Maintenance of Certification (MOC) Program Guidelines
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Introduction

The (MOC) Maintenance of Certification process was established by the Royal College of Physicians and Surgeons (RCPSC) to encourage physicians to learn and develop throughout their careers.

Members of the Canadian Association of Gastroenterology (CAG) actively participate in the MOC program. The arguments in favor of participation in the process are convincing. To quote Dr. J. Connon in his introductory remarks to the University of Toronto’s MOC handbook, “in today’s socio-political climate, it is essential that a mechanism exists to ensure that physicians not only keep abreast of important advances (as well as maintaining existing skills) but that their involvement in continuing medical education be demonstrated in a very clear way to professional governing bodies and the public at large”. Gastroenterologists, who are currently fellows of the college, who do not participate in the program will not have their fellowship renewed and will not be listed on a public register of fellows who are participating. The implications are obvious.

Since attaining accreditor status in 2002 the CAG has been provided major opportunities and assumed significant additional responsibilities.

The CAG has taken an active role in high quality program development based on the educational needs of the membership. Accredited educational activities, produced by medical or non-medical organizations, require clear objectives, time for interaction, and feedback to the audience on their learning. We recognize that members learn through different techniques and continue to develop innovative educational activities and refine existing programs. An increased number of accredited educational events and formats assist CAG members in reaching annual continuing professional development (CPD) targets. Improved standards of educational activities for the CAG membership and physicians at large benefits, not only the physicians participating, but also their patients who are the ultimate beneficiaries of these educational events.

The CAG has assumed significant financial responsibilities to provide the human and technological resources required to accomplish MOC activities. A significant proportion of the CAG annual budget is allocated to facilitate educational activities including MOC.

The granting of accreditor status to the CAG has also provided an opportunity for industry. CAG has been able to partner with industry to provide high level educational programs under the co-developed framework meeting specific learning needs of the members and in closing learning gaps. As an accredited provider, the CAG has been able to work with industry to co-develop CPD programs and have them accredited by a single accreditor with a national reach.

Along with the opportunities come responsibilities. We have a responsibility to the College, to the CAG membership, and to the groups with whom we work to ensure that the integrity of the MOC process is maintained. We continue to refine our accreditation process so that we not only meet the standards set, but exceed them. We are absolutely committed as an organization to maintaining the integrity of this process and to ensuring that educational materials meeting CAG accreditation status are of the highest possible standard.

To date, the CAG has significantly impacted the development of high quality educational activities for members. We look forward to continuing as a MOC program accreditor to further encourage the development of innovative educational programs to encourage physicians to learn and develop throughout their careers.

Dr. Kevin Waschke, CAG, V.P. Education Affairs
Objectives

The objectives of the CAG MOC program are outlined below;

1. Increase the quality of Gastroenterology educational events in Canada.
2. Facilitate participation of the CAG membership in the Royal College MOC program.
3. Provide medical and non-medical organizations with a single point of contact for accreditation of educational programs.

Principles

Implementation of the program will be guided by the principles outlined below;

1. We will adhere to the rules and regulations outlined by the Royal College concerning the MOC accreditation process.
2. We will maintain the integrity of the accreditation process.
3. We will provide an efficient process for industry and non-industry groups.
4. The process will be transparent.

CAG CPD Aims and Goals

1. Enhance the scientific and tacit knowledge, clinical and procedural skills relevant to the practice of gastroenterology.
2. Promote and facilitate the adoption or integration of new scientific evidence into practice.
3. Improve the performance of gastroenterologists in achieving improved health outcomes experienced by patients.
4. Provide strategies and tools to enable gastroenterologists to self-assess their professional needs to facilitate and support self-learning and practice assessment activities.
5. Enhance the effectiveness and efficiency of the self-directed learning skills and strategies of gastroenterologists to facilitate the management of their continuing professional development.
6. Enable gastroenterologists to individually or collectively review their performance in practice.
7. Promote the ability of gastroenterologists to share their practice experiences as members of a community of practice.
8. Promote learning strategies linked to a health professional team or group to enhance learning outcomes.
9. Link learning activities and strategies to all CanMEDS roles and competencies.

The Accreditation Process

Fellows of the College are required to gain 400 credits over a period of 5 years. Credits may be obtained through a variety of different activities.

The CAG will be involved primarily in accreditation of programs for Section One credits. Local organizations may grant accreditation for some activities and others, such as practice audits, do not require formal accreditation by either local bodies or by the CAG.

