COLLEGE OF MEDICAL LABORATORY TECHNOLOGISTS OF MANITOBA

245 Lilac Street
Winnipeg, MB R3M 2S2
www.cmltm.ca

Phone: 204-231-0311
Fax: 204-489-7300
Toll Free: 877-331-0311
E-mail: cmltm@cmltm.ca

IEMLT Attestation Application Form

Contact Information

Full Name: _____

Contact Number: _____

Email Address: _____

Mailing Address: _____

MLT Education Information

Country of Origin: _____

MLT Program/Grad Year: _____

Level of Education: BSc ☐ MSc ☐ PhD ☐ Other: _____

Additional Information

Immigration Status: _____

Started PLA Process: _____

CAMLPR ID #: _____

Are you intending to practice as an MLT in Manitoba? Yes ☐ No ☐

Please complete and submit to registrar@cmltm.ca