

















INTERPROVINCIAL TRANSFER FORM FOR CERTIFIED MEMBERS* of Applied Science and Engineering Technology Associations

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BC AB	SK	MB	ON	QC	NB	NS	PEI	NL
\$112.00 \$105.00	\$100.00	\$100.00	\$113.00	\$114.98	\$100.00	\$100.00	\$100.00	\$115.00
INSTRUCTIONS TO APPLICATIONS T	oove to the as will be aw N AND EXAM essional in go es may requi	sociation / soci varded the co MINATION PROC pod standing in ire applicants t	ety / ordre in orresponding GRAMS FOR or the province to pass a Pi	your new pro title to u CERTIFIED T e(s) in which ofessional P	ovince. *Associ se in the pr ECHNICIANS M n you are regist ractice Examin	ate, student, ovince you AY NOT BE tered from b ation or me	life, honours are trans TRANSFER efore a tran et other adi	ary, etc. are ferring to. ABLE. You sfer will be
A. PERSONAL AND BUSIN	NESS INFORM	MATION:	Man [Woman [☐ Non-binary	□Pref	er Not to Say	
Name:								
Fire		Middle	Initial	Surname				
Maiden Name (if applicable):								
Date of Birth: Month	Day	Year	_					
Home Address:								
Apartment/Suite No.:	Sti	reet:					Box No.:	
City/Town:		Provinc	e:		Post	al Code:		
Phone Numbers (include area	e:		Cell:					
Home Email*:					Preferred m	ailing address	s: Home	☐ Work
Business Information/Addro								
Date started:			Job	Title:				
Suite No.:	_ Street:						Box No.:	
City/Town:		Provinc	e:		F	ostal Code:		
Telephone (<i>include area code</i>	e):		Cell:		F	ax:		
Work Email*: * Generic email a	addresses are	not accepted (i	e.: abcflowers	s@)				
B. ACADEMIC ACHIEVEM	ENTS:							
Institute, College of Appli Arts & Technology, University	ed	Location	Year Attend From	anco	Diplom e tained in the field	a, Certificate d of Electrical		Inical, etc.)

C. <u>CURREN</u> 1	PROFESSIONAL REGISTRATION:
1. I am <u>c</u>	urrently a registered / certified: TECHNICIAN TECHNOLOGIST
	in the Province(s) of Registration No.:
	*List ALL provinces in which you hold current registration
2. I 🗌 H	AVE HAVE NOT written the Professional Practice Examination in the Province(s) of
	to MAINTAIN TERMINATE my current registration in the Province(s) of
D. PRIVACY	STATEMENT, APPLICANT'S DECLARATION, AND SIGNATURE: All applicants must answer the following questions.
good ch applied	Definition of "Good Character" vincial association that application is being made to, will examine the character of an applicant to determine if they meet the naracter requirement in any circumstances that provide reasonable grounds to believe that the applicant will not practice science/engineering technology in accordance with the provincial association's Act, Bylaws, Code of Ethics and Guidelines, and in particular where the applicant:
a)	has a record for professional misconduct or incompetence
b)	has committed a criminal offense for which a pardon has not been granted pursuant to the Criminal Records Act
c)	has been found to be at fault in a civil action suit related to negligence in their professional practice
d)	willfully obtains or attempts to obtain registration or renewal of registration by:
	 i. cheating on an examination ii. making, or cause to be made, a false statement on their application
	iii. committing any other impropriety during the application process.
ı,	, declare that: (initial beside each that applies)
a.	I have never been refused registration or had registration/certification revoked or suspended by anothe engineering technology regulator or engineering licensing body.
b.	There is no record on any register of any technology regulator or licensing body, of a finding against me of professional misconduct, incapacity or incompetence.
c.	I have not been disciplined or had a license restriction in the past by any engineering technology regulator or engineering licensing body, either as an individual or as a corporate officer, nor, to the best of my knowledge, is there any investigation disciplinary action or license restriction currently pending against me, either as an individual or as a corporate officer.
d.	I have never been found guilty of any offence under the Association Act or Bylaws, of another regulator body.
e.	I declare that I have never been found guilty of a criminal offence related to the practice of the profession.
f.	I affirm that I have read and I am familiar with the current Bylaws, and Code of Ethics and Practice Guidelines applicable to the province in which I am transferring to, and if admitted to that province, I agree to be governed by such.
	I have read the <i>Definition of "Good Character"</i> . (Page 2 – Titled: Definition of "Good Character".)
If you have be Registrar".	en disciplined or are currently under investigation, enclose an explanation in a sealed envelope marked "Confidential to the
statement in the to be contrary originating pro	clare that the statements made in this application are true and correct. I acknowledge that any false or misleading is application, or relating to any document in support of this application, including concealment of any material fact, is found to the "Definition of "Good Character", it may lead to revocation of my registration. I consent to and authorize the ovince's regulator to share and release information and records in their possession regarding my registration with the nce's regulator following the completed transfer.
Date:	TH DAY YEAR
Note: Transfe more than one	IF DAY YEAR If fee is non-refundable and all fees are subject to change without notice. Applicants who wish to maintain registration with regulator are required to remit annual professional fees to each regulator. Applicants may be charged a professional fee in the pon approval as a registered professional.
E. PAYMENT I	METHOD:
UVISA [MASTERCARD CHEQUE / MONEY ORDER ENCLOSED Amount: \$
Card Numbe	r:
Name of Care	
	dholder: Signature:

ORIGINATING PROVINCE INFORMATION - FOR STAFF USE ONLY This information is to be provided by the province of original registration/certification upon request by the province of new residence. Applicant's Name: Information in <u>Section C</u> confirmed? ☐ Yes ☐ No If no, please explain: 2. Was the applicant a transferee from another province? ☐ Yes ☐ No If yes, provide previous province: _ Discipline of registration/certification (including specialty or option): Date of registration/certification at the classification level: The applicant has successfully passed the Professional Practice Examination in the Province of_ (mm/dd/vvvv) Province of original registration/certification to attach the following documentation: (Not required in Alberta) **Transcripts** Yes Academics or File Evaluation Summary Yes Experience Evaluation Summary ☐ Yes Reclassification Program ☐ Yes Current Category of Registration/Certification (Please select exact category) ☐ CTech ☐ C.Tech. ☐ CET ☐ C.E.T. **TECHNICIAN:** The technologist applicant has completed a technology report. Yes No If no, please explain: 7. Is the applicant currently under or has been under any investigation, discipline action, or license restriction? \square Yes \square No If yes, please explain: 8. Does the applicant have the current year's annual professional fee paid in full? \square Yes \square No If yes, registration valid until? (mm/dd/yyyy) Affix Seal Here Date: _____ (mm/dd/yyyy) G. NEW PROVINCE INFORMATION - FOR STAFF USE ONLY Upon acceptance, the "transfer-to" province shall complete this section and return a copy to the "transfer-from" province. _____ (provincial regulator) acknowledges that registration of the above named application was

completed on _

(mm/dd/yyyy)