**FORM 15A - MOTION ORDER**

**ONTARIO PHYSICIANS AND SURGEONS DISCIPLINE TRIBUNAL\***

**Tribunal File No.:** Insert No.

**Date:** Enter date of order.

[Insert name of panel chair], (chair)

[Panelist 2] {List names alphabetically by last name}

[Panelist 3]

[Panelist 4]

[Panelist 5]

**BETWEEN:**

College of Physicians and Surgeons of Ontario

**College**

- and -

Dr. [First name] [Last Name]

Member

MOTION ORDER

This motion, made by insert moving party for state the precise relief sought, was heard on Insert date Choose format.

**The Tribunal** orders that:

1.

|  |
| --- |
|  |
| [Insert name of panel chair], (chair)on behalf of the panel |