



**The Association of PROFESSIONAL ENGINEERS AND GEOSCIENTISTS  
of the Province of British Columbia**

200 - 4010 Regent St., Burnaby, BC, Canada V5C 6N2  
Phone: (604) 430-8035 or Toll free in BC: 1-888-430-8035; Fax: (604) 430-8085;  
Website: www.apeg.bc.ca Email: register@apeg.bc.ca

**CONFIRMATION REQUEST FORM FOR  
INTERNATIONAL AGREEMENT PROFESSIONAL ENGINEER**

(Engineers Australia (CPEng), The Hong Kong Institution of Engineers (MHKIE) or Engineers Ireland (CEng MIEI))

**FOR APPLICANT ONLY:**

**NOTE TO APPLICANTS:** Please ask your Home Association to complete this form.

APPLICANT'S NAME: \_\_\_\_\_ DATE OF BIRTH: \_\_\_\_\_

INSTITUTION: \_\_\_\_\_ REGISTRATION NUMBER: \_\_\_\_\_

**BY THE ASSOCIATION ONLY:**

The above applicant for registration has stated that he/she is/was a member of your institution. Please complete the information below concerning the standing of the applicant and return it to this office. DO NOT return the completed form to the applicant.

Gillian M. Pichler, P.Eng., Director – Registration & Licensing

Name on proof of citizenship/permanent residency document  Same as above or  Other (please provide in the space below) \_\_\_\_\_

Date of Enrolment: \_\_\_\_\_

CPEng  MHKIE  CEng MIEI  In good standing? Yes  No

Date registration granted: \_\_\_\_\_ under \_\_\_ years of experience requirement and **evaluated under** \_\_\_\_\_ discipline. This applicant was given credit for \_\_\_ months of experience upon registration.

Granted Licensure through a third party mutual recognition agreement? Yes  No   
(If yes please include information regarding licensure in the remarks section below)

Date to which membership fee paid : \_\_\_\_\_

Membership Status: Practicing  Non-Practicing

Has this member ever  resigned  been removed? (check one)

Date of Resignation/Removal: \_\_\_\_\_

Date of Reinstatement: \_\_\_\_\_

Has this member ever been subjected to any disciplinary action? Yes  No

University degree(s): (please list degree(s), institution(s), discipline of graduation(s), year(s) of graduation)

Do you have confirmation of the above degree(s)? Yes  No

Remarks: (Please list any qualifying/confirmatory examinations assigned / grandparenting policy / waived and reasons if waived, or Other Information)

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Position