

Stakeholder Feedback Form – October-December 2016 By-Law Amendments

Please complete this form and include it with your written submission. You may provide comments using this form (preferred), or send them in a separate document if the space provided here is insufficient. Your personal information is collected for internal statistical and informational purposes.

Please save the form to your computer, then open with Adobe Reader, prior to filling out the form. If you fill out the form in your web browser, contents may not be saved.

A. How to Submit Your Comments

- **1.** Complete this form.
- 2. You may provide your comments on this form or attach comments in a separate document.
- 3. Submit no later than December 12, 2016, via:

EMAIL: submissions@crpo.ca OR

FAX: (416) 874-4079 OR

MAIL: Consultations

College of Registered Psychotherapists of Ontario 163 Queen Street East, Toronto, ON M5A 1S1

First name: Email address: Phone number: I am a: Member Student Health care professional (describe below): Other (describe below): Other (describe below):

C. Association	
☐ I am submitting feedback on behalf of an organization of	or association.
If you checked the box "yes", please provide the following	ng information:
Name of organization/ association:	
Your position:	
Mailing address:	
Your email address:	
D. Consent	
I understand that by ticking the checkbox below, my submission may be publicly posted on the College's website. I understand that identifying information of <u>individuals</u> , including name and contact information, such as address, phone number and email address, will be removed from submissions that are posted publicly.	
I understand that the names of organizations and individual organizations will be posted publicly, though contact inform	
I understand that the College will review submissions and, a post submissions if the content or wording is derogatory, do otherwise inappropriate, or if a submission reveals private comments about organizations or their positions on issues	efamatory, threatening, abusive or or personal information. Negative
■ I consent to having my submission/ comments po	sted publicly.
Name:	Date: October 14, 2016
F Vour Comments	

Note: The response field begins on the next page. Please add additional pages if needed.

Please provide any feedback on the proposed amendments to the CRPO By-laws.

In reviewing the present information, I'm in agreement with all of the proposed changes, based on the reasons in favour of the amendment, except the two following amendments:	
21.08 (xix) - should only be on the register if the member was found guilty	
19.03 - no additional fee as I feel that CRPO fees are already high compared to other colleges such as OCSWSSW	