Engineers and Geoscientists BC 200-4010 Regent Street Burnaby BC V5C 6N2 www.egbc.ca register@egbc.ca (tel.) 604.430.8035 (fax) 604.430.8085



REFERENCE FORM FOR LIMITED LICENCE (Engineering Licensee/Eng.L. and Geoscience Licensee/Geo.L.)

PLEASE TYPE OR PRINT CLEARLY.

Prior to completing this form electron	ically, please download the file to your ov	wn computer.
Referee Name:	Applicant [Full Legal] Name:	
Referee Address:	Applicant Email:	Applicant ID Number:
	Scope of Limited Licence:	1
Granting of professional membership or licensur this applicant as a Referee to verify his or her e include any information, positive and negative, that	experience. Please consider your asses	sment very carefully and
In order to act as a Referee, you;		

must have first-hand knowledge of the applicant's work

For more information, feel free to access our brief <u>Referee Tutorial</u>.

REFEREE INFORMATION

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

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

For how many years have you known the applicant: Personally: From (please provide dates) to Professionally: From (please provide dates) to Good character connotes moral and ethical strength and includes integrity, candour, honesty and trustworthiness. Good character is generally held to comprise three elements: The ability to tell the difference between right and wrong; The courage to do what's right, no matter the personal consequences; and The ability to assess these issues, within the context of the practice of the profession, in the best interests of the public as a whole. In your opinion, is the applicant's character: ☐ Acceptable ☐ Not acceptable (please elaborate below) YOUR PROFESSIONAL KNOWLEDGE OF THE APPLICANT В. (Please provide additional comments which may assist the Registration Committee in its decision.) 1. What is or was your professional relationship to the applicant? (Please provide dates.) ☐ Supervisor ☐ Client ☐ Colleague ☐ Other (*please describe*) Have you been professionally associated with the applicant and for what period during this time has the applicant been engaged in engineering or geoscience? ☐ Not able to answer ☐ Yes ☐ No

YOUR PERSONAL KNOWLEDGE OF THE APPLICANT

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Have you reviewe	□ No	☐ Not able to	angwar
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			s related to the provision of engineering or geos public in British Columbia?
Speaking	☐ Excellent	☐ Satisfactory	Unsatisfactory
Writing	☐ Excellent	☐ Satisfactory	Unsatisfactory
Listening	☐ Excellent	☐ Satisfactory	□Unsatisfactory
Listening Reading	☐ Excellent	☐ Satisfactory	☐Unsatisfactory ☐Unsatisfactory
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Dates From (Month/Year) To (Month/Year)
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AD	DITIONAL INFOR	MATION		
1.	If you have any add	ditional information	n which will assist in our evaluation, please provide it below:	
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Please return this form and a copy of the applicant's work experience summary to Engineers and Geoscientists BC. Forms and work experience summaries can be returned by email, mail, or fax.

Email: register@egbc.ca

Mail: 200-4010 Regent Street, Burnaby BC V5C 6N2, Canada

Fax: 604-430-8085

Thank you for taking the time to complete this reference form. Your assistance is critical to the registration process and is greatly appreciated.