



The Association of Professional Engineers,
Geologists and Geophysicists of Alberta

NAME CHANGE REQUEST

CURRENT NAME REGISTERED WITH APEGGA: _____

MEMBER #: _____

- Professional Member
- Member in Training
- Professional Licensee
- Examinee/Student

Name Change From _____

Name Change To _____

Please include **ONE** of the following with your name change request:

- I have enclosed a copy of my marriage certificate
- I have enclosed a copy of my legal change certificate
- I am changing to my maiden or birth name (no documentation required)

Date: _____ **Signature:** _____

Email: cjimmo@apegga.org

Fax: (780) 426-1877

Mail: APEGGA
1500 Scotia One
10060 Jasper Ave NW
Edmonton AB T5J 4A2
Attention: Caitlin Jimmo