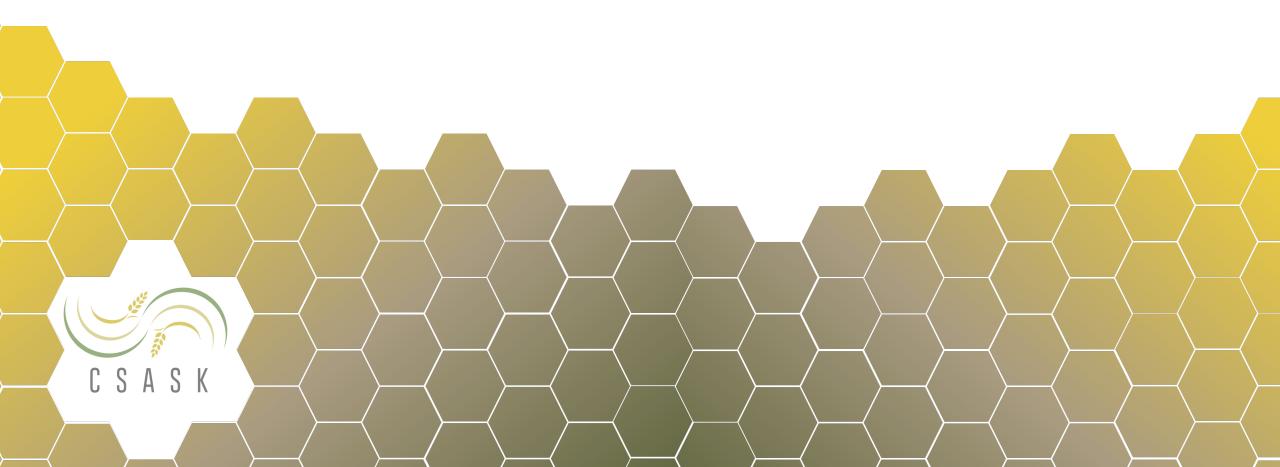
INSTRUCTIONS FOR RENEWAL AND RESIGNATION

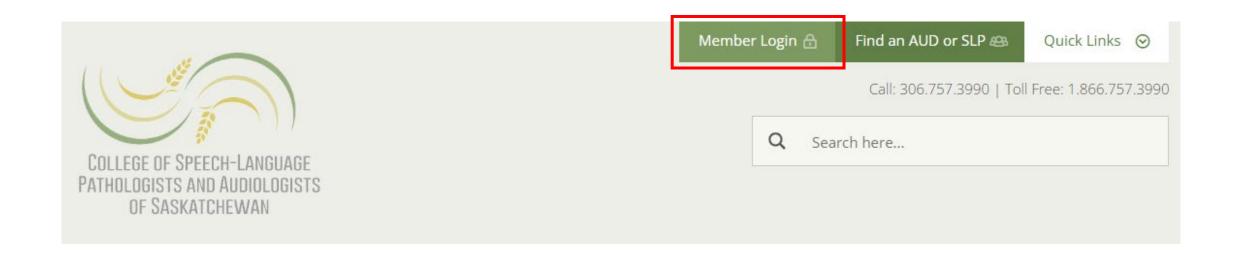


RENEWAL

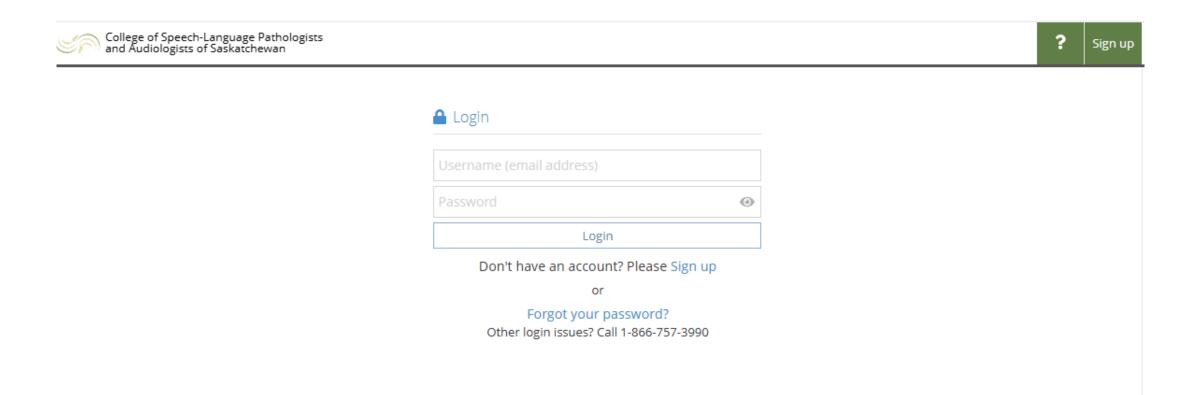
Detailed information about renewal requirements are available on the CSASK website, within the CSASK Regulatory Bylaws and the CSASK Fee Bylaws.

To avoid the late penalty, your renewal (including payment) is required by **December 1**st.

