

Health Profession Corporation Checklist

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| <input type="checkbox"/> | No restrictions on Certificate of Practice that would impact setting up a self-employed practice. |
| <input type="checkbox"/> | Business is within nursing scope of practice. |
| <p>STEP ONE: After consultation with person familiar with the <i>Regulated Health Professions Act</i> and Regulation provide the following to selfemployed@crnm.mb.ca</p> | |
| <input type="checkbox"/> | <p>The Self-employed Nursing Practice Notification & Declaration form.</p> <ul style="list-style-type: none"> If you have previously provided the form, you will be asked to update it with any changes, including your business name. |
| <input type="checkbox"/> | <p>The HPC Permit Application form</p> <ul style="list-style-type: none"> The corporation's name must 1) reference the practice of nursing and 2) end in Corporation. <ul style="list-style-type: none"> Examples: "Your first name, your last name" Registered Nurse Corporation or "your chosen business name" Nursing Corporation <ul style="list-style-type: none"> <i>The HPC name is not the business name. A registered business name is the name which a business operates under, it is the trade name that customers or clients know the business by. The corporate name is the legal name used in contracts and invoices.</i> <i>Contact the Companies Office if you have questions regarding securing your business name if not already registered with them.</i> |
| <input type="checkbox"/> | <p>Name reservation form from the Companies Office for the HPC name</p> <ul style="list-style-type: none"> Must be the same as the HPC name on your HPC Permit application. |
| <input type="checkbox"/> | <p>Provide application and processing payment of \$500.00 + GST= \$525.00</p> <p><u>OPTION ONE - Online:</u></p> <ul style="list-style-type: none"> Sign into your CRNM profile in Alinity and locate "my invoices" on the home page Select the arrow (>) located beside your invoice Follow the directions to make a credit card payment Email selfemployed@crnm.mb.ca once you made the payment using this option <p><u>OPTION TWO – E-transfer:</u></p> <ul style="list-style-type: none"> Create and send the e-transfer to etransfer@crnm.mb.ca Send an email to etransfer@crnm.mb.ca identify your name, CRNM number, the name on the bank account used for the e-transfer, and that it is for an HPC permit. E-transfers which are not followed up with the required identification information will be rejected. |

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| | <p><u>OPTION THREE – Certified cheque:</u></p> <ul style="list-style-type: none"> • Provide a certified cheque to CRNM <p><i>There is also an annual renewal process with a cost of \$250 + GST = \$262.50</i></p> |
| <p>STEP TWO: Allows you to incorporate with the Companies Office</p> | |
| <input type="checkbox"/> | <p>CRNM reviews the information and provides a letter of Consent to Incorporate or Amendment that allows you to incorporate your business or change your corporation's name (if already incorporated).</p> |
| <p>STEP THREE: Provide the following documents to selfemployed@crnm.mb.ca</p> | |
| <input type="checkbox"/> | <p>Article/Certificate of Incorporation</p> <ul style="list-style-type: none"> • Received once processed through the Companies Office |
| <input type="checkbox"/> | <p>Certificate of Status</p> <ul style="list-style-type: none"> • You request through the Companies Office |
| <p>STEP FOUR: Allows your corporation to become a Health Profession Corporation</p> | |
| <input type="checkbox"/> | <p>CRNM provided HPC Permit Approval Letter.</p> |
| <input type="checkbox"/> | <p>CRNM placed the corporation on the Health Profession Corporation Registry.</p> |
| <p>CRNM provides a permit renewal process reminder 60 days prior to permit expiry.</p> | |