

APPLICATION FOR REGISTRATION						For Office Use Only			
Please read the accompanying instructions carefully before you fill out the form.						Member Number:			
I wish to apply for registration as a Professional Foreign Lice Member-In-				Licensee	e Comp Entry: Receipt Number:				
and to be	e assessed in		<u> </u>						
□ Engineering □ Agricultural   □ Chemical   □ Geology □ Civil   □ Computer   □ Geophysics □ Electrical			☐ Env☐ Geo	gineering Physics vironmental ological omatics ustrial	<ul> <li>Mechanical</li> <li>Metallurgical</li> <li>Mining &amp; Mineral Processing</li> <li>Petroleum</li> <li>Software Engineering</li> </ul>				
1.	PERSONAL INF	ORMATION							
	l Name Ms. Dr.				G: V - F II A	YO Y 12 1 1			
Prefe	erred Name	Surname		Given Names in Full (NO Initials)					
Home Address				Common Names and/o	r Initials				
					Street				
Business Address		City			Province Postal Code			<del> </del>	
		Telephone			Fax	E-Mail			
					Street				
		City			Province	1	Postal Code		
		Telephone			Fax	]	E-Mail		
Com	pany Name	-							
Prefe	erred Address	☐ Home			Business		Other (attached)	)	
Citizens	hip	Canadian C	Citizen	Ad	mitted to Canada	for permanent	residence in 19		
				Place o	f Birth				
		Month/Day/	Year						
<i>2.</i>	POST SECOND	ARY EDUCAT	TION				Degree or	Specializatio	
	Institutio	n	Loca	ation	Dates Attended (Mo/Yr)	Date of Graduation (Mo/Yr)	Diploma (Use correct abbrev. title)	n or Discipline	
1					From				
					То				
2					From				
					То				
3					From				
1 1					To			i e	

3.	<b>EXPERIENCE</b>							
Plea	ase attach a current resume in rev	erse chronological	order (present pos	ition first) to your application of	outlining the following:			
	*Company na *Employment *Names of Su *Positions titl	pervisors						
	each position include technical r an understanding of the societal			nanagement responsibilities, co	ommunications skills required			
<i>3a</i>	POST GRADUATE ACA	DEMIC STUDIES	S - EXPERIENCE	CREDIT				
I an	n requesting experience credit for	my post graduate	academic studies		☐ Yes ☐ No			
	ease note post-graduate experience itution. Refer to page 15 of the de							
repo	es; please attach the title page, ta ort and a letter of recommendatio ineering/geology/geophysics exp	n from your thesis	supervisor which i	ncludes a statement about the				
<b>4</b> . The	REFERENCES ese individuals must be familiar w	with the significant	time elements of y	our experience (if applying for	Professional Membership).			
	Name	Relationship	Professional Status	Complete Address and/or E-Mail Address				
1								
2								
3								
5.	CHARACTER							
Hav	ve you ever been found guilty of,	or is there an outst	anding judgement	against you for:				
a)								
b)		n offence under the Engineering, Geological and Geophysical Professions Act or Regulations requivalent legislation in other jurisdictions?						
c) d)	negligence due to unskilled prac	etice of the professi	ions in any civil ac	tions made against you?	☐ Yes ☐ No ☐ Yes ☐ No			
6.	KNOWLEDGE OF PROP	KNOWLEDGE OF PROFESSIONAL LAW & ETHICS						
	I have passed the Profession	I have passed the Professional Practice Examination for the Association.						
	I will pass the National Pro-	fessional Practice I	Examination to fulf	fill the registration requirement	s.			

Name:

7.	ENGLISH LANGUAGE COMPETENCY								
	English is my native language.								
	I have attached a hand written letter explaining why I am competent in the use of the English language.								
	I have previously written the Test on English as a Foreign Language. Attach copy of TOEFL score sheet.								
	I will be writing the TOEFL to fulfil the registration requirements.								
8.	PROFESSIONAL STATUS								
	I am not registered anywhere and have never applied.								
	I previously applied for registration with APEGGA in  Year  Year								
	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 is pending.								
	the application was refused/rejected.								
	was assessed examinations and/or experience which has not been completed.								
	am/was registered in Other Province(s)/State(s)/Country(ies) Include Years Registered								
	my license was subsequently revoked.								
9.	COMMENTS								
<b>3</b>	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.								
<b>3</b>	I grant permission to APEGGA to obtain such additional information as it may deem appropriate from such additional sources								
<b>3</b>	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.								
<b>3</b>	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.								
Enclose	d is my cheque for \$ made payable to APEGGA or								
☐ Visa	Master Card AMEX # Expiry Date:								
Date	Signature								
	<u> </u>								

Name: