

REQUEST FOR VERIFICATION OF EMPLOYMENT AND WORK EXPERIENCE

This is a request for a description of the position and the work performed by the applicant listed below. This individual has applied for Registration with the College of Dietitians of Ontario (the College). To complete the processing of this application, the College requires additional information, to confirm credentials and work experience.

This information is not intended to be a personal reference, but rather, a position description. It will become part of the applicant's file and will be used in the review for registration. *It is the applicant's responsibility to request this information and to ensure that it is sent directly to the College by the employer.* Your cooperation is appreciated. All information contained in this form will remain confidential.

Name of Applicant:	
Name of Employer:	

Please provide the following information:

1. I certify that (name of applicant) _____ was employed by
 (name and address of employment): _____
 in the capacity of (position title) _____
 from (day/month/year) _____ to (date of separation) _____
 Reason for Separation (if applicable): _____

2. I confirm that the applicant has practised dietetics for at least 500 hours over the preceding three years.
 Yes No

3. Has the applicant committed any act of professional misconduct, incompetence, or incapacity during their employment at your facility? If the answer is yes, please elaborate in an attached letter.
 Yes No

4. Please attach a job description or provide a full description of the area of employment, roles, responsibilities, and activities performed by the applicant. Please provide as complete a profile of this applicant's position and work experience as possible.

Signature:		
Name (Please Print):		
Position Title:		Tel #:
I verify that all information contained here is true and accurate.		Date: