



Request for Deferral: Examination

Occupational therapists who hold a provisional certificate of registration may ask the College's Registrar for a deferral of their scheduled exam in exceptional circumstances. If you wish to request a deferral please submit this form as soon as possible prior to the exam date, and no later than 10 days after the exam date. Each request is considered on a case by case basis. If granted, you may be required to sign an undertaking with a timeline for completing the exam.

Please complete, sign and date this form and return to the College by email to registration@coto.org.

You must include a new Provisional Registration Supervision Agreement and evidence to support your request.

Name: _____

Registration number: _____

Day time telephone number: _____

Email Address: _____

Check the appropriate box indicating your reason for your request:

Major illness or crisis of self or family member

Significant hardship

COVID-19

Other

Please provide details. If you require additional space, please attach a second page.

For College Staff Only:

Date deferral received: _____

Date deferral reviewed: _____

Staff reviewer: _____

Documents attached

College of Occupational Therapists of Ontario

20 Bay St, Suite 900, PO Box 78, Toronto, ON M5J 2N8

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www.coto.org

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