

College of HEALTH AND CARE PROFESSIONALS OF BC



## FORM 8A: STATUTORY DECLARATION FOR ACADEMIC REGISTRATION

I, \_\_\_\_\_\_\_, solemnly declare that I will not provide the Applicant for academic registration services of the profession of optometry in British Columbia while registered with the college as an academic registrant, except for educational purposes in an instructional setting, and I make this solemn declaration conscientiously believing it to be true and knowing that it is of the same legal force and effect as if made under oath.

Declared before me at	
this day of, 20	
Name Address	Signature of applicant for academic registration
A commissioner for taking affidavits in British Columbia	
A notary public in and for British Columbia	
A commissioner authorized to adminis- ter oaths in the courts of justice of	
Jurisdiction	