



Non-Practising RPN Declaration Form

Name: _____

CNO Reg Number: _____ RPNAO Membership No. _____

I am applying for membership in the Registered Practical Nursing Association of Ontario in the membership category of Non-Practising Member.

I declare that I am not currently employed in nursing.

I understand that as a non-practising member of RPNAO, I will not be covered by RPNAO malpractice and legal defence coverage. This includes any claims arising during this time as well as professional legal support required during the time my membership category remains as a Non-Practising member.

I understand that the Board of Directors for RPNAO must review and approve my declaration form.

Signed: _____ Date: _____