



Canadian Academy of Clinical Biochemistry

L'Académie canadienne de biochimie clinique

REQUIREMENTS FOR REINSTATEMENT AS A FELLOW OF THE CANADIAN ACADEMY OF CLINICAL BIOCHEMISTRY

All applicants for reinstatement of Fellowship must have been a full member of CSCC and Fellow of CACB in good standing for the 3 years preceding suspension and able to document required continuing education credits to meet the Professional Development rules and guidelines in effect at the time of reinstatement application.

All applicants must meet one of the following requirements:

1. Possess Certification in Clinical Chemistry/Biochemistry as issued by the Canadian Academy of Clinical Biochemistry (CACB)/Canadian Society of Clinical Chemists (CSCC).
2. Possess a Specialist Certificate in Clinical Biochemistry issued by the Ordre des Chimistes du Québec (OCQ) since 2000.
3. Possess Fellowship in Medical Biochemistry, be a member of the Royal College of Physicians and Surgeons of Canada in good standing, and work in the field of Medical Biochemistry.
4. Must have successfully completed a two (or more) year accredited Clinical Chemistry/Biochemistry training program and be a doctoral certified member or Fellow of an approved Foreign Academy of Clinical Chemistry/Biochemistry¹ and be successful in the CACB Oral examination.

¹ Currently acceptable designations are Diplomate of the American Board of Clinical Chemistry (DABCC) or Fellowship of the Royal College of Pathologists in Clinical Pathology (FRCPath from US, UK or Australia).

INSTRUCTIONS ON APPLYING FOR REINSTATEMENT OF FELLOWSHIP STATUS

- Complete the application form. If necessary, attach additional sheets. Please print or type all information.
- All applicants must submit a current curriculum vitae and documentation of continuing education for the previous 5 years.
- Applicants applying under categories 2 – 4 must also submit copies of including diplomas, certificates, continuing education credits and degrees relating to Clinical Chemistry/Biochemistry.
- The application must be signed by the applicant. Signature on the application form will be taken as affirmation that the credentials listed are correct.
- **Validation Fees:** This once-only fee must accompany the application. CDN \$226 (\$200 + HST). Future Fellowship fees will be assessed annually and will appear on the annual CSCC Membership Invoice.
Please make cheque payable to: Canadian Academy of Clinical Biochemistry
- Submit the completed application, payment and accompanying items to:
Canadian Academy of Clinical Biochemistry
Attn: Chair, Credentials Committee
4 Cataraqui Street, Suite 310
Kingston ON K7K 1Z7
office@csc.ca
- Only the Board of the Academy can award the reinstatement of Fellowship status.



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APPLICATION FOR REINSTATEMENT OF FELLOWSHIP STATUS IN THE CANADIAN ACADEMY OF CLINICAL BIOCHEMISTRY

I am applying for reinstatement of Fellowship status to the CACB.

NAME: _____
Last First Initial

Full member of the Canadian Society of Clinical Chemists since: _____

CERTIFICATION: Yes No Date _____

Administered By: CACB OCQ Other _____
Name and corresponding address

CACB Oral Examination Completed: Yes No Date _____

FELLOW OF CACB: Effective Date: _____

EDUCATION

UNIVERSITY DEGREES: Attach photocopies of diplomas and certification documentation.

Year	Discipline	University
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____

ACADEMIC APPOINTMENTS:

Position	University	Effective date
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____



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PROFESSIONAL HISTORY (Previous 5 years)

EMPLOYMENT HISTORY:

Position Title	Institution	Inclusive Dates
1.	_____	_____
2.	_____	_____
3.	_____	_____
4.	_____	_____
5.	_____	_____

ACADEMIC POSITIONS:

Position Title	Institution	Inclusive dates
1.	_____	_____
2.	_____	_____
3.	_____	_____

COMMITTEE AND OTHER PROFESSIONAL ACTIVITIES:

Position Title	Institution	Inclusive Dates
1.	_____	_____
2.	_____	_____
3.	_____	_____
4.	_____	_____
5.	_____	_____



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CONTINUING EDUCATION ACTIVITIES (PREVIOUS 5 YEARS):

Attach summary documentation of participation including title of the education event, location, dates, hours of attendance and certificate of participation.

1. _____
2. _____
3. _____
4. _____
5. _____

PROFESSIONAL REFERENCES:

The Credentials Committee of the Academy requires contact information for two (2) letters of reference to support the reinstatement application.

Name	Full address	Email Address	Telephone number
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1. _____
2. _____



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SIGNATURE:

I attest that the above statements are true and I hereby apply for Reinstatement of Fellowship status in the Canadian Academy of Clinical Biochemistry.

Applicant signature: _____ Date: _____

Full mailing address: _____

Telephone: _____

Email: _____

Have you enclosed the following?

- ✓ Original copy of application form
- ✓ Copy of your CV
- ✓ All supporting documentation, including copies of diplomas, certifications and degrees and continuing education relating to Clinical Chemistry/Biochemistry.
- ✓ Fellowship reinstatement validation fee