ACCESS THE REGISTRANT PORTAL THROUGH THE CSASK WEBSITE

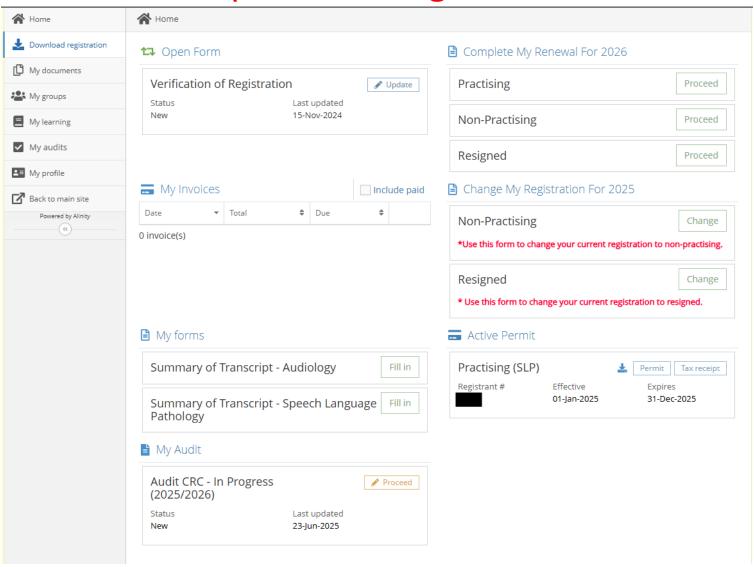


LOG INTO THE PORTAL

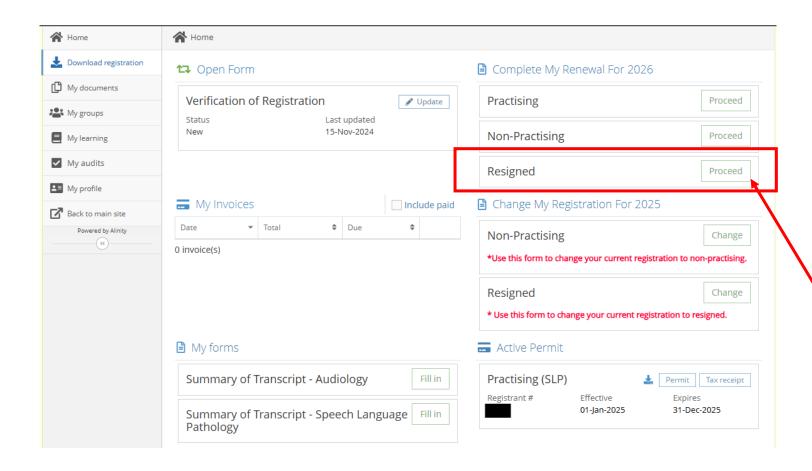


"DASHBOARD"

This is an example of the registrant "dashboard"



RESIGNATION

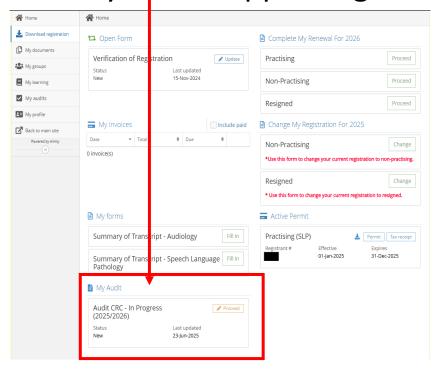


Members/Registrants wishing to discontinue their CSASK membership/registration should submit a resignation request through the portal. Resignations by telephone and email will not be accepted. Please contact CSASK if you have any questions related to resignations.

Click "Proceed" and follow the steps to resign

STOP

Registrants who are required to provide a Criminal Record Check (CRC) during renewal, will have "My Audit" appearing on their dashboard.



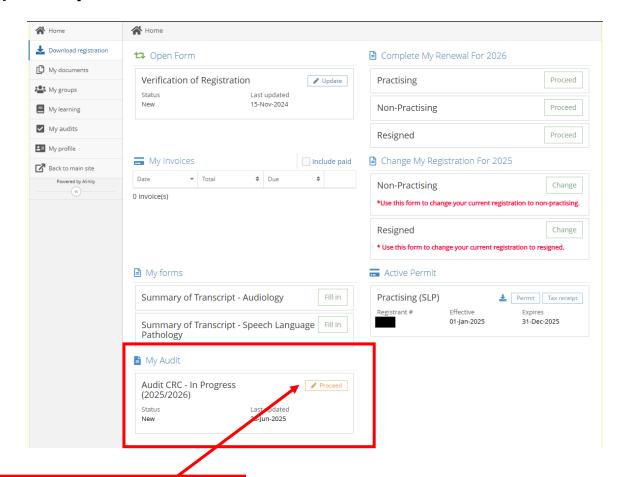
If you have been selected for the CRC audit, continue to the next slide.

If you have **NOT** been selected for the CRC audit, skip to slide 12.

Criminal Record Check (CRC) Requirement

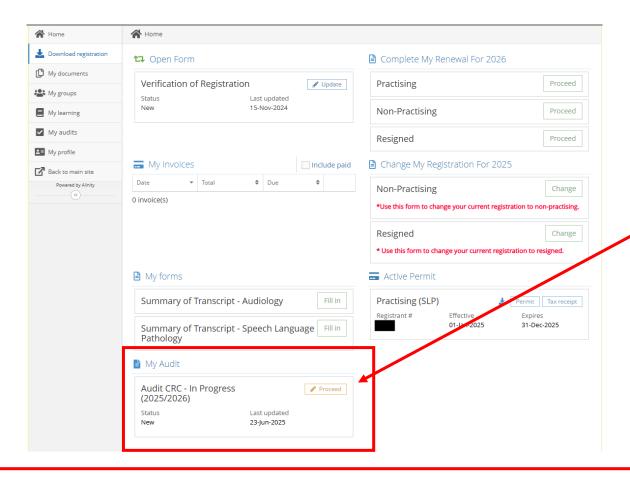
Background:

The CSASK Regulatory
Bylaws require that
practising registrants
submit a criminal record
check (CRC) every five
years at the time of
annual licence renewal.



