



THE COLLEGE OF OPTOMETRISTS OF BC

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CONTINUING EDUCATION APPROVAL REQUEST FORM

In order to receive approval for a continuing education (CE) event, a completed *CE Approval Request Form* along with all required documents, as outlined in the [College Policies](#), must be submitted to the College office, no less than **30 days in advance** of the event (preferably by e-mail). CE approval requests received less than 30 days in advance of the event will not be considered.

EVENT INFORMATION

Event Sponsor: _____

Event Name: _____

Presenter: _____

Location: _____

Number Of Hours: _____

Date: _____

Identity Code: _____

(assigned by the College)

CONSENT FORM

I, _____, hereby confirm that upon receiving the
printed name of event sponsor

identity code assigned by the College, I will ensure that a sample copy of the official certificate of attendance indicating the assigned identity code (*i.e. 20120101-H-02-01*) along with the number of College approved CE hours (*i.e. 2 hours of ocular health related continuing education approved by The College of Optometrists of BC*) and the signature of the person responsible for the event will be forwarded to the College office for approval. I understand that it is my responsibility to ensure that all attendees are provided with an official certificate of attendance, as approved by the College, in order for them to receive credit for the above event.

I will ensure that attendance will be verified by a sign-in/sign-out sheet on which the optometrists' names will appear in legible form, which will be forwarded to the College office, no later than 7 business days following the approved event. I understand that failure to comply with the above may result in the denial of future requests.

Signature: _____

Date: _____

Address: _____

Email Address: _____

Phone: _____

Please note that requests must be made individually for each event