



Registration Checklists

Fellows: Clinical & Areas of Focused Competence (AFC) (Diploma) Programs

PGME CHECKLIST			
Check Mark	Manual Section	Tasks	Submit to/Deadline
<input type="checkbox"/>	A	Review, sign & return your Letter of Offer (LOO)	<b>Electronic copy:</b> submit to <a href="mailto:regpgme@umanitoba.ca">regpgme@umanitoba.ca</a> (all pages and in a clear pdf format) <b>one week</b> after receipt of your LOO
<input type="checkbox"/>	B	Review, sign & return Fellowship Agreement Complete & return Trainee Information Form (TIF)	<b>Electronic copies of Fellowship Agreement and Trainee Information Form:</b> submit to <a href="mailto:regpgme@umanitoba.ca">regpgme@umanitoba.ca</a> (all pages and in a clear format) <b>one week</b> after receipt of your Agreement
<input type="checkbox"/>	U	University of Manitoba Photo ID Card	<p>There will be a University of Manitoba Photo ID Card Pop-up Booth that will be set up at the Bannatyne Campus. Once this has been determined further details will be forwarded.</p> <p>If you are unable to come to the Pop-up Booth, please order your student ID card at <a href="#">aurora</a>, under personal information.</p> <p><b>Personal Information</b> <b>Enrolment &amp; Academic Records</b></p> <p><u>Personal Information</u></p> <p><b>Important Student Email information:</b></p> <p>Please note, your <b>UM Student Email account</b> is used for all un</p> <p>Don't have an account yet? <a href="#">Learn more about the student em:</a></p> <p><a href="#">Declare Canadian Indigenous Ancestry</a>  <a href="#">Change Security Question</a>  <a href="#">View/Update Addresses and Phones</a>  <a href="#">View/Update E-mail Addresses</a>  <a href="#">View/Update Emergency Contacts</a>  <a href="#">Name Change Information</a>  <a href="#">Change your PIN</a>  <small>Need to update your PIN? Change it here.</small>  <a href="#">Emergency Notification System</a>  <small>Register here for Emergency Text (SMS) Notifications</small>  <a href="#">Set Preferred Name</a>  <a href="#">Verify My SIN</a>  <small>Review or Record your Social Insurance Number.</small>  <a href="#">Order ID Card</a>  <a href="#">Name Change</a>  <a href="#">Change Residency Status</a></p> <p>To obtain 24/7 access to the Brodie/Buhler and Basic Medical Sciences Building, please bring your Photo ID Card to Colin Wootton in the Physical Plant Office, Room S-013 Medical Services Building, Bannatyne Campus.</p> <p>If you already have a UM student card but would like a new one, please bring a completed Photo ID Card Request Form to U of M Photo ID Card Pop-up Booth.</p>

<input type="checkbox"/>	V	Complete & submit the Canadian Post M.D. Education Registry Form (CAPER)	Email a clear completed CAPER Form <b>one week</b> after receipt of your LOO to <a href="mailto:regpgme@umanitoba.ca">regpgme@umanitoba.ca</a>
<input type="checkbox"/>	C	Activate your UManNetID and Email Account	<a href="https://signum.umanitoba.ca/">https://signum.umanitoba.ca/</a> within <b>one week</b> after receiving the Welcome Email
<input type="checkbox"/>	D	Activate Aurora Student and Personal Identification Number (PIN)	Aurora Student within <b>one week</b> of receiving the Welcome Email
<input type="checkbox"/>	F	Medical Diploma	Email a clear copy in a "PDF" format to <b>upon receipt</b> of the Welcome Email to: <a href="mailto:regpgme@umanitoba.ca">regpgme@umanitoba.ca</a>

### Shared Health (Shared Health/Employer) Checklist

Check Mark	Manual Section	Tasks	Submit to/Deadline
<input type="checkbox"/>	G	Submit one copy of Police Information Check/Criminal Record Check (with Vulnerable Sector Search included) which must be dated no earlier than 6 months prior to the start date – <a href="#">Website Link</a>  <b>IMPORTANT: Please email a "PDF" or photo only – do not forward emails requiring passwords to access the report</b>	<b>As soon as you have received your Letter of Offer, apply for these checks and have them sent to:</b>  Provincial Medical Administration Office (PMAO) 1502 – 155 Carlton St., Winnipeg, MB, R3C 3H8
<input type="checkbox"/>	H	Submit one copy of Manitoba Adult Abuse registry Check (required regardless of whether or not you've ever resided in Manitoba).– <a href="#">Website Link</a>	<b>Please Note: A Winnipeg address is required for Criminal Record Check applications</b>
<input type="checkbox"/>	I	Submit one copy of Manitoba Child Abuse Registry Check (required regardless of whether or not you've ever resided in Manitoba) – <a href="#">Website Link</a>	<b>*See also CPSM checklist below*</b>
<input type="checkbox"/>	J	Residents must respond to the onboarding package by submitting all payroll and benefit forms by the deadline dates as per instruction	Banking Information: submit to <a href="mailto:PMAO_Residents@sharedhealthmb.ca">PMAO_Residents@sharedhealthmb.ca</a>
<input type="checkbox"/>	K	Complete Immunization & N95 Fit Testing Requirements – <a href="#">Website Link</a>	<ul style="list-style-type: none"> <li>As soon as you have received your Letter of Offer, Trainees must contact one of the Occupational Health Units to schedule an appointment within <b>a minimum of 2 months</b> prior to commencement of training.</li> <li>Complete &amp; submit forms directly to an OESH Office at <a href="mailto:oesh@wrha.mb.ca">oesh@wrha.mb.ca</a> or at other OESH site</li> </ul>
<input type="checkbox"/>	L	Benefits	Please refer to your <b>Fellowship Agreement</b>
<input type="checkbox"/>	M	Create SOGICA Vault Account	After receiving employee number from <a href="mailto:healthcarecareers@mb.ca">healthcarecareers@mb.ca</a> and completing onboarding package, create a SOGICA Vault account.  • <a href="#">Create Your Account and Log In</a>
<input type="checkbox"/>	N	Digital Health Account	<a href="https://healthcareersmanitoba.ca/forms/shared-health-pgme-residents/">https://healthcareersmanitoba.ca/forms/shared-health-pgme-residents/</a>

### College of Physicians and Surgeons of Manitoba (CPSM) / Physician Licensure Checklist

Check Mark	Manual Section	Tasks	Submit to/Deadline
<input type="checkbox"/>	P	<a href="#">Apply for CPSM License</a>	You <b>must</b> complete and return the application <b>directly</b> to the CPSM Office: 1000-1661 Portage Ave, Winnipeg, MB R3J 3T7 as per the instructions provided.

<input type="checkbox"/>	G	Submit one copy of Police Information Check/Criminal Record Check (with Vulnerable Sector Search included) which must be dated no earlier than 6 months prior to the start date – <a href="#">Website Link</a>	As soon as you have received your Letter of Offer, apply for these checks and have them sent to:  CPSM 1000 – 1661 Portage Avenue, Winnipeg, MB R3J 3T7 <b>one month</b> prior to the commencement of training
<input type="checkbox"/>	H	Submit one copy of Manitoba Adult Abuse Registry Check (for applicants who have resided in Manitoba for 90 days or longer) – <a href="#">Website Link</a>	<b>*See also Shared Health checklist above*</b>
<input type="checkbox"/>	I	Submit one copy of Manitoba Child Abuse Registry Check (for applicants who have resided in Manitoba for 90 days or longer) – <a href="#">Website Link</a>	<b><i>Please Note: A Winnipeg address is required for Criminal Record Check applications</i></b>

### Canadian Medical Protective Association (CMPA) / Liability Insurance Checklist

Check Mark	Manual Section	Tasks	Submit to/Deadline
<input type="checkbox"/>	Q	Apply for CMPA Membership <a href="http://www.cmpa-acpm.ca/en/membership/member-self-service">www.cmpa-acpm.ca/en/membership/member-self-service</a>	The application must be submitted <b>one week</b> after receiving the Welcome Email

### Final Tasks Prior to Commencement of Training

Check Mark	Manual Section	Tasks	Submit to/Deadline
<input type="checkbox"/>	Y	Pay your Registration Fees	<ul style="list-style-type: none"> <li>Check your <a href="#">Aurora Student</a> to obtain the amount</li> <li>Pay the Fee (<a href="#">Registration Fee Information</a> &amp; <a href="#">Payment Options</a>)</li> </ul> <b>**The assessed University of Manitoba Registration Fees must be paid in accordance with the Fellowship Agreement, prior to the commencement of training. Please note that late payment will result in delay of the commencement of training**</b>
<input type="checkbox"/>	T	Receive Requisition Forms for HSC Facility Access Card from PGME Office	<ul style="list-style-type: none"> <li>We require a <b>clear digital colour photo</b> with a solid coloured neutral background in a “jpeg” format <b>two weeks</b> from today which will be added to your Entrada profile and submitted to HSC Security for your HSC ID card.</li> <li>Please print out Requisition Form for HSC Facility Access Card and take it to: <b>Security Services, MS245 Building (2<sup>nd</sup> Floor Orange zone) Health Sciences Centre</b></li> </ul>
<input type="checkbox"/>	X	Complete Personal Health Information Act (PHIA)	Online through UM Learn

