



COLLEGE OF
**PSYCHOLOGISTS AND
BEHAVIOUR ANALYSTS**
OF ONTARIO

Renewal of Certificate

Declaration

I, _____, holding College registration number _____,
[Insert Full Name of Psychologist, Psychological Associate or Behaviour Analyst]

am a Director of _____, do hereby declare the following:
[Insert Full Name of Health Profession Corporation ("Corporation")]

1. that the corporation is in compliance with section 3.2 of the *Business Corporations Act* as of the date this declaration is signed,
2. that the corporation does not carry on, and does not plan to carry on, any business that is not the practice of the profession governed by the College or activities related to or ancillary to the practice of that profession,
3. that there has been no change in the status of the corporation since the date of the corporation profile report enclosed with the application for a Certificate of Authorization that accompanies this declaration, and
4. that the information contained in the application for a Certificate of Authorization that accompanies this declaration is complete and accurate as of the day this declaration is signed.

Signature of Declarant

Date