



Professional Engineers
and Geoscientists of BC
www.apeg.bc.ca

The Association of Professional Engineers and Geoscientists
of the Province of British Columbia
200-4010 Regent Street
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REFERENCE FORM FOR LIMITED LICENCE (Engineering Licensee/Eng.L. and Geoscience Licensee/Geo.L)

PLEASE TYPE OR PRINT LEGIBLY

Referee Name:	Applicant [Full Legal] Name:	
Referee Address:	Applicant Email:	Applicant ID Number:
	Scope of Limited Licence:	
Date:		

Your name has been put forward by this applicant as a Referee to verify his/her experience for granting of a Limited Licence. It is important to the applicant, as well as the Association that you complete the form and return it. **Please refer to the enclosed Proposed Scope of Practice and experience record supplied by the applicant.** Please answer all questions to the best of your **direct** knowledge only. Second-hand information is of little value. Please **do not suppress any information which might influence the decision.** Because granting of Limited Licence is based upon evaluation by professional engineers or professional geoscientists, the evaluations of referees are critical to the process.

If for any reason, you feel that you cannot provide an assessment of this applicant, please return this form to the Association and note your reasons below in the space provided. All statements will be treated as confidential. Thank you for taking part in this most important aspect of the licensing process.

REFEREE INFORMATION

Position		Professional Designation (P.Eng./P.Geo. etc)	
Employer		Discipline of Engineering/Geoscience	
Registration/Licence #		Jurisdiction of Registration	

Telephone Number: _____ Email: _____

If you are unable to act as a referee, please indicate the reason in the space provided:

A. YOUR PERSONAL KNOWLEDGE OF THE APPLICANT

1. For how many years have you known the applicant:

Personally: _____ From (please provide dates) _____ to _____

Professionally: _____ From (please provide dates) _____ to _____

2. In your opinion, is the applicant's character: Acceptable Not acceptable (please elaborate below)

B. YOUR PROFESSIONAL KNOWLEDGE OF THE APPLICANT

(Please provide additional comments which may assist the Registration Committee in its decision.)

1. What is or was your professional relationship to the applicant?

Supervisor Client Colleague Other (please describe)

2. have you been professionally associated with the applicant and for what period during this time, has the applicant been engaged in engineering or geoscience?

3. In your opinion, are the applicant's English language skills related to the provision of engineering or geoscience services at a level sufficient to protect the interest of the public in British Columbia?

Speaking	<input type="checkbox"/> Excellent	<input type="checkbox"/> Satisfactory	<input type="checkbox"/> Unsatisfactory
Writing	<input type="checkbox"/> Excellent	<input type="checkbox"/> Satisfactory	<input type="checkbox"/> Unsatisfactory
Listening	<input type="checkbox"/> Excellent	<input type="checkbox"/> Satisfactory	<input type="checkbox"/> Unsatisfactory
Reading	<input type="checkbox"/> Excellent	<input type="checkbox"/> Satisfactory	<input type="checkbox"/> Unsatisfactory

Comments

4. In your opinion does the applicant

- apply engineering/geoscience principles in a knowledgeable and accurate manner? Yes No

- possess sound professional judgment? Yes No

- have the ability to recognize and work within his/her limitations? Yes No

- adhere to APEGBC's Code of Ethics? Yes No

C. YOUR ASSESSMENT OF THE APPLICANT'S EXPERIENCE

1. The purpose of the limited licence review process is to ascertain whether or not the applicant is ready to accept full professional responsibility for work performed and understands his/her limitations. Satisfactory experience involves the application of engineering or geoscience principles and theory, showing progression by evidence of increasing complexity and responsibility. It is requested that you review the enclosed summary of experience provided by the applicant and comment on its validity. Also, please emphasize any areas in which you judge the applicant to have gained outstanding experience. (Attach extra pages if necessary.) Please specify types of experience gained by the applicant **relevant to the requested scope of licence**, and which you can confirm.

2. You are asked to judge how much of the applicant's experience with which you are specifically familiar was:

Type of Experience	Duration (Number of years/months)	Dates	
		From (Month/Year)	To (Month/Year)
At a Non Technical Level			
Training/Familiarization			
At a Engineering/Geoscience Level			
At a Professional Level and Under Direct Supervision of a P.Eng/P.Geo			

3. In your judgment, is the applicant qualified by experience to practice at a **professional level within the scope of licensure requested**? If your answer is YES please be certain that the applicant can accept full professional responsibility including judging accurately when he/she is out of his/her depth.

Yes No (Please elaborate below)

D. ADDITIONAL INFORMATION

1. If you have any additional information which will assist in our evaluation, please provide it below:

2. If, for any reason, you believe that granting of Limited Licensure to the applicant should be withheld at this time, please comment below:

Signature		Date	
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Please return this form, with a copy of the applicant's work experience summary, to:
 APEGBC, 200-4010 Regent Street, Burnaby BC V5C 6N2, Canada
 or Fax to 604-430-8085

Forms can also be emailed to register@apeg.bc.ca
 THANK YOU FOR TAKING THE TIME TO PROVIDE THIS REFERENCE.