If you have been selected to complete a CRC during renewal, "My Audit" appears on your dashboard.

Criminal Record Check (CRC) Requirement Cont.



* You will not be able to submit your renewal until you have completed the CRC.

- click "Proceed" to be redirected to CSASK's
 Sterling BackCheck page.
- follow the steps to complete the ID verification and the CRC.
- the report will be sent directly to CSASK.





Instructions for Canada Post Physical Identity Verification

To have your ID verified by Canada Post, please follow these simple steps:

- Print this form, or save it on your mobile device, and take it to one of the participating Canada Post retail locations listed below.
- You must bring one (1) piece of appropriate Primary ID, one (1) piece of appropriate Secondary ID, and one (1) Proof of Residence. Please read below for acceptable types of documentation required.
- The Canada Post retail clerk will scan the barcode on this form and then verify your IDs. Verification of your identity will then be sent to us electronically.

Acceptable types of ID for Physical ID Verification

Primary ID must be government-issued photo ID containing your **name**, **signature**, and **date of birth**. If an address is provided on your ID, please ensure it is your <u>current</u> address or it will not be accepted. Only the following IDs will be accepted as Primary:

- Provincial Driver's License
- · Foreign Driver's License
- Canadian or Foreign Passport
- Certificate of Indian Status Card
- CNIB Card

- Provincial ID Card
- Canadian Permanent Resident Card
- Firearms Possession and Acquisition License

Secondary ID may be any type of ID displaying your full name, ideally government-issued.

Examples of Secondary IDs:

- · Additional primary ID as listed above
- Birth Certificate
- · Student ID Card

Proof of Residence

Proof of Residence must display your current address. List of acceptable Proof of Residence:

- Attestation of Residence issued by the responsible authorities (shelters, soup kitchens, student/senior residence, long-term care facilities, Aboriginal reserves, work camps)
- Bank statement
- Canada Child Tax Benefit statement
- Canada Pension Plan Statement of Contributions/Quebec Pension Plan Statement of Participation
- Delivery Notice Card/Final Notice Card
- Government cheque or Government cheque stub with individual's name and address
- Income Tax assessment most recent
- Statement of Employment Insurance Benefits Paid (T4E)
- Major credit card statement along with related valid credit card

- Recent utility bill (residential telephone, cable TV, public utilities commission, hydro, gas or water)
- Private Post Office Box Rental Agreement (e.g. UPS Agreement)
- Municipal tax notice
- Vehicle Ownership or Insurance document
- Residential Lease, Residential Mortgage Statement or Agreement, Rental Agreement Lease, Agreement of Purchase and Sale
- Statement of Benefits from Provincial Workplace Safety or Insurance Board
- Statement of Direct Deposit for Provincial Works or Provincial Disability Support Program
- Insurance Policy
- Statement of Old Age Security (T4A) or Statement of Canada Pension Plan Benefits (T4AP)
- School, College or University Report Card or Transcript



location 3



Canada Post Physical Identity Verification

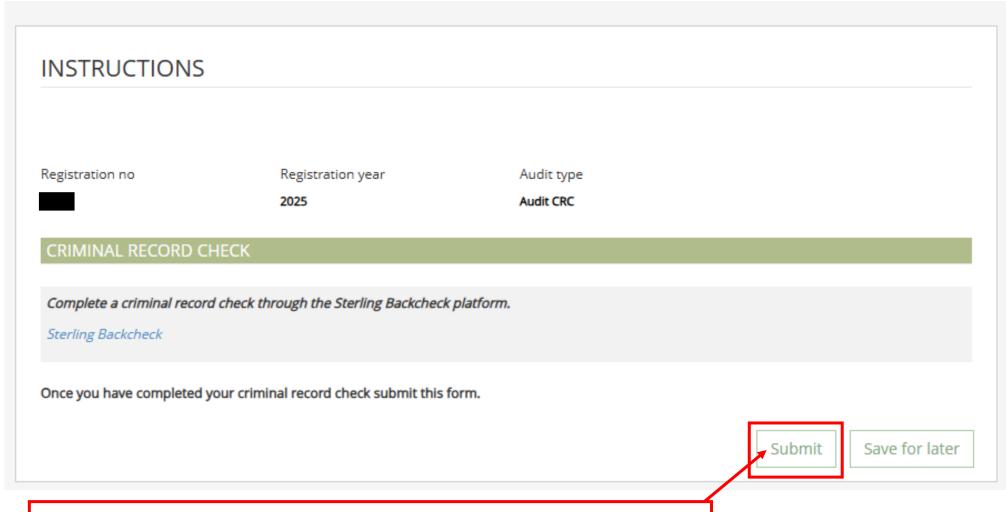
Privacy Notice: By providing this form and IDs to Canada Post, you consent to the following: Canada Post will collect the form, types of ID, and ID numbers you provide, and will provide them to Sterling Talent Solutions (Sterling) for the purpose of verifying your identity. Sterling may provide this information to the company that requested the identity verification.

For more information about privacy at Sterling, please visit http://www.sterlingtalentsolutions.com/pven. For more information about privacy at Canada Post, please visit http://www.canadapost.ca/privacy.

