in the Fall and Spring of each year. An applicant for registration as a regulated member may attempt the registration examination 3 times. The Registrar or Registration Committee may grant permission to an applicant who has failed the registration examination 3 times to attempt the examination for a 4<sup>th</sup> and final time if the Registrar or Registration Committee is of opinion that extenuation circumstances exist.

**EXAMINATION SCHEDULE**

	FALL 2021 EXAMINATION	SPRING 2022 EXAMINATION
APPLICATION OPENS	June 1, 2021	December 1, 2021
APPLICATION CLOSES	July 15, 2021	January 14, 2022
WITHDRAW DEADLINE	July 30, 2021	February 1, 2022
SPECIAL ACCOMMODATION REQUESTS	July 15, 2021	January 14, 2022
EXAMINATION FEES DUE	August 13, 2021	February 15, 2022



**EXAMINATION LOCATION**

In response to the challenges posed by COVID-19, and in consultation with the provincial regulatory bodies and Yardstick Assessment Strategies, CARB-TCMPA decided to continue delivering the PCE using an online proctored format in April 2021. This will allow candidates to complete the exam remotely.

**DECLARATION**

I, the undersigned, declare that I will neither give to any person nor receive from any person any information pertaining to the content of the exam, either BEFORE, DURING or AFTER the examination.

**Applicant Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_ MM/DD/YYYY

**Please return your completed application with payment and all necessary documents via email or to the address below:**

**COLLEGE OF ACUPUNCTURISTS OF ALBERTA  
#201, 9612-51 AVENUE  
EDMONTON, AB T6E 5A6**

PAYMENT OPTIONS			
<b>Payment option 1 – Credit Card</b> *NOTE: THERE WILL BE A 2.5% SERVICE FEE ADDED TO YOUR TRANSACTION CHARGED BY MONERIS.		CARD TYPE <input type="checkbox"/> VISA <input type="checkbox"/> MASTERCARD	
CARDHOLDER NAME (as shown on the card)		AMOUNT TO BE CHARGED \$	
CARD NUMBER		EXPIRATION DATE MM /YYYY	
CARDHOLDER BILLING ADDRESS	CITY	PROVINCE	POSTAL CODE
I, _____ authorize the College and Association of Acupuncturists of Alberta to charge my credit card above for agreed upon fees. I understand that my information will be saved in my confidential file.			
_____ Cardholder Signature		_____ Date	
<b>Payment option 2 – Alternate</b> <input type="checkbox"/> E-Transfer <input type="checkbox"/> Money Order <input type="checkbox"/> Cheque <input type="checkbox"/> Cash    Money order/ Cheque number: _____			
<ul style="list-style-type: none"> <li>➤ E-Transfers can be sent to <a href="mailto:payments@acupunctorea Alberta.ca">payments@acupunctorea Alberta.ca</a> (Ensure to include your name and/or registration number in the message section and what the funds are for ex. application fee, registration, insurance, etc.)</li> <li>➤ Money orders and cheques can be made payable to the "CAA".</li> <li>➤ Money orders and cheques can be sent directly to: COLLEGE OF ACUPUNCTURISTS OF ALBERTA, #201, 9612-51 AVENUE, EDMONTON, AB T6E 5A6</li> <li>➤ Cash payment is only acceptable when application is submitted in person.</li> </ul>			



**REQUEST FOR TESTING ACCOMMODATIONS**

Candidate Name: \_\_\_\_\_  
(last name, first name)

**Components requiring accommodation (check all that apply)**

- Acupuncture Points
- Modalities
- Safety & Jurisprudence Examination

**Specific Accommodations requested (ex. Additional time, private room)**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Documentation submitted (check all that apply)**

- Completed Request for Testing Accommodations Form
  - Current documentation by a license health professional related to special needs
  - Other, please specify, \_\_\_\_\_
- \_\_\_\_\_

**Pan-Canadian Acupuncturists Examination**

To request an accommodation, candidates must complete both the [Request for Accommodation form](#) and the [Verification of Candidate's Disability form](#). Candidates should carefully read the instructions, ensure that both forms are completed, and send completed forms to [accommodations@carb-tcmpa.org](mailto:accommodations@carb-tcmpa.org).

Applicant Signature: \_\_\_\_\_

Date: \_\_\_\_\_ MM/DD/YYYY

**FOR OFFICE USE ONLY**

Decision: \_\_\_\_\_

Date of notification of decision to candidate: \_\_\_\_\_

Comments: \_\_\_\_\_

Registrar Signature: \_\_\_\_\_

Date: \_\_\_\_\_ MM/DD/YYYY