



College of  
Registered Nurses  
of Manitoba

# Application Package

Canadian Nurse Practitioner Examination (CNPE) Eligibility

*Effective June, 2024*

**Contents:**

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College of  
Registered Nurses  
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# Instructions for CNPE Eligibility Applicants

## Application Process

Our primary mode of communication with applicants is by email. Please provide a valid email address on your application form and check your email (including your junk folder) on a regular basis. Once your application has been reviewed, you will receive a confirmation email outlining all requirements needed to complete the application process.

If you do not currently hold a valid certificate of practice in the RN membership class with the College you will need to also complete the application for registration in the registered nurse membership class to obtain a certificate of practice.

**We do not keep any documentation received before an application file has been opened and assigned an applicant number.**

To be assessed for CNPE eligibility the following documents must be received by the College:

- Application form
- Nursing education documents
- Proof of identification

## Application

Complete the application for CNPE eligibility and return it with the non-refundable application processing fee. Your completed application should only be sent once by fax or email to prevent duplicate charges to your credit card.

## Nursing Education Documents

In Manitoba, the University of Manitoba: Master of Nursing program (Nurse Practitioner Stream) meets the educational requirements for eligibility to write one of the approved RN(NP) exams. RNs who hold a Master of Nursing degree from the University of Manitoba (non-nurse practitioner stream) can fulfill the educational requirements for registration on the extended practice sub register by successfully completing the advanced graduate diploma: advanced nursing practice at Athabasca University.

Outside of Manitoba, a program meets the educational requirements if it allows for eligibility to write one of the approved RN(NP) exams or to establish initial registration as an RN(NP) in another Canadian jurisdiction.

You must arrange for a course completion letter to be sent to the College by your educational institution, specifying the name of the program and date of completion.

If you are a graduate of an advanced practice program outside of Canada, please contact the College to discuss the assessment of prior learning and clinical competence process. If you have already completed this process, please indicate date of successful completion.

## Proof of Identification

Acceptable forms of identification include a copy of your:

- passport
- permanent resident card
- driver's license
- other government-issued picture identification and marriage/divorce certificate (only to verify name change)

## Exam

Once you have been approved for CNPE eligibility, information regarding how to book your exam writing, the exam location and time will be emailed to you by the exam provider, Yardstick Assessment Services approximately one month prior to the examination date. Exam results will be emailed to candidates approximately six weeks after the exam, once received from the test provider. Exam results are not released in person or over the phone.

If there are inconsistencies in any of the information you provide during the application process, we reserve the right to require additional supporting documentation, which may be over and above the items outlined above. The College may make improvements or changes to the information described at any time without notice.



# Application for CNPE Eligibility

Submission of this application does not guarantee approval for exam eligibility. Plan ahead for the time it will take to receive and review all required documents and complete our evaluation.

**Declaration:**

I understand that this is an application form only and that I must meet the criteria for registration outlined in *The Regulated Health Professions Act* (the RHPA) and the College of Registered Nurses of Manitoba General Regulation.

OFFICE USE ONLY	Date	Signature
Approved for CNPE		
Date received: _____ Reference no. _____ Payment amount: _____ <input type="checkbox"/> CAD <input type="checkbox"/> USD Batch no. _____ Date entered: _____ Date completed: _____ Completed by: _____ Item code: CNPE-GLACCOUNT: 20330-00/CNPE_ADMIN-GLACCOUNT: 20335-00/APP_CNPE-GLACCOUNT: 32160-10		

## Applicant Information

_____	_____	_____
Last name	First name	Middle name
_____	_____	
Former/alias/other names	Address	
_____	_____	_____
City/town	Province/state	Country
_____	_____	_____/_____/_____
Postal/zip code	Phone	Date of birth (yy/mm/dd)
_____		
Email		

1. Have you previously written an approved RN(NP) exam (CNPE, PNCB-Pediatric, AANPCP-Adult Gerontology)?  YES  NO

If yes, please indicate exam date(s) and province/state.

Date: \_\_\_\_\_ Jurisdiction: \_\_\_\_\_

Date: \_\_\_\_\_ Jurisdiction: \_\_\_\_\_

Date: \_\_\_\_\_ Jurisdiction: \_\_\_\_\_

2. Please indicate your advanced nursing education:

Name of School	City, Province/State, Country	Language of Instruction	Course Completion Date (mm/yy)	Education Credential

If applicable please indicate date of successful completion of the College's assessment of prior learning and clinical competence: \_\_\_\_\_

3. I am applying to write the exam on:

Date	Exam
<input type="checkbox"/> October 9, 2024 (Deadline to apply: August 28, 2024)	<input type="checkbox"/> CNPE (English) <input type="checkbox"/> CNPE (French)

*Information about booking your exam writing will be emailed to you by Meazure Learning at a later date.*

## Authorization and Consent

I authorize the collection, use and disclosure of personal information concerning myself consistent with the confidentiality provisions set out in section 140(2) of *The Regulated Health Professions Act*.

In addition, I authorize the College of Registered Nurses of Manitoba (“the College”) to carry out the procedures necessary for the assessment of my eligibility for registration. This includes making copies of my application and any other documents provided for the purpose of assessment and/or contacting pertinent institutions or authorities to verify the authenticity of my documents and the information provided. I agree that a copy of this application and any other documents provided by me or on my behalf may be sent by the College to other regulatory bodies and/or pertinent institutions or authorities allowing them to release information to the College.