Date: September 2024	Transaction ID:	
Candidate Information		
First Name:		
Last Name:		
Date of Birth:		
Expiry Date:		
Participating Canada Post locations nearest to:		
location 1		
location 2		

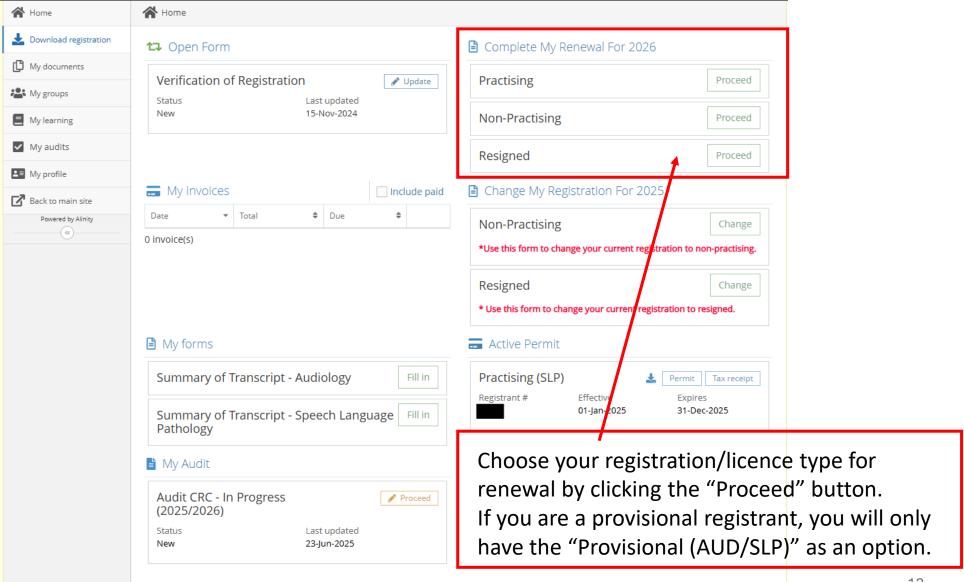
* If you are prompted to visit a Canada Post location to verify your ID, you will receive a form as shown. Follow the instructions on the form to complete your CRC requirement.

Criminal Record Check (CRC) Requirement Cont.



Once you have completed your CRC, return to the CRC audit in your member portal and click "Submit".

COMPLETING YOUR RENEWAL



WARNING:

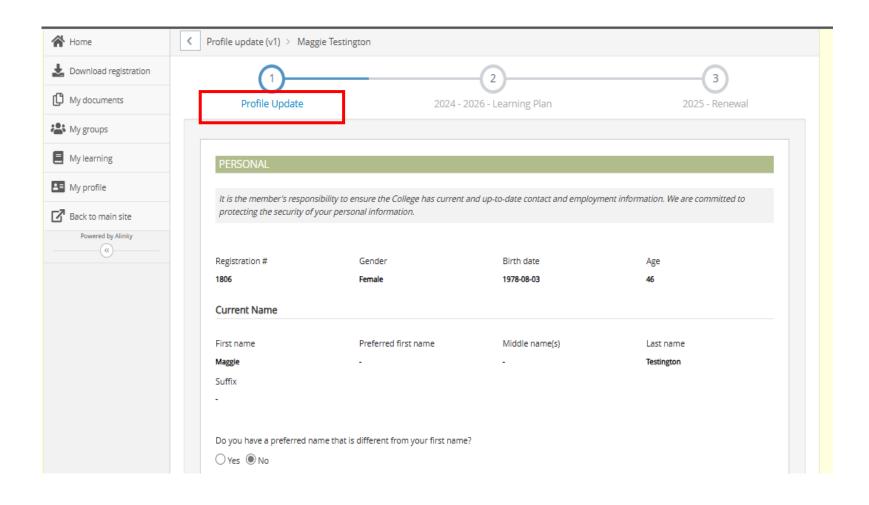
You may save your changes at any point throughout your renewal by clicking on "Save for Later" at the bottom of the page.

You may also restart your renewal, by clicking on withdraw. Changes will not be saved.



If you close the browser without saving, information entered will not be retained in the system.

STEP 1: PROFILE UPDATE



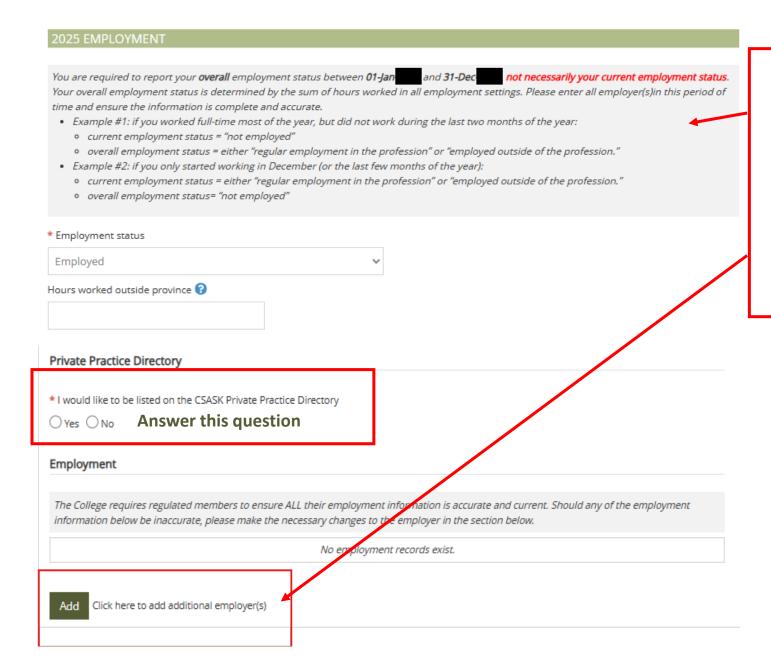
Ensure you renew and update (if necessary) the personal information appearing in your profile.

