



APEGGA

The Association of
Professional Engineers, Geologists
and Geophysicists of Alberta

APPLICATION FOR REGISTRATION

FOR ENGINEERS REGISTERED ELSEWHERE IN CANADA & USA

Please read the accompanying instructions carefully before you fill out the form.

For Office Use Only	
Member Number:	_____
Employer Number:	_____
Comp Entry:	_____
Receipt Number:	_____
Amount	_____

I wish to apply for registration as a Professional Member
 Foreign Licensee

in the practice of

- | | | | |
|---|---------------------------------------|--|--|
| <input type="checkbox"/> Engineering | <input type="checkbox"/> Agricultural | <input type="checkbox"/> Engineering Physics | <input type="checkbox"/> Mechanical |
| | <input type="checkbox"/> Chemical | <input type="checkbox"/> Environmental | <input type="checkbox"/> Metallurgical |
| | <input type="checkbox"/> Civil | <input type="checkbox"/> Geological | <input type="checkbox"/> Mining & Mineral Processing |
| | <input type="checkbox"/> Computer | <input type="checkbox"/> Geomatics | <input type="checkbox"/> Petroleum |
| | <input type="checkbox"/> Electrical | <input type="checkbox"/> Industrial | <input type="checkbox"/> Software Engineering |

1. PERSONAL INFORMATION

Legal Name

Mr. Ms. Dr.

Surname Given Names in Full (NO Initials)

Preferred Name

Surname Common Names and/or Initials

Home Address

Street

City Province Postal Code

()

Telephone Fax E-Mail

Business Address

Street

City Province Postal Code

()

Telephone Fax E-Mail

Company Name

Preferred Address

Home Business Other (attached)

Citizenship

Canadian Citizen Admitted to Canada for permanent residence in 19_____

Date of Birth

Month/Day/Year

Place of Birth

Note: The "PREFERRED ADDRESS" is the address that appears in the Membership Register on our Website.

Name: _____

2. POST SECONDARY EDUCATION

	Institution	Location	Dates Attended (Mo/Yr)	Date of Graduation (Mo/Yr)	Degree or Diploma (Use correct abbrev. title)	Specialization or Discipline
1			From			
			To			
2			From			
			To:			
3			From			
			To			

3. EXPERIENCE

Attach a resume. For each position include dates, (month/year), technical responsibilities & accomplishments, management responsibilities, communications skills required and an understanding of the societal implications of your work.

4. REFERENCES

If you are **registered elsewhere in Canada** do **not** provide the names of references at this time. In most cases APEGGA will not need to contact references. Occasionally however we may need to contact your references and if so we will contact you to provide us with the names of your references at that time.

For **US applicants not registered elsewhere in Canada** please provide the names and contact information of at least 3 references. Alternatively include your NCEES Record.

5. CHARACTER

Have you ever been found guilty of, or is there an outstanding judgement against you for:

- a) unprofessional or unskilled practice by a professional regulatory organization or agency? Yes No
- b) an offence under the Engineering, Geological and Geophysical Professions Act or Regulations or equivalent legislation in other jurisdictions? Yes No
- c) any criminal offence? Yes No
- d) negligence due to unskilled practice of the professions in any civil actions made against you? Yes No

6. KNOWLEDGE OF PROFESSIONAL LAW & ETHICS

- I have passed the Professional Practice Examination for the _____ (province) Association. (Act, Regulations & By-laws Confirmation enclosed.)
- At the time I was first registered with _____ (province) Association there was no such requirement for registration. (Act, Regulations & Bylaws Confirmation enclosed.)
- I will pass the National Professional Practice Examination to fulfill the registration requirements.

Name: _____

7. ENGLISH LANGUAGE COMPETENCY

- English is my native language.
- I have previously proven that I am competent in the use of the English language by virtue of _____

8. PROFESSIONAL STATUS

- I am / was registered in _____
Province(s) or State(s) Include Years Registered
- I previously applied for registration with APEGGA in _____ and _____
Year
 - was assessed examinations and/or experience which has not been completed.
 - was previously registered as a _____ # _____ from _____ to _____.
 - am presently an MIT # _____.
- I previously applied for registration with _____ and _____
Other Province(s)/State(s)/Country(ies)
 - the application was refused/rejected.
 - my license was subsequently revoked.
- I declare that all the above statements are complete and correct to the best of my knowledge and belief. I agree to file additional information if the response to any question changes between now and the date of my registration. I understand that a false statement or misrepresentation may disqualify me for registration.
- I grant permission to APEGGA to obtain such additional information as it may deem appropriate from such additional sources as it may deem necessary to the progression of my application.
- I will conform to the requirements of the Engineering, Geological and Geophysical Professions Act of the province of Alberta, the Regulations including the Code of Ethics, and the By-Laws of the Association if granted membership in APEGGA.
- I declare that I do not have any alcohol or drug dependency or suffer from any medical condition that renders me incapable of fulfilling the requirements of a professional engineer, geologist or geophysicist.

Enclosed is my cheque for \$ _____ made payable to APEGGA *or*
 Visa Master Card AMEX # _____ Expiry Date: _____

Date _____ Signature _____