



Occupational Therapist (OT) Application Form 2023

- ICBC/WORKSAFE BC
- REHABILITATIVE

<i>Name:</i>	<i>Date of Application:</i>
<i>Company:</i>	<i>Telephone:</i>
<i>Address:</i>	
<i>Postal Code:</i>	<i>Date of Birth:</i>
<i>Signature of OT:</i>	<i>Email Address:</i>

Enter details and attach copies of the following documentation:

<i>Post Secondary Degree:</i>	
<i>COTBC (or equivalent) Registration #:</i>	<i>Expiry Date:</i>
<i>Liability Insurance Expiry Date:</i>	<i>Delta Business License #:</i>
<i>Delta Business License Expiry Date:</i>	

Return completed form and documentation to:

Teri Lee, Fitness and Wellness Programmer
Phone: 604.952.3070 Email: tlee@delta.ca

<i>Admin use only:</i>	
<i>First Expiry Date:</i>	<i>Approval Date:</i>

NOTE: City of Delta (“Delta”) reserves the right to approve or deny registration of each applicant as an OT, in its sole discretion. Each OT approved by Delta must sign a 2023 OT Agreement prior to training clients in Delta facilities.