Your education is listed below. Degree Institute Granted year Masters University of Toronto 2024

Add new education if applicable

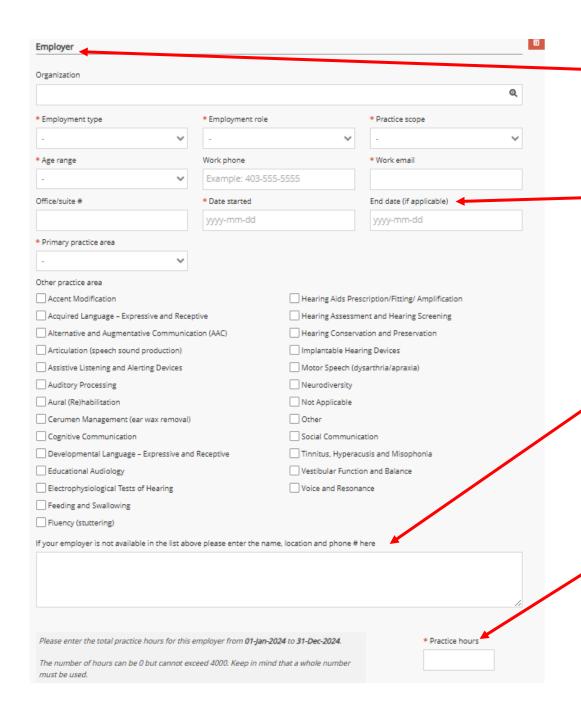
Click here to add additional education

- Add more than one entry into the Education section by clicking on the "Add" button.
- It is not mandatory to upload supporting documents.



You must enter employment information for all employers.

Enter additional employers by clicking on the "Add" button.

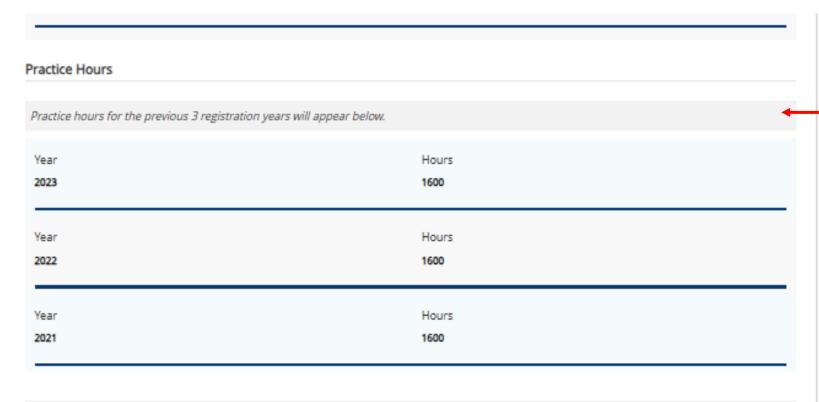


Update your employment record(s) with complete and current information.

If you are no longer working at an employment listed in your portal add a "End date" to the employment record

If your employer is not available in the "organization" drop-down list, you may enter the employer's details here.

Enter your Practice Hours/Currency for the current licence year that is ending.



This is the summary of practice hours you have completed in the most recent three years.

Your practice hours total must be a minimum of 750 hours in the previous 3 years to be eligible for a practice permit.

Total Hours

4800

Your employment status for this year requires that you report your insurance information. If your policy has changed, ensure that the information below is accurate and up to date. Insurer Policy number * Expiry date * Coverage per claim BMS Canada Risk Services 🔻 Novex Policy # 553474313 2024-07-01 5000000.00 lf your insurer is not available in the list above please enter the name, location and phone # here For registrants relying solely on employer PLI: Upload the completed Professional Liability Requirement and Employer PLI Coverage Form found under Registrant Resources-PLI at www.csask.ca PLI certificate or related form Click here to upload a supporting document from your computer Insurance Decisration I understand that it is my is sponsibility to: 1. maintain PLI coverage troughout the period of licensure that meets the requirements as set out by CSASK council. 2. ensure that my PLI coverage extends to the entirety of my practice in Saskatchewan 3. notify CSASK of any changes in personal and professional information pertaining to my licence, including any changes in PLI coverage. 4. make informed decisions regarding the insurance coverage needs of my practice if offering private services. I also understand that my employer's PLI policy does not extend to services provided outside of the scope of employment. * I acknowledge and accept the above declaration

Enter your new professional liability insurance (PLI) information and upload the required documentation using option 1 or 2.

Option 1 - Self purchased PLI which names you as the insured party

For registrants who hold personal coverage OR registrants who hold both personal and employer-provided coverage

- 1. Complete the PLI section of your renewal in the registrant portal with the information provided on your policy.
- 2. Upload your certificate of insurance.

Option 2 - PLI is supplied by your employer

For registrants who hold **ONLY** employer-provided coverage

- 1. Download the "PLI Requirement and Employer PLI Coverage Form" (shown at right) found on the Registrant page of csask.ca in the PLI Requirement section.
- 2. Complete the employee section of the form. (sections A and B).
- 3. Have your employer complete the employer portion of the form (section C) with as much information as they can supply, (for example if your employer does not know the policy number, they can add 001122 in that section.) Your employer should complete the bottom section of the form.
- 4. Complete the PLI section of your renewal in the registrant portal with the information provided on the form.
- 5. Upload the form to the portal.