The CAG will not be responsible for accreditation of local rounds, journal clubs and other similar educational activities. These will remain the responsibility of the local organizations such as department or University CME groups. The CAG will be primarily, but not exclusively, concerned with programs that have a national or international target.
# Framework of Continuing Professional Development Activities

## Section One
### Group Learning
#### Accredited Group Learning Activities
Events that meet established educational and ethical standards for group learning activities:
- Hospital-based rounds, journal clubs or other educational events (approved by a planning committee)
- Small-group learning sessions (approved by a planning committee)
- Accredited group-learning activities held in Canada (approved by a Royal College accredited provider)
- Accredited group learning activities held outside Canada (sponsored by a university, academy, specialty society or physician organization)
- Web-based continuing medical education events (approved by a Royal College accredited provider in Canada and meets the same criteria defined for face-to-face accredited group activities)

#### Unaccredited Group Learning Activities
Rounds, journal clubs, small group activities that are in the process of meeting the educational and ethical standards AND rural or local conferences that have no industry sponsorship.

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<th>Credit Hour</th>
<th>Minimum Credits/Cycle</th>
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### Documentation Requirements:
- Official certificate of attendance or confirmation of participation
- Optional—documented learning outcome(s) for practice

## Section Two
### Self-Learning
#### Planned Learning
Learning activities initiated by the identification of a need, problem, issue or goal, either at or separate from the point of care, leading to the creation of a learning plan developed independently or in collaboration with peers or mentors:
- PLPs
- Traineeships
- Formal Courses

#### Scanning
Resources that physicians use to enhance their awareness of new evidence, perspectives or findings that may be potentially relevant to their professional practice:
- Journal Reading
- Podcasts, audiotapes
- Videotapes
- InfoPOEMs, CardioCLIPS

#### Systems Learning
Activities that stimulate learning through contributions to practice standards, patient safety, quality of care; curriculum development; or assessment (examination boards, peer review):
- Quality care/patient safety committee
- Curriculum development
- Examination development
- Peer assessment
- Practice guideline development

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### Documentation Requirements:
- Documented learning outcomes required

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## Section Three
### Assessment
#### Knowledge Assessment
Programs that provide data with feedback to individual physicians regarding their current knowledge base to enable the identification of needs and the development of future learning opportunities relevant to their practice:
- Self-Assessment programs (SAPs)

#### Performance Assessment
Activities that provide data with feedback to individual physicians groups or inter-professional health teams related to their personal or collective performance across a broad range of professional practice domains. Performance assessment activities can occur in a simulated or actual practice environment:
- Simulation
- Chart Audit and Feedback
- Multi-source feedback
- Educational/administrative assessment strategies

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### Documentation Requirements:
- Documented learning outcome(s) required

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Approval Process for Section 1 Accreditation by the CAG:

Physician Organizations

1. Contact the CAG National Office to request program review.

2. The CAG National Office will advise you of the fee schedule (see page 11) and arrange for a member of the MOC committee to review the program. Review and accreditation for CAG members is a benefit of membership and no fee will be applied in situations where the budget for the event is <$10,000.00.

3. The CAG will approve the CPD event after the program planner has met the requirements stipulated on the application form.

4. The physician organization is responsible and accountable for the planning, implementation and evaluation of the CPD event.

5. The accredited provider will not be recognized on the brochure or materials of an approved CPD event.

6. The physician organization accepts the responsibility to keep records of attendance and provide the attendees with certificates of attendance or receipt of payment.

7. If requested, the physician organization will provide to the Credit Validation Program written evidence (e.g., the completed application form) of approval of the CPD event for Section 1.

8. Approval of an accredited CPD event under Section 1 of the framework of CPD options for Maintenance of Certification will be recognized by the following statement on program materials:

   This event is an Accredited Group Learning Activity (Section 1) as defined by the Maintenance of Certification Program of the Royal College of Physicians and Surgeons of Canada, approved by the Canadian Association of Gastroenterology.

9. The CAG will notify the Royal College that the program has been accredited by completing the standard notification form

Definition of Physician Organization:

A physician organization is a not-for-profit group of health professionals with a formal governance structure, accountable to and serving, among others, its specialist physician members through:

- Continuing professional development
- Provision of health care and/or
- Research.

