

As per CASLPM General Regulation, Section 2.8(2), an individual applying for registration as a provisional regulated registrant must enter into a written agreement with a mentor and provide a signed copy to the Registrar.

This form must be submitted to the Deputy Registrar at the time of Initial Application for Certificate of Registration with the College by email to programs@caslpm.ca or by mail:

CASLPM
 112B Scurfield Blvd.
 Winnipeg MB R3Y 1G4

Section 1: Practice Information

Provisional Regulated Applicant Name:

Business Contact Information	Practice Setting:
Name:	Description:
Address: City:	
Province: Postal Code:	
Telephone:	Terms of Employment
Email address:	Full-time Equivalent: Hours per week:

Client age range (check all that apply):

0 – 5 years 6 – 11 years 12 – 17 years 18 – 64 years 65 plus

Mentor Name:	CASLPM Registration Number:
---------------------	-----------------------------

Business Contact Information	Practice Setting:
Name:	Description:
Address: City:	
Province: Postal Code:	
Telephone:	Email address:

Client age range (check all that apply):

0 – 5 years 6 – 11 years 12 – 17 years 18 – 64 years 65 plus

Section 2: Proposed Mentorship Period and Contact Plan		
Start Date (DD/MM/YY):	End Date (DD/MM/YY):	Contact Hours per week:
Duration of Contract:	Mentorship Activities (check all that apply):	
26 weeks	Clinical Practice Observations	Telephone Conferences
Other (please specify)	Conferences with Mentor	Web Conferences
	Written Communications (Contact notes, Email, etc.)	Other (please specify)

Section 3: Provisional Mentorship Program Requirements
<ol style="list-style-type: none"> 1. The Provisional Regulated Registrant and the Mentor will review the Regulations, Practice Directions, and Code of Ethics of the College. 2. The Provisional Regulated Registrant, together with the Mentor, shall review the Competency Profiles and complete a self-assessment survey (Audiology or Speech-Language Pathology). 3. Based on the self-assessment survey, the Provisional Regulated Registrant and the Mentor will identify learning targets for the Provisional Regulated Registrant to demonstrate competency in professional practice. 4. The Provisional Regulated Registrant and the Mentor will develop a Learning Plan to build the Provisional Regulated Registrant’s competency in the target areas identified and define the measurement criteria for determining competency in a written Learning Plan. The Learning Plan must be submitted to the Registrar within thirty (30) days after the Provisional Regulated Registrant receives their Certificate of Practice. 5. The Mentor will provide guidance and feedback to the Provisional Regulated Registrant. 6. The Provisional Mentorship Period is comprised of a minimum fifty (50) hours of mentorship activities. At least twenty-five (25) of those hours must be Mentor observation of the Provisional Regulated Registrant’s professional practise in a clinical setting. 7. The Provisional Regulated Registrant and the Mentor will engage in mentorship activities at regular intervals throughout the mentorship period. 8. The Provisional Regulated Registrant must complete the mentorship activities in each clinical setting in which the registrant intends to practise as a Full Regulated Registrant. 9. The Provisional Regulated Registrant and the Mentor will submit an Interim Report to the Deputy Registrar midway through the mentorship period. 10. The Provisional Regulated Registrant and the Mentor will submit the completed Learning Plan and a Final Report to the Deputy Registrar at the end of the mentorship period. 11. After review of the Final Report, the Deputy Registrar will notify the Provisional Regulated Registrant and the Mentor whether the requirements of the Provisional Mentorship Program have been met. 12. Upon final approval, the Deputy Registrar will notify the Provisional Regulated Registrant and the Mentor that the Provisional Regulated Registrant is eligible to apply to become a Full Regulated Registrant of the College.

Section 4: Declarations

Provisional Regulated Applicant Declarations

1. I understand that I will be assessed with respect to my competency, as set out in the CASLPM Standards of Practice and the Competency Profiles, and will undertake to demonstrate the knowledge, skills and judgment required to practise competently.
2. I agree to comply with the conditions of Provisional Regulated Registration as set out in regulation.
3. I agree that I shall only practise under the mentorship of the person named in this contract.
4. I agree to obtain approval from the College for any proposed changes to my Provisional Mentorship Agreement prior to any change occurring.
5. I agree to collect and provide evidence of my competency for my Mentor’s review.
6. I agree to complete all the necessary documentation and reports to fulfil the requirements of the Provisional Mentorship, in conjunction with my Mentor.

Applicant Signature:

Date:

By typing your name here, you agree your electronic signature is the legal equivalent of your manual signature on this document.

Mentor Declarations

1. I understand that I will review the CASLPM Standards of Practice and the Competency Profiles with the Provisional Regulated Registrant, and will identify the knowledge, skills and judgment required to demonstrate competence to practice.
2. I agree to assess the Provisional Regulated Registrant’s knowledge, skills, and judgment to determine if the Registrant demonstrates an entry-to-practice level of competency required to practise according to the Standards of Practice.
3. I agree to mentor the Provisional Regulated Registrant in accordance with the College regulations regarding the Provisional Mentorship Program.
4. I agree to notify the College immediately if I am no longer able or willing to continue to fulfill my responsibilities as a mentor.
5. I agree to complete all the necessary documentation and reports to fulfil the requirements of the Provisional Mentorship, in conjunction with the Provisional Regulated Registrant.

Mentor Signature:

Date:

By typing your name here, you agree your electronic signature is the legal equivalent of your manual signature on this document.

Section 5: Agreement

We agree to:

1. Review the Standards of Practice, Practice Directions, Code of Ethics, and Competency Profiles of the College.
2. Adhere to the Provisional Mentorship Program Requirements, outlined in Section 3 of this agreement.
3. Complete all required documents and reports on behalf of the Provisional Regulated Applicant and submit to the Deputy Registrar through the course of the Provisional Mentorship Program.

Applicant Signature:

Date:

By typing your name here, you agree your electronic signature is the legal equivalent of your manual signature on this document.

Mentor Signature:

Date:

By typing your name here, you agree your electronic signature is the legal equivalent of your manual signature on this document.