



## Fitness to Practise: Additional Information Form

### Instructions:

Please complete this form in its entirety and submit it to the College of Patent Agents and Trademark Agents (CPATA) via email, along with your Agent in Training Licence (Class 3) Application Form or Class 1 Agent Licence Application Form, to the attention of the Director of Registration at [dirregistration@cpata-cabamc.ca](mailto:dirregistration@cpata-cabamc.ca). This form should remain private and should not be disclosed to your Training Supervisor. Procedures regarding an affirmative answer to the fitness to practise question on the Class 1 or Class 3 application form can be found [here](#).

**NO INFORMATION CONTAINED ON THIS FORM WILL BE PROVIDED TO YOUR TRAINING SUPERVISOR EXCEPT AS REQUIRED BY LAW.**

In asking the question in Section 6 of the Class 1 Agent Licence Application Form and Section 7 of the Agent in Training Licence (Class 3) Application Form, the College is seeking information pertaining to your fitness to practise law under sections 4(b)(iii), 5(b)(ii), 6(b)(ii), 7(b)(ii), 8(b)(iii), 9(b)(ii), 10(b)(ii), and 11(b)(ii) of the Regulations, and sections 3(2), 9(b), 12(b), and 23(e) of the College By-laws. The College's obligation to protect the public interest operates alongside the patent agent or trademark agent's ethical obligation to respect the human dignity and worth of all persons and to treat all persons with equality and without discrimination.

The College will endeavour to deal with issues of capacity without causing unnecessary pain and anxiety for applicants, without discouraging those who need help from seeking it and without contributing to the stigma surrounding mental health issues.

To protect your right to privacy, the information you provide will be confidential, and will only be provided to the Registration Committee where it is deemed relevant to a concern regarding your fitness to practise as a patent agent or trademark agent, and only after you have requested that the information be considered by the Committee.

The practice of patent agents and trademark agents is rigorous and demands a high level of functioning. Any circumstance that would render you incapable of practising as a patent agent or trademark agent competently puts clients' interests at risk, and harms the profession's reputation. The College recognizes everyone experiences pressures in life, and we all respond to them differently. You may be capable of practising as patent agent or trademark agent competently, despite your past



difficulties. It is the College's goal, as the governing body of the profession, to determine if an applicant's impairment effectively disables that individual from carrying out the functions normally required of a patent agent or trademark agent. The College is looking for information about conditions you are currently experiencing and that could impair your ability to participate in the training requirements, or that could impair your ability to practise as a patent agent or trademark agent. The College is not looking for information about past conditions that have been resolved and are not currently affecting your ability to complete the duties of an Agent in Training or Agent. You need report only current circumstances that could affect your ability to perform the duties of an Agent in Training or Agent.

That you may have sought professional assistance for a problem is not a bar to enrolment. Usually having professional assistance is positive evidence, as it suggests that you are actively seeking to deal with the circumstances and take control of your life.

To discuss a personal concern confidentially, please contact the Director of Registration at [DirRegistration@cpata-cabamc.ca](mailto:DirRegistration@cpata-cabamc.ca).

1. Full Legal Name:

In asking the following question, the College is not concerned with issues that have been satisfactorily resolved and do not affect your present ability to practise as a patent agent or trademark agent competently.

2. Based upon your personal history, your current circumstances or any professional opinion or advice you have received, are you experiencing any condition reasonably likely to substantially impair your ability to perform the duties of an Agent in Training or Agent?

Yes

No



If the answer is “yes”, please generally describe the “impairment” that is likely to substantially impair your ability to perform the duties of an Agent in Training or Agent. (Depending upon your response, the College may ask for additional information from you or another source.)

Signature

Date

*Any information regarding this application will be collected, used or disclosed under the CPATA's Privacy Statement.*