



## APPLICATION FOR REACTIVATION FOR WITHDRAWN APEGGA EXAMINATION CANDIDATES/STUDENTS

*I wish to have my application with APEGGA reactivated. I recognize that in making this request I will be assessed based on any new policies the Board of Examiners have implemented since the last time my file was reviewed.*

**Please Print Clearly:**

Name: (Last)	(First)	Member #	Please mail, fax or email to: <b>Attn: Technical Exams Coordinator</b> for additional information contact <b>Ye Ge, Technical Exams Coordinator at 1-800-661-7020 or Email: yge@apegga.org</b>
Mailing Address <b>Please check one</b> <input type="checkbox"/> Business <input type="checkbox"/> Residential			
E-Mail Address			
Business #		Home #	

**Note:** Should you have 4 years work experience you should be applying for professional membership.

If you are requesting a re-activation on your application for **Professional Membership** or **Foreign Licensee** than you must provide APEGGA with updated work experience records. APEGGA only requires an update of your work experience from the last time your file was reviewed. Please visit [http://www.apegga.org/Applicants/Engineers/peng\\_general.html](http://www.apegga.org/Applicants/Engineers/peng_general.html) to obtain the following documents: "Work Experience Record Instructions" and "Work Experience Records," which are located in the FORMS section. You must use these work experience records in order for your experience to be reviewed.

**ALL DOCUMENTS MUST BE RECEIVED BEFORE AN APPLICATION IS REACTIVATED.**

**Reactivation fees are required for withdrawn files of EXAM CANDIDATES/STUDENTS who applied for the following:**

- Member-in-Training \$70.00
- Professional Member \$140.00
- Foreign Licensee \$211.00

**APEGGA OFFICE USE ONLY**

Member Number

Order ID

Date

Enclosed is my cheque for \_\_\_\_\_ made payable to APEGGA .

Visa  Master Card  AMEX

# \_\_\_\_\_

Expiry Date: \_\_\_\_\_

Date: \_\_\_\_\_ Signature: \_\_\_\_\_