PROFESSIONAL LIABILITY INSURANCE (PLI) REQUIREMENT
AND EMPLOYER PLI COVERAGE FORM

DO NOT USE THIS FORM IF YOU HAVE PERSONAL PLI COVERAGE

SECTION A: Registrant/Employee Information – Completed by Applicant/Registrant			
Surname: Last Name Previous Surname:	If Applicable First Name: First Name		
SECTION B: Employment Information – Completed by Applicant/Registrant			
Work Title e.g. Speech-Language Pathologist, Audiologist, Supervisor			
Employed at e.g. School District, Health Authority, Private Practice, Clinic			
Address Address of Employment			
City: City where employed Province: Province Postal Code: Postal Code			
Work Phone Work Fax If applicable Work E-mail Work Email			
SECTION C: Professional Liability Insurance Information – Completed by Employer			
SECTION C. Professional Elability histifance information – completed by Employer			
Insurer (Policy Provider):	Policy Number:		
e.g. AON, BMS, Westland, Chubb	Enter if Known. If Not Known: enter 001122		
Coverage Per Claim:	Policy Expiration Date:		
Enter amount of coverage per claim	Enter the expiry date of the insurance policy		
On behalf of the agency listed below, I verify that the individual listed in SECTION A is/will be covered under the			
employer's PLI policy for work as and an audiologist or a speech-language pathologist.			
Name (please print): Name of Supervisor/Manager_PositionPosition Name			
Name of Agency (Policy Holder): Name That is on the Policy (Employer)			
Address: Address of Employer (e.g. head office, office of the supervisor/manager)			
Telephone: Phone number E-mail: email address			
supervisor/manager signature	Date completed		
Employer Signature	Date		

NOTE: You are required to hold additional personal PLI insurance if you provide services outside of the workplace listed

19

This section lists jurisdictions where you are currently registered/licensed. Please ensure that all information listed below is correct and current. If this information is incorrect, please contact the College office. This section is only meant for jurisdictions in which you are currently active. Do not enter historical registrations that are not current. CASLPM - College of Audiologists and Speech-Language Pathologists of Manitoba Registrant/License # Effective date 2024-08-01 Are you maintaining or planning on maintaining your registration in this jurisdiction? ○Yes No * Expiry date 2040-08-01 Click here to add an additional Jurisdiction

Complete this section if you are registered in another jurisdiction.

CONSENT Member Involvement * () Yes () No I would like more information about serving on CSASK council and committees. * O Yes O No I am interested in serving on CSASK Council. * O Yes O No I am interested in serving on CSASK Committees. * (Yes (No I am willing to be a supervisor for CSASK provisional registrants or would like to receive information about the supervised practice period. Save for later Next Withdraw

Complete the *Member Involvement* section.

Reminder:

The "Withdraw" button is used if you wish to delete your renewal and start over.

Any information you have entered will not be retained.

The "Save for later" button is used if you are not ready to complete your renewal.

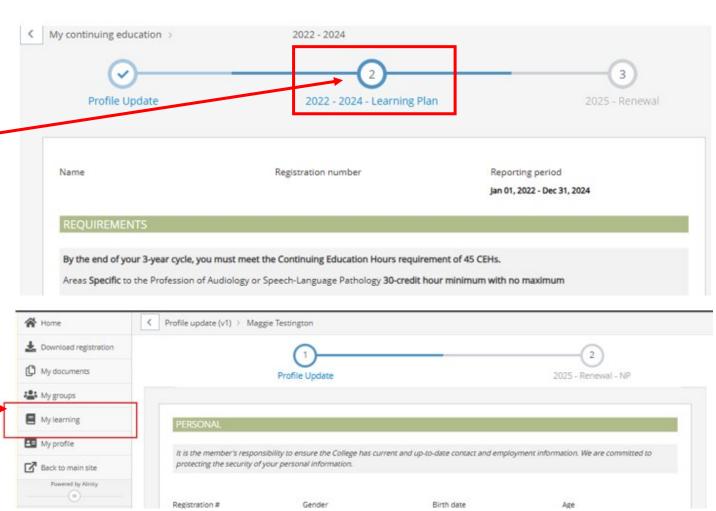
STEP 2:LEARNING PLAN - CONTINUING EDUCATION HOURS (CEHS)

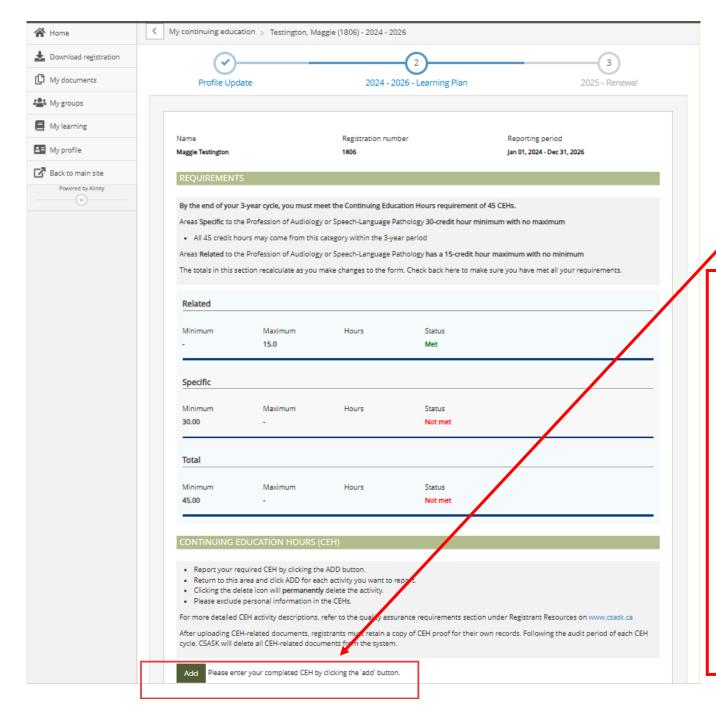
Practising and provisional registrants:

The CEH cycle is visible as step 2 on the *Learning Plan* page.

