

Practice Review Board

RESUME PRACTICE APPLICATION I wish to resume practice as a: in □ Engineering ☐ Geology ☐ Geophysics ☐ Geoscience 1. PERSONAL INFORMATION **APEGA ID Legal Name** Last Name First and Middle Names (NO initials) **Preferred Name** Last Name First and Middle Names (NO initials) **Home Contact Information** Street City Province Postal Code Telephone Fax Email (Is this your primary email? **Work Contact Information** Employer/Company Name Position title Street City Province Postal Code Email (Is this your primary email? Telephone Fax Home Work 🗌 **Preferred Contact Method** Other: I first declared 'Non-Practising' on: ______ ☐ I am not registered to practise elsewhere. ☐ I am registered and in good standing, as a Professional Designation _ with ____ since ____ Year

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If you have been **registered as a practising member in another Canadian jurisdiction while** your APEGA non-practising declaration has been in effect, **please skip to section 3 and sign the declaration in section 4.**

2. WORK EXPERIENCE RECORD (WER)

If your non-practising period is **greater than 2 years**, you must complete and submit a **Work Experience Record (WER)** with this application. To complete the WER, please download a copy from the website. Please review the instruction guide included in the document on how to complete and submit the form.

3. CHARACTER DECLARATION

Please respond to each question and provide details as required.

Character Declaration		Yes	No
1.	I have been involved in or am the subject of criminal, complaint, or disciplinary proceedings in a jurisdiction.		
	If yes, please specify which jurisdiction:		
	APEGA ID Number:		
2.	I have pleaded guilty or been found to have committed any of the following:		
	Note: Only check yes for conduct that has not been pardoned. Check no if a question does not apply.		
	an indictable offence or summary conviction offence under any Act of the Parliament of Canada or any Act in any province of Canada		
	b) unprofessional conduct or unskilled practice by any Canadian engineering or geoscience professional licensing body (association)		
	c) unprofessional conduct or unskilled practice by any other Canadian professional licensing body		
	d) negligence due to unskilled practice of engineering or geoscience in any civil action		
	e) academic misconduct		
	If yes, please specify:		
3.	I have pled guilty or have been found to have committed unprofessional and/or unskilled practice outside of Canada, similar to any conduct described in statement 2.		
	Only check 'Yes' for conduct that has not been pardoned.		

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Character Declaration		Yes	No
	If yes, please specify the nature of the circumstance:		
4.	I have had a civil judgement against me relating to fraud.		
5.	I have disobeyed an order of a court.		
6.	There are events, circumstances, or conditions, other than those mentioned above, that are potentially relevant to my competence to practise engineering or geoscience, including circumstances relating to chemical and/or substance abuse.		
7.	Is there any other matter regarding your registration that we should be aware of?		
	If yes, please specify:		

If you have selected 'Yes' to one or more of the statements in Section 2, you must provide supporting documentation of the circumstances.

4. DECLARATION

- I declare that all the above statements are complete and correct to the best of my knowledge and belief. I
 agree to provide additional information if the response to any question changes between now and the
 date I am allowed to resume practice. I understand that a false statement or misrepresentation may
 disqualify me from resuming practice and be referred to the Investigation Committee for unprofessional
 conduct
- I grant APEGA permission to request and obtain information from additional sources as deemed necessary or relevant to process my application. I acknowledge the information submitted and/or collected will be used by APEGA and the Practice Review Board to determine a decision to resume practice.

•	I declare that I do not have any alcohol or drug dependency or suffer from any medical condition that
	renders me incapable of practicing engineering or geoscience.

Date	Signature

Email the completed form and required attachments to:

APEGA Professional Practice Department

Email: Resumption@apega.ca

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