I declare that all of the information I have provided, or has been provided on my behalf, in my application is complete and truthful. This applies to this application for registration as well as all documents received during the application process (such as educational transcripts, verifications of registration and written correspondence). I understand that the College will immediately cancel my application and I may be prohibited from applying in the future if:

1. I have provided any inaccurate information
2. I have omitted required information
3. the College determines that any documents submitted by me or on my behalf during the application or assessment process have been altered, tampered with or forged.

I have read and understand the information on this form and agree to the terms stated herein.

I do solemnly declare that the foregoing information and statements are true in every particular, and I make this solemn declaration conscientiously believing it to be true and knowing that it is of the same force and effect as if made under oath.

DECLARED before me at \_\_\_\_\_, this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_  
City/town, province/state, country

\_\_\_\_\_  
Applicant name (please print legibly)

\_\_\_\_\_  
Applicant signature

\_\_\_\_\_  
Witness name (please print legibly)

\_\_\_\_\_  
Witness signature

## Candidate Agreement

### Canadian Nurse Practitioner Exam: Family/All Ages

Candidates that engage in irregular behaviour, misconduct, or cheating either prior, during or after the Canadian Nurse Practitioner Examination: Family/All Ages (CNPE: F/AA) and/or do not follow an invigilator's warning to discontinue inappropriate behaviour on exam day may be dismissed from the writing centre with no refund.

Unauthorized production, reproduction or publication of the exam questions is also prohibited by copyright laws. In addition, measures and statistical procedures are implemented to detect cheating (e.g., copying answers from another candidate, voluntarily or involuntarily providing answers to another candidate). Unauthorized disclosure of the contents of the exam questions and any other form of cheating is an unethical behaviour and shall result in sanctions. If the regulatory authority determines that a candidate has cheated on the exam, the candidate is automatically assigned a fail result and the writing is counted as an exam attempt. Other sanctions may be imposed and may extend to denial of a licence and/or disqualification from future registrations for the CNPE: F/AA.

Irregular behaviour, misconduct and/or cheating include but are not limited to the following:

- copying, producing, reproducing, removing exam questions and/or responses (in any format) or taking notes about the exam from the writing centre exam room or outside the exam room
- disclosing exam questions or responses, in whole or in part, in any form or by any means (orally, in writing, electronically, on the Internet, "brain dumping," "discussion boards" or otherwise such as but not limited to Facebook, Twitter or other forms of social media)
- giving or receiving assistance of any kind
- taking the exam for someone else or having the exam taken for you
- using prohibited aids such as cell/mobile phones, hand-held computers or other electronic devices, recording or photographic devices, watches, etc.
- bringing study aids (test preparation materials or study materials, textbooks, notebooks, classroom notes, etc.) to the writing centre or accessing or attempting to access such study aids at any time after the start of the exam including but not limited to washroom breaks
- seeking help in answering questions (in person, by phone, text, by e-mail, etc.), engaging in disruptive disturbances or causing disturbances of any kind, and/or failing to follow invigilator instructions

Personal items including but not limited to wallets, watches, purses, hats, bags or coats are not permitted at the desk/table (see Entry into the Exam Room Policy for a complete list of prohibited items). These items must be stored in a secure area designated by the invigilator. Personal belongings may not be accessed at any time during the exam.

### Candidate's Declaration

I understand the provisions above and agree to comply with the Candidate Agreement for the Canadian Nurse Practitioner Examination: Family/All Ages (CNPE: F/AA). I also agree to comply with the Entry into the Exam Room Policy. My signature on this form constitutes my agreement not to copy, disclose, produce, reproduce, or otherwise engage in the publication of examination questions or responses, and not to engage in irregular behaviour, misconduct and/or cheating with respect to the CNPE: F/AA.

\_\_\_\_\_

Date

\_\_\_\_\_

Print name

\_\_\_\_\_

Signature

## Payment

All fees are non-refundable, non-transferable and include GST.

Currently, fees can only be paid via credit card over the phone or certified cheque or money order sent via Canada Post.

Please do not include a credit card number on your application. Once your application has been received, the College will contact you to arrange for payment.

## Options

Method	Instructions
Certified Cheque or Money Order	Send by mail 890 Pembina Hwy, Winnipeg, MB R3M 2M8
Visa or Mastercard	Online
E-transfer	Ensure your completed application form has been submitted to the College. <ul style="list-style-type: none"><li>• Create and send the e-transfer to: <a href="mailto:etransfer@crnm.mb.ca">etransfer@crnm.mb.ca</a></li><li>• If the bank account used to make the e-transfer is listed under a name different from the name on your application, please send a second email to <a href="mailto:etransfer@crnm.mb.ca">etransfer@crnm.mb.ca</a> associating the name on your application to the name of the bank account used for the e-transfer. <b>E-transfers which are not followed up with the required identification information will be rejected.</b></li></ul>

## Questions?

890 Pembina Hwy  
Winnipeg, MB R3M 2M8

**Phone:** 204-774-3477 ext. 300  
**Toll-free:** 1-800-665-2027 ext. 300 (in Manitoba)

## Due with Application

**Total:** \$ 220.50 (including GST)