Non-Practising registrants:

- are not required to report CEHs.
- will <u>not</u> automatically be brought to the *Learning Plan* page as part of their renewal.
- may still upload CEHs by clicking on My Learning in the menu.

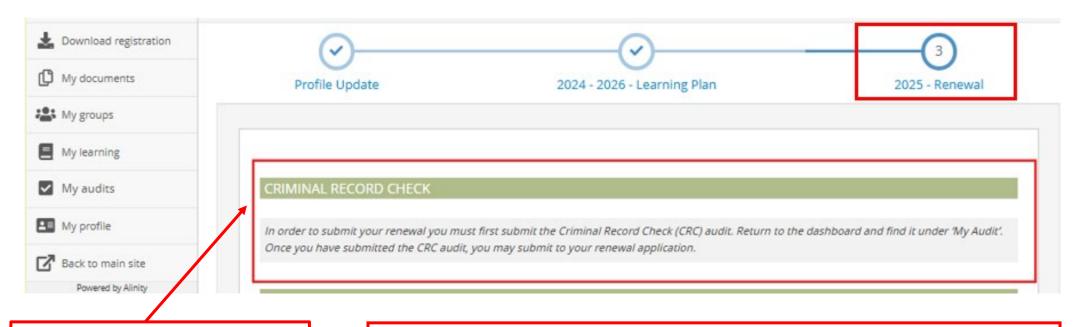




You may enter completed CEHs by clicking on the "Add" button.

- Review CEHs, proof, and entries to verify conversion from the old system.
- You will be required to submit proof of completion of CEHs if you are selected for audit.
- If you are at the end of your cycle this requirement must be met by December 31st.
 You will be able to submit your renewal even if you have not yet met this requirement by December 1st.

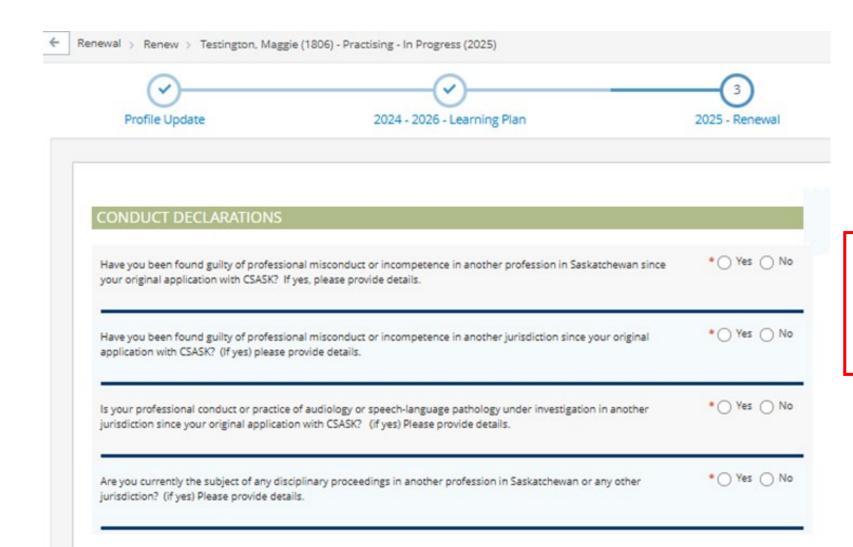
STEP 3: RENEWAL



This box will only appear if you have been selected to complete a CRC.

To submit your CRC, you must return to your dashboard.

Before exiting your renewal, click the "save for later" button to ensure your changes have been saved.



Answer the Conduct

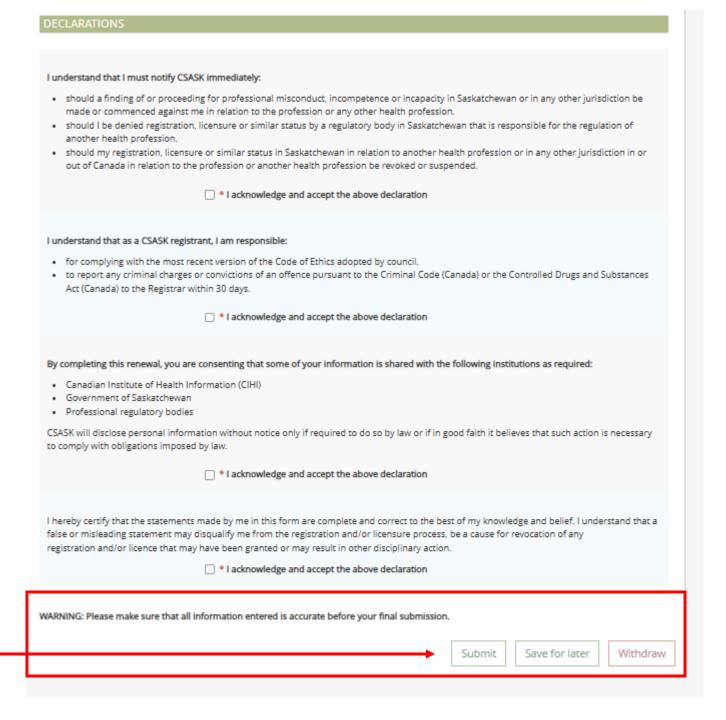
Declarations

statements.

