



Faculty of Medicine

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CHANGE OF ADDRESS

Name: _____

New address valid as of: _____

New address: _____

IF REQUESTED, PGME will notify the following:

- Eastern Health (Human Resources)
- Eastern Health (Payroll)
- College of Physicians and Surgeons of Newfoundland & Labrador
- Professional Association of Internes & Resident of Newfoundland

You are required to notify the following:

- Canadian Medical Protective Association (CMPA)