This definition includes (but is not limited to) the following groups:

- Faculties of medicine
- Hospital departments or divisions
- Medical societies
- Medical associations
- Medical academies
- Physician research organizations
- Health authorities not linked to government agencies
Types of organizations that are not considered physician organizations

- Disease-oriented patient advocacy organizations (e.g. Canadian Diabetes Association)
- Government departments or agencies (e.g. Health Canada, Public Health Agency of Canada)
- Industry (e.g. pharmaceutical companies, medical device companies, etc.)
- Medical education or communications (MEC) companies (e.g. CME Inc.)
- ‘For-profit’ on-line educators, publishing companies or simulation companies (e.g. Medscape, CAE)
- Small number of physicians working together to develop educational programming

This definition excludes pharmaceutical companies or their advisory groups, medical supply and surgical supply companies, communication companies or other for-profit organizations and ventures/activities.

Definition of Physician Organization above taken from the Royal College of Physician and Surgeons of Canada’s website at:
http://www.royalcollege.ca/portal/page/portal/rc/common/documents/cpd_accreditation/cpd_glossary_e.html
Non-Physician Organization: (Co-developed Educational Programs)

1. Non-Physician Organizations interested in developing CPD activities with the CAG must participate with CAG in the co-development CPD process as defined by the Royal College of Physicians and Surgeons of Canada. The CAG will consider co-developing a CPD activity with a non-physician organization as long as the program meets measured needs of the members and is developed without any commercial influence. The CAG will be responsible for all aspects of CPD development and implementation. The co-developer is accountable to CAG for the implementation of the CPD program(s). The entire CMA policy on Guidelines for Physicians in Interactions with Industry can be found at: http://policybase.cma.ca/dbtw-wpd/PolicyPDF/PD08-01.pdf

2. Contact the CAG National Office, at the outset of discussion and before any program planning is put in place, with a short 1-2 page proposal which:
   - identifies any needs assessment results that support the proposal (attach if available)
   - outlines the broad intent/content of the program
   - describes the intended mechanism(s) for distribution of the program
   - includes a budget estimate including all development, implementation, and dissemination costs

   The CAG MOC and Education Affairs Committee will review all the information and determine if the proposed program meets measured needs of members. CAG Education Affairs will identify appropriate members for the planning committee and faculty but will take under consideration any proposed faculty to be involved.

3. In situations where the non-physician organization is a BENEFACOR Corporate Sponsor of the CAG, up to 12 hours of accreditation review time and program management is provided. Accreditation review time and program management will thereafter be charged in accordance with the attached fee schedule. A maximum of TWO Co-developed Educational programs, per 12 month period, will be considered for any one Benefactor Corporate Sponsor. For all other applicants, a $2,000.00 non-refundable application fee will be applied.

4. The CAG MOC Committee will review the above proposal and provide a written response with respect to CAG’s willingness/ability to co-develop the proposed program. If the CAG agrees to co-develop the program, the CAG MOC Committee will appoint a member of the CAG Education Affairs to sit on the steering committee and oversee this co-developed activity. This representative will submit an independent report to the CAG MOC Committee at the completion of the project, ensuring that the program has been developed to meet the educational needs and is free of commercial bias. The CAG MOC Committee will work with the sponsor to assimilate a steering committee to take forward the co-developed initiative. The content of the co-developed initiative MUST be created and finalized by the steering committee and WILL NOT be driven by the sponsor or a third party (e.g. CME company).

5. The CAG Education Affairs is responsible to appoint the planning committee and participate in the assessment of needs, program design, implementation and evaluation. This is the role of the assigned CAG Education Committee member. All planning and CPD development must be done free of commercial bias.

6. The CAG will be responsible for maintaining financial control over the entire project. Any honoraria for faculty will be paid through CAG head office. The CAG will invoice the industry partner for these costs as per the standard co-development contract.

7. Co-ownership of the CPD event by the CAG must be recognized on the brochure or materials of the CPD event.

8. The CAG accepts the responsibility to keep records of attendance and provide the attendees with certificates of attendance or receipt of payment.
9. The CAG will meet the requirements for accreditation as outlined in the document entitled “Royal College Accreditation Standards for Accredited CPD Provider Organizations”. (Found at: http://www.royalcollege.ca/portal/page/portal/rc/members/cpd/cpd_accreditation/group_learning/cpd_accredited_providers/provider_accreditation_standards)

10. Approval of Section 1 of The Royal College’s Maintenance of Certification Program will be recognized by the following statement on co-developed program brochures and materials:

“This event is an Accredited (Section one) Group Learning Activity as defined by the Maintenance of Certification Program of the Royal College of Physicians and Surgeons of Canada, approved by the Canadian Association of Gastroenterology (CAG). This program was produced under the RCPSC guidelines for the development of co-developed educational activities between the CAG and (industry partner)”

11. The CAG will notify the Royal College that the program has been accredited by completing the standard notification of review form.

