



Self-Reporting Form

As required under the mandatory reporting obligations – specifically, Sections 85.6.1, 85.6.2, 85.6.3 and 85.6.4 of the *Health Professions Procedural Code* – this form has been created for registrants to report the following:

- Offence (Charge) and any bail conditions or other conditions of release;
- Offence (Finding);
- Findings of Negligence or Malpractice; and
- Findings of Professional Misconduct, Incompetence or Incapacity.

With this form, please attach or send a detailed explanation of the circumstances that led to each reported incident and any additional relevant supporting materials to the College of Massage Therapists of Ontario.

Registrant Filing the Report	
Last Name, First Name (Please print.)	
Registration Number	

Details Related to the Charge of Offence	
Nature and Description of Offence	
Date of Charge	
Name and Location of Court	
Next court date	

Bail conditions or other conditions of release	
Date on which conditions were imposed	
Status of the proceedings	

Details Related to the Finding of an Offence	
Nature and Description of Offence	
Date of Finding	
Name and Location of Court that Made Finding	
Status of any Appeal Initiated Respecting the Finding	
Additional Comments or Details	

Details Related to Negligence or Malpractice	
Nature and Description of Finding	
Date of Finding	
Name and Location of Court that Made Finding	

Status of any Appeal Initiated Respecting the Finding	
Additional Comments or Details	

Details Related to Findings of Professional Misconduct, Incompetence or Incapacity	
Nature and Description of Finding of Misconduct, Incompetency or Incapacity	
Date that Proceeding Commenced	
Name and Location of Body that Made the Finding	
Status of any Appeal Initiated Respecting the Finding	
Additional Comments or Details	

Once your report is filed, a representative of the College will advise you on the status of your report and if additional information is required.

Please email, mail or fax your completed form to:

Registrar c/o Professional Conduct Department
 1867 Yonge Street, Suite 810
 Toronto, ON M4S 1Y5
 Fax: (416) 489-2625
 Email: professionalconduct@cmta.com

For any questions regarding self-reporting obligations, please contact us at: 416-489-2626 ext. 4149/1-800-465-1933 or by email at professionalconduct@cmta.com.