**\*\* Trainees are recommended to retain a copy of the registration documents for their own record.\*\***

#### Important Date:

#### [PGME New Trainee Orientation](#)

Thursday, June 27, 2024, 8:00 a.m. to 4:00 p.m.  
All New Fellows are invited to attend.  
Further information to follow

**\*\*It is imperative that the trainees submit the required documents on time and pay the University fees to avoid any delays in the commencement of training or payment.\*\***

## Essential Information for International Fellows

Financial Costs - Below are examples of some of the costs that you will be responsible for:		
Check Mark	Items	Notes
<input type="checkbox"/>	University of Manitoba Registration Fees	<ul style="list-style-type: none"> <li>The fee will vary depending on your Fellowship length</li> <li>As per the University Registration procedure, the Registration Fees are assessed per academic year from July 1 to June 30 of the following year. <b>Fellows will be required to pay for additional registration fees when the training carries over two or more academic years</b></li> <li><b>Please ensure to visit this <a href="#">Registration Fee Information</a> link to obtain the estimated amount</b></li> <li>Specific Registration Fee amounts can be obtained in your <a href="#">Aurora Student</a> when you receive the first Welcome Email from the PGME Office (containing your Letter of Offer and Fellowship Agreement)</li> </ul>
<input type="checkbox"/>	Source Verification Fees of each Document submitted	<ul style="list-style-type: none"> <li><b>Please visit <a href="https://physiciansapply.ca/">https://physiciansapply.ca/</a> to obtain the amount</b></li> </ul>
<input type="checkbox"/>	Licensure (CPSM) Fee	<ul style="list-style-type: none"> <li><b>Please visit <a href="http://www.cpsm.mb.ca/">http://www.cpsm.mb.ca/</a> or contact the CPSM Office via <a href="http://www.cpsm.mb.ca/contact-us">http://www.cpsm.mb.ca/contact-us</a> to obtain further fee information</b></li> </ul>
<input type="checkbox"/>	Liability Insurance (CMPA) Fee	<ul style="list-style-type: none"> <li><b>Please visit <a href="https://www.cmpa-acpm.ca/en/membership/fees-and-payment">https://www.cmpa-acpm.ca/en/membership/fees-and-payment</a> to obtain further fee information</b></li> </ul>
<input type="checkbox"/>	Police Information Check/Criminal Record Check (including Vulnerable Sector Search Check)	<ul style="list-style-type: none"> <li><b>Please visit this <a href="#">website</a> to obtain further fee information</b></li> </ul>
<input type="checkbox"/>	Manitoba Adult Abuse Registry Check	<ul style="list-style-type: none"> <li><b>Please visit this <a href="#">website</a> to obtain further fee information</b></li> </ul>
<input type="checkbox"/>	Manitoba Child Abuse Registry Check	<ul style="list-style-type: none"> <li><b>Please visit this <a href="#">website</a> to obtain further fee information</b></li> </ul>
<input type="checkbox"/>	Work Permit Application Fee	<ul style="list-style-type: none"> <li><b>Please visit this <a href="#">website</a> to obtain further fee information</b></li> </ul>
<input type="checkbox"/>	Other Expenses	<p><b>Examples:</b></p> <ul style="list-style-type: none"> <li>Home (rent, mortgage, utilities-heat, hydro)</li> <li>Basic expenses (food, clothing)</li> <li>Personal health/accident/dental insurance</li> <li>Transportation</li> <li>Occasional expenses (eg, prescription medicine not covered by health insurance)</li> </ul>
Immigration Document:		
<input type="checkbox"/>	A valid Passport which will not expire prior to your start date or while you are in training in Canada	<ul style="list-style-type: none"> <li>For the PGME Office to submit the Labour Market Impact Assessment (LMIA) Exemption on your behalf and generate the Order ID and Offer of Employment Number that you will use to apply for a Work Permit</li> </ul>