12. The program must comply with the CMA code of ethics. The relevant section follows.
CMA Policy: Physicians and the Pharmaceutical Industry (22-33):

22. The primary purpose of CME/CPD activities is to address the educational needs of physicians and other health care providers in order to improve the health care of patients. Activities that are primarily promotional in nature, such as satellite symposia, should be identified as such to faculty and attendees and should not be considered as CME/CPD.

23. The ultimate decision on the organization, content and choice of CME/CPD activities for physicians shall be made by the physician organizers.

24. CME/CPD organizers and individual physician presenters are responsible for ensuring the scientific validity, objectivity and completeness of CME/CPD activities. Organizers and individual presenters must disclose to the participants at their CME/CPD events any financial affiliations with manufacturers of products mentioned at the event or with manufacturers of competing products. There should be a procedure available to manage conflicts once they are disclosed.

25. The ultimate decision on funding arrangements for CME/CPD activities is the responsibility of the physician-organizers. Although the CME/CPD publicity and written materials may acknowledge the financial or other aid received, they must not identify the products of the company(ies) that fund the activities.

26. All funds from a commercial source should be in the form of an unrestricted educational grant payable to the institution or organization sponsoring the CME/CPD activity.

27. Industry representatives should not be members of CME content planning committees. They may be involved in providing logistical support.

28. Generic names should be used in addition to trade names in the course of CME/CPD activities.

29. Physicians should not engage in peer selling. Peer selling occurs when a pharmaceutical or medical device manufacturer or service provider engages a physician to conduct a seminar or similar event that focuses on its own products and is designed to enhance the sale of those products. This also applies to third party contracting on behalf of industry. This form of participation would reasonably be seen as being in contravention of the CMA’s Code of Ethics, which prohibits endorsement of a specific product.

30. If specific products or services are mentioned, there should be a balanced presentation of the prevailing body of scientific information on the product or service and of reasonable, alternative treatment options. If unapproved uses of a product or service are discussed, presenters must inform the audience of this fact.

31. Negotiations for promotional displays at CME/CPD functions should not be influenced by industry sponsorship of the activity. Promotional displays should not be in the same room as the educational activity.

32. Travel and accommodation arrangements, social events and venues for industry sponsored CME/CPD activities should be in keeping with the arrangements that would normally be made without industry sponsorship. For example, the industry sponsor should not pay for travel or lodging costs or for other personal expenses of physicians attending a CME/CPD event. Subsidies for hospitality should not be accepted outside of modest meals or social events that are held as part of a conference or meeting. Hospitality and other arrangements should not be subsidized by sponsors for personal guests of attendees or faculty, including spouses or family members.

33. Faculty at CME/CPD events may accept reasonable honoraria and reimbursement for travel, lodging and meal expenses. All attendees at an event cannot be designated faculty. Faculty indicates a presenter who prepares and presents a substantive educational session in an area where they are a recognized expert or authority.

For more information on this policy, visit:

http://www.cag-acg.org/policies and click the links for:

1. CAG’s Position Statement of Interaction between Industry and the CAG
2. The Canadian Medical Association: Physicians and the Pharmaceutical Industry Policy document
3. Rx&D Code of Conduct document
Fee Schedule:

A. PHYSICIAN OR PHYSICIAN ORGANIZATION+ FEE SCHEDULE
(to include applications submitted by a physician organization+ with, or without, a CAG member)

In regard to applications where a CAG member is the Chair of the planning committee, the following fee schedule will apply:

- No charge in the instance where the event budget does not exceed $10,000
- $500* fee in the instance where the event budget is >$10,000 ≤ $50,000
- $1,500* in the instance where the event budget is >$50,000 ≤ $200,000
- $2,500* fee in the instance where the event budget is >$200,000

In regard to applications where a CAG member is not the Chair of the planning committee, the following fee schedule will apply:

- $500* for an application with an event budget <$10,000
- $1,000* in the instance where the event budget is >$10,000 ≤ $50,000
- $3,000* in the instance where the event budget is >$50,000 ≤ $200,000
- $5,000* in the instance where the event budget is >$200,000

* Add applicable Ontario HST 13% to fee

B. NON-PHYSICIAN ORGANIZATION FEE SCHEDULE
(to include applications which are submitted by a non-physician organization)

- All applications from non-physician organizations will be undertaken as co-developed programs and will be considered under this category in regard to accreditation fees. Further details regarding the co-development process can be found within the CAG MOC guidelines.
- $2,000 non-refundable application fee MUST accompany all proposals unless the co-developed partner is at a corporate sponsorship level that permits free accreditation.
- The accreditation fee will be based upon an audited financial report which must be provided to the CAG within 2 months of completion of the event
  - In regard to applications where a CAG member is the Chair of the planning committee, a fee equal to 5% of the audited gross revenue for the event will be charged. This charge will be adjusted for the deposit and will not exceed $5,000 plus applicable taxes.
  - In regard to applications where CAG member is not the Chair of the planning committee, a fee equal to 10% (minus the deposit) of the audited gross revenue for the event will be charged. This charge will be adjusted for the deposit and will not exceed $10,000 plus applicable taxes.
Definition of Physician Organization:

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- Research.

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http://www.royalcollege.ca/portal/page/portal/rc/common/documents/cpd_accreditation/cpd_glossary_e.html
CAG Administration / Remuneration:

A subcommittee of the CAG Education Committee, the MOC Committee, administers the program.

The subcommittee consists of the chair and several members of the CAG, one of whom should be a representative of the ethics committee.

The subcommittee will be responsible for:
- ensuring that all applications are suitable for consideration
- compliance with the College guidelines
- compliance with CMA guidelines
- assigning CAG representation to Co-developed programs in development
- ensuring that programs are reviewed in a timely way
- submission of the final program, with documentation of process to the Education committee chair before approval.
- submission of all documents to the CAG National Office
- preparation of an annual report.

The Chair of Education and Chair of MOC will NOT be paid.

Education and/or MOC Committee members, assigned to co-developed initiatives by the CAG, may be reimbursed for their participation by industry with an honorarium identical to that of the other faculty/panel members working on the initiative. Recommendations in regards to honoraria are provided below. ALL honoraria MUST be administered by the CAG and a 10% administration fee will be applied. Travel and expenses related to planning meetings should also be paid directly to the participating CAG MOC Committee representative.

Honorarium for Participation in CAG Co-Developed Educational Programs

The following represents general recommendations for honoraria given to participants of a CAG co-developed educational program. This guide cannot cover all possible circumstances and is not meant to cover other CAG or non-CAG educational events / programs such as visiting professors or expert sessions. The statements made herein will be reviewed yearly by the CAG Education Committee to ensure compliance with RCPSC guidelines for Co-developed activities, and for market fairness of the proposed honorarium.

1. Participants, actively involved in the development of a co-developed educational program, should be provided an honorarium representative of their time commitment. The CAG Education and/or MOC Committee members, assigned to co-developed initiatives by the CAG, may be reimbursed for their participation. Travel and expenses related to co-developed program development meetings should be paid directly by the industry sponsor, and will also include such costs related to the participation of the CAG MOC Committee representative(s).

2. Honoraria, related to the development of a co-developed program, will be calculated and paid once the program has been developed and submitted for final accreditation by the CAG. Program development committee members should be provided with a time log (as attached below) to facilitate the tracking and capture of activities, which upon completion of program development will be submitted to the CAG National Office.

3. The CAG recommends, as a standard, that an amount of $2,000.00 per day (8 hours) is paid for the time committed in development of the co-developed program. The honoraria paid to committee chair/co-chairs should recognize any additional commitment that is commensurate with this responsibility.

4. In the instance(s) where co-developed educational programs are rolled-out (e.g. lunch and learns, evening dinner sessions) the CAG recommends an honorarium of $1,000.00-$1,500.00 (local event) or $1,500.00-$2,500.00 (out of town/overnight requirement) be paid for faculty/facilitators.
CAG Co-developed Educational Initiative Time Log

Co-developed Initiative Title: ________________________________

Name: ____________________________________________________

Signature: ________________________________________________

Date: _____________________________________________________

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<th>Date (dd/mm/yy)</th>
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*Report time in hours and the closest quarter hour. Example: One hour and fifteen minutes = 1.25 or two hours and 45 minutes = 2.75

Fax to: 905-829-0242 or email to general@cag-acg.org