Complete the *Declarations* section.

Submit your renewal if all information is complete and accurate.

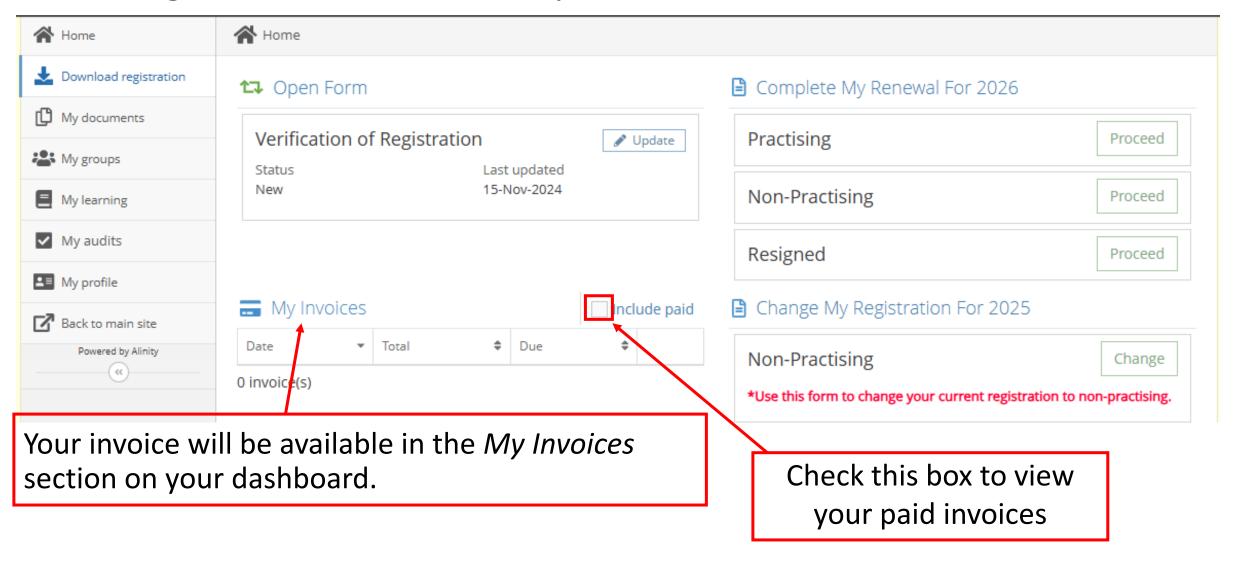
If you have saved your renewal for later, it has not been submitted until you click on submit.



STEP 4: PAYMENT OF FEES

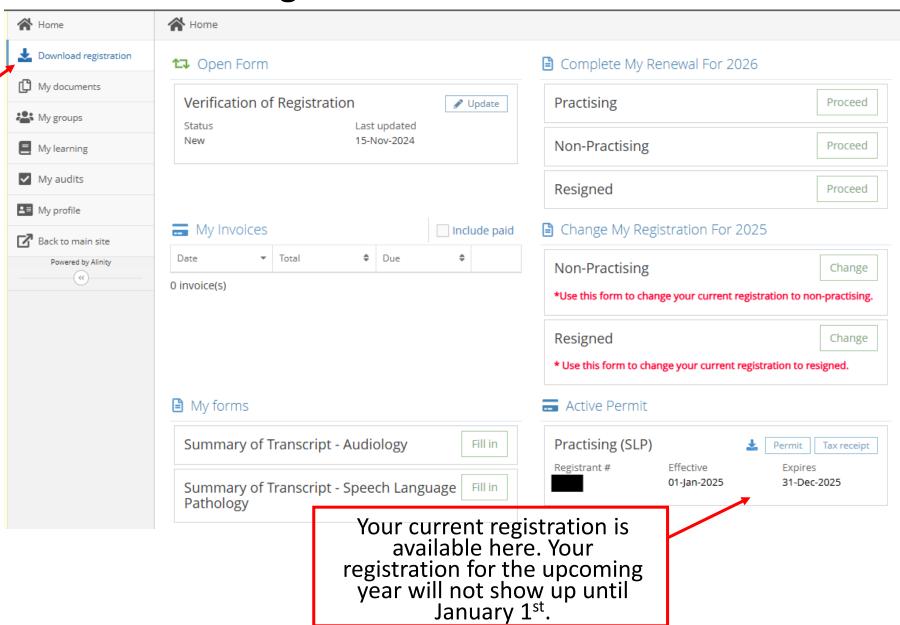
Payment is required to complete your renewal. Your licence and/or registration will not be issued until the required fees have been paid.

Accessing Your Invoice and Receipt



Accessing Current and Past Registrations

Past registrations are available here.



UNLICENSED

Registrants not wishing to renew their registration and/or licence are strongly encouraged to contact CSASK. Practising and provisional (entering their second year) registrants who fail to renew, will hold an unlicensed status. Unlicensed registrants are not entitled to practice or use the protected titles in SK. After 1 year, an unlicensed registrant ceases to be a registrant and is noted as "expired" in the CSASK register.

The CSASK office is open from Monday to Friday from 10am to 2pm.

If you require assistance, begin the renewal process early to ensure you meet the renewal deadlines.

