

Canadian Society for Medical Laboratory Science Société canadienne de science de laboratoire médical

Transitional Graduate Membership Application Form

Date of Birth: MM/DD/YY

Name:	ast	First		Former Name (i		
Address:	ונב	1 31		Tormer Nume (i	applicable	
City:		Pr	ovince:	Postal Code:		
Telephone:						
I am currently a CSMLS Stuc	lent Member	CSMLS ID#:				
NOTE: This is a requirement	for eligibility to this ca			or NS, Temporary License # will be	vour CSMLS #	
Provincial Regulatory Body:			-			
Transitional Graduate Mem	bership and PLI Expire	ation Date:	seven days o	after the date the exam resu	lts are released	
Employment Information:						
Present Position:				Date Started:		
Employing Institution (name	:					
A letter, on official letterhed	ad, from your Director	or Technical Supervis	sor, confirming	your employment as a Mec	lical	
Laboratory Technologist mu		und offer must clearly	state position is	working under supervision*		
Applicant's Statement:		ind oner most cleany				
I understand that acceptar	nce of my Transitional	Graduate membersh	nip application	is only an interim memberst	nip	
between the expiration dat	e of my student men	nbership and when th	e results of the	examination are received,	that my	
membership category will b	e changed depend	ent on these results, a	nd this informa	tion may be shared with my	regulator	
Completed forms can be n	ailed faxed or ema	iled to us. Please find	contact inform	nation at bottom of applica	tion	
*Please note that this mem					non.	
Once your payment has be	en processed, you w	<i>i</i> ll receive an emailed	d Confirmation	of Membership.		
Signature:				Date:		
	172.00		ts of MB NIL O		ay PST on PLL	
Membership Fee PLI Fee	172.00 13.00 Tax:		sidents of MB, NL, ON, SK & QC are required to pay PST on PLI - NL add \$1.95 - ON add \$1.04 - SK add \$0.78 - QC add \$1.17			
Optional upgrade to \$5mil PLI	14.00 Tax:		78 - NL add \$2.10 - ON add \$1.12 - SK add \$0.84 - QC add \$1.26			
PST (if applicable)						
TOTAL FEES:						
Payments must be	made in Canadian fur	nds. If your payment is re	eturned, you will	be charged a \$25.00 Administ	ration Fee	
Cheque (payable to: C	SMLS)			CSMLS USE ONL	Ý	
🗆 Amex 🛛 🖓 Visa	□ MasterCard					
Credit Card #			Date Pi	roc'd:		
Expiry Date						
Cardholder:			CSMLS	ID#	UsrCrd:	
	(please print clearly	()				



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Eligibility:

"A transitional graduate member shall be one who has held membership in Category 2.2 and has completed their educational program, is currently employed as a medical laboratory technologist, and is awaiting the results of the first challenge of the CSMLS certification examination"

Schedule of Benefits								
Subscription to CJMLS	PLI	Member Discount Program	Members Only Website	Member Discounts on CE Courses & LABCON Fees	Member Discounts on Certification Exam			
YES	YES	YES	YES	YES	NA			