

# Optometric Continuing Education Fund 2020

## Purpose of the Fund

The purpose of the Fund is to encourage optometrists to maintain and enhance their skills through continuing education by financially assisting optometrists with the cost of continuing education. The Fund provides financial assistance for courses and events which have a continuing optometric education purpose, and which have been approved by the Association.

## Eligibility Criteria

To be eligible to apply for funding support, an optometrist must:

- Be a full registrant of the College of Optometrists of British Columbia in good standing in the year in which the application is made.
- Be enrolled in the Medical Services Plan (MSP); have an active MSP billing number and be receiving payment for services from MSP.

## Eligible Education Programs

Educational programs which will qualify for reimbursement are Canadian-based optometric educational courses and events which are accepted by the Association. A Canadian-based optometric education course is defined as an educational program offered by an organization that is located and funded within Canada. Education programs must be approved in accordance with policy established by the College of Optometrists of British Columbia.

\*\*The SECO University fees through the BCDO partnership are eligible for the BCDO CE Fund reimbursement.

Educational programs organized and offered by the Association will be eligible for 100% reimbursement. All other eligible education programs will qualify for 75% reimbursement. 2020 BCDO Conference attendees will have their conference registration fees automatically applied to the CE Fund reimbursement.

## Application Criteria

- Applications for disbursement from the Fund in any calendar year must be received on or before October 31 in each year. Educational programs attended after October 31 will be eligible for the next year.
- There is no carry-over of an optometrist's annual CE Fund eligible amount.
- Optometrists must provide supporting documentation that they have attended and successfully completed the educational program. For SECO University, please provide proof of completion of at least 1 CE course.
- Reimbursement will be paid according to the amount submitted to a maximum of \$600.00. The amount of the Fund reimbursement will be set annually by the Association.
- No administration fee for BCDO Members.

CE reimbursement will be available on **May 03, 2020**. Please submit the Application with supporting documents no later than **October 31, 2020** to:

**BC Doctors of Optometry**

**121 – 10551 Shellbridge Way, Richmond, BC V6X 2W8**

**Or by email: [fundsadmin@optometrists.bc.ca](mailto:fundsadmin@optometrists.bc.ca)**

If you have any questions, please contact [fundsadmin@optometrists.bc.ca](mailto:fundsadmin@optometrists.bc.ca). Please note Non-members will be subject to an administration processing fee.

# Application For Optometric Continuing Education Fund 2020

**File Submission Format:**

Application Forms: must be editable PDF files only. Handwritten applications or photos of applications cannot be processed.

Invoices: scanned invoices accepted in PDF or JPEG format only. Photos of invoices cannot be processed.

Please email the Application Form together with your invoice to [fundsadmin@optometrists.bc.ca](mailto:fundsadmin@optometrists.bc.ca)

**First Name:** \_\_\_\_\_ **Last Name:** \_\_\_\_\_ **Current BCDO Member:**  Yes  No

**College Registration#:** \_\_\_\_\_ **MSP #:** \_\_\_\_\_ **Date:** \_\_\_\_\_

Continuing Education Program	Date	Location	Fees	Invoice and Certification of course completion enclosed
Program Title: Provider:				
Program Title: Provider:				
Program Title: Provider:				
Program Title: Provider:				
Total amount submitted (to a maximum of \$600):				

**Fund Reimbursement Options:**

Please select cheque or direct payment to fill out the section below.

**Option 1. Cheque**

Payee

Mailing Address

City Province Postal Code

**Option 2. Direct Payment - Banking information**

Account Holder's Name

Bank Name

Branch address

City Province Postal Code

Transit Institution Number Account Number