



# MANITOBA ASSOCIATION OF REGISTERED RESPIRATORY THERAPISTS

## MARRT Entry to Practice Examination- Request for Special Consideration Form

To practice Respiratory Therapy in Manitoba an applicant is required to meet the registration requirements of the Manitoba Association of Registered Respiratory Therapists (MARRT) including passing the MARRT approved credential examination. As stated in *L-13 Entry to Practice Examination Policy*, the applicant may challenge the entry to practice examination up to a maximum of three times within 18 months from the date of graduating from an accredited respiratory therapy program.

3.13 Pass the MARRT approved examination within 18 months from the date of graduation from the accredited Respiratory Therapy educational program. The MARRT currently accepts the Health Professionals Testing Canada Inc. (HPTC) or l'Ordre professionnel des inhalothérapeutes du Québec (OPIQ/L'ESP) Examination as the entry to practice examination. A maximum of three attempts to challenge the approved credential examination during an 18-month period will be allowed.

3.14 If the GRT does not pass the approved credential examination within the three allowable attempts and within the 18-month period, their MARRT license will be revoked with no further options for licensing within the Province of Manitoba.

The MARRT recognizes that on occasion, there may be unforeseen factors that inhibit an individual from challenging the entry to practice examination for a third time within the 18-month time period. In such cases, the individual may submit a Request for Special Consideration to challenge the examination for the third time when the scheduled examination date exceeds 18 months following their graduation date. The applicant will be required to challenge the exam at the next scheduled sitting immediately following the 18-month period. Applications will be assessed on a case-by-case basis by the MARRT Registration Committee. The decision of the Registration Committee is final and there is no opportunity for appeal.

### 1. PERSONAL / CONTACT INFORMATION

FIRST NAME		SURNAME	
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MARRT REGISTRATION NO.			
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APT. NO.	STREET ADDRESS		
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CITY	PROVINCE		
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POSTAL CODE	COUNTRY		
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PHONE NUMBER	EMAIL		

### 2. PREVIOUS DATES YOU CHALLENGED THE ENTRY TO PRACTICE EXAMINATION

Date #1 (dd/mm/year) - 

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Date #2 (dd/mm/year) - 

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### 3. REASON FOR REQUEST

In the space provided, explain your reason for not challenging the entry to practice examination for a third time prior to the end of the 18-month time period. Please provide documentation that may support your request. Examples of supporting documents may include but are not limited to a death certificate of a family member or a medical note for yourself or a family member.

Supporting documents are included with the request - Yes  No

#### 4. DECISION

Following a review of the request, the Registration Committee met on \_\_\_\_\_ (dd/mm/year) and the following decision has been made.

Approved

Not Approved

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**SUBMIT YOUR REQUEST:**

EMAIL: Manitoba Association of Registered Respiratory Therapists, [edregistrar@marrt.org](mailto:edregistrar@marrt.org)

QUESTIONS: [office@marrt.org](mailto:office@marrt.org) OR [edregistrar@marrt.org](mailto:edregistrar@marrt.org)

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