



**NAME / SIGNATURE VARIANCE FORM**

This document is required of all applicants

**PURPOSE:**

This form is used to verify your identity across all submitted documents. You **MUST** declare every variation of your name AND signature exactly as it appears on any document submitted as part of your application.

**Failure to fully disclose ALL name and signature variations will result in your application being deemed INELIGIBLE.**

**IMPORTANT - READ CAREFULLY:**

1. Name variations and signature variations are assessed **separately**.
2. Even if your name is consistent across documents, you must still disclose any differences in how your signature appears. Differences in signatures (e.g., full signature vs. initials, printed vs. cursive, shortened signatures) must be declared.
3. Even small differences matter and must be reported.
4. Missing or undisclosed name/signature variations cannot be verified and will be deemed ineligible.

**INSTRUCTIONS:**

List all variations (name and signature) exactly as they appear on all your submitted documents. Do not assume that minor differences are acceptable.

Variations for Name and Signatures include (but is not limited to):

- Full name vs. name with initials (e.g., Jane Marie Smith vs. Jane M. Smith)
- Names with omitted or additional middle names
- Different spellings (e.g., Mohamed / Mohammed)
- Different name order (family name first vs. last)
- Previous legal names (e.g., marriage, legal change)
- “English” or preferred names vs. legal names
- Any variations in signatures across documents

Below is a list of examples to help guide you in completing this form. This list is not comprehensive, but an example of documents to consider.

Preferred Name (Indicated on AIMG Application): John Doe:

Name Variation (exactly as shown)	Document(s) Name
John C. A. Doe	Medical Degree, NAC Statement of Results
John Chris Alex Doe	Canadian Passport
John Chris Doe	Alberta Health Care Card



# Alberta International Medical Graduate Program

UNIVERSITY OF ALBERTA  
FACULTY OF MEDICINE & DENTISTRY  
Department of Medicine

UNIVERSITY OF CALGARY  
CUMMING SCHOOL OF MEDICINE

Preferred Signature: *John Doe*

Signature Variation (exactly as shown)	Document(s) Name
<i>J. Doe</i>	Medical Degree
JOHN DOE	Alberta Driver's License
<i>Doc John C.S.</i>	PR Card

**Note:** Documents required will vary depending on the option under which you are applying; (Option A, Option B, or Option C.) It is the applicant's responsibility to ensure all documents containing the applicant's name are identified. Some documents to consider when completing this form are (but not limited to)

- *Alberta High School Transcript*
- *Postsecondary Transcript*
- *Applicant Identity Form*
- *Statutory Declaration*
- *Alberta Driver's License/ID card*
- *Alberta Personal Health Card*
- *Canadian Passport*
- *Permanent Resident Card*
- *English Language Proficiency (IELTS, OET, CELPIP)*
- *Medical Degree*
- *NAC Statement of Results*
- *QE1 Statement of Results*
- *Physiciansapply.ca profile*
- *Work or Guarantor Letter*

### **Common Errors (Do NOT skip)**

- Leaving out middle names that appear on degrees or exam results
- Not listing maiden or previous legal names
- Using an English/preferred name but not listing legal name
- Omitting initials used on exam reports (e.g., QE1, NAC, IELTS)
- Assuming small spelling differences do not matter
- Ignoring signature differences across documents
- Your preferred name MUST match the name used on the following documents:
  - i. Application Profile
  - ii. Identity Verification
  - iii. Statutory Declaration



# Alberta International Medical Graduate Program



## Section A: Name Variances

Preferred Name: (as indicated in your application):

**List EVERY variation of your name exactly as it appears on each document.**

Only include entries that differ from your preferred name above.

Name Variation (exactly as shown)	Document Name

## Section B: Signature Variances

Preferred Signature: \_\_\_\_\_

Sign Here (use a pen)

**List EVERY variation of your signature exactly as it appears on each document.**

Only include entries that differ from your preferred signature above. Signature Variation (sample signature)	Document Name

## DECLARATION

I declare that all names and signatures listed in the form belong to me and represent all variations used across my submitted documents for the AIMG Program 2027 Cycle online application.

I understand incomplete and inaccurate disclosure will result in my application being deemed ineligible.

Applicant Name:

Applicant Signature:

\_\_\_\_\_



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## SECTION C: No Variances to Declare

**Complete this section ONLY if your name AND signature are exactly the same on ALL documents.**

**NO Name Variances: Complete this section ONLY if your name is exactly the same on ALL documents.**

- I confirm that I have reviewed all documentation and that my name appears exactly the same on all documents submitted.
- I understand that failure to disclose any variation will result in my application being deemed ineligible.

Applicant Name:

Applicant Signature: \_\_\_\_\_

Sign Here (use a pen)

**NO Signature Variances: Complete this section ONLY if your signatures are exactly the same on ALL documents.**

- I confirm that I have reviewed all documentation and that my signature appears exactly the same on all documents submitted.
- I understand that failure to disclose any variation will result in my application being deemed ineligible.

Applicant Name:

Applicant Signature: \_\_\_\_\_

Sign Here (use a pen)