

HCA Transitional Register Extension Request Form

HCAs on the Transitional Register who cannot complete their remaining registration requirements by **February 2, 2027**, due to extenuating circumstances may request up to a one-year extension.

HOW TO SUBMIT A REQUEST

- Complete all required sections of this form.
- Email the completed form to hcarenewal@clha.com.
- Attach any supporting documents to the same email, if applicable.
- Submit the request by **January 2, 2027**.

HCA CONTACT INFORMATION

Full Name:

Registration number:

Email address:

Phone number:

EXTENSION REQUEST

Reason for the Request

Describe the circumstances that are preventing you from completing the remaining registration requirements by February 2, 2027.

Time Needed

How much additional time is needed to complete the remaining registration requirements?

Supporting Documents

Supporting documents may be included with the request. For example, this could include a letter from an employer or physician that helps explain why the requirements cannot be completed by the deadline.

Signature:

Date: