

Criminal Record Declaration:

Do you have a Criminal Record? No Yes **If yes, please attach details on a separate sheet.**

Note: This is a declaration only. You are not required to obtain a criminal record check unless requested to do so by the College of Medical Laboratory Technologists of Manitoba.

General Declaration

I certify the information given on this form and on all documents sent in support of my application is correct and complete.

In signing this declaration, I acknowledge and understand that:

1. Providing false information to the CMLTM constitutes professional misconduct.
2. I agree to notify the College in writing of any change(s) to the information on this form.
3. This form will not be processed if I fail to complete and sign this declaration.

Sign here: _____ **Print Name:** _____ **Date:** _____
dd / mm / yyyy

Submit the ORIGINAL Form to CMLTM - Email/ Faxes will not be accepted.

Please mail or deliver completed forms to:

**CMLTM
146-2025 Corydon Ave.
Winnipeg, MB R3P 0N5**

In the course of carrying out its regulatory activities, the CMLTM collects, uses, and discloses personal information in accordance with the Medical Laboratory Technologists Act, 2002; the Regulations, and By-Laws. The College promotes the privacy of personal information in a manner consistent with its regulatory role.