Engineers and Geoscientists British Columbia
200 - 4010 Regent St., Burnaby, BC, Canada V5C 6N2
Phone: (604) 412-4856 Fax: (604) 430-8085;
Email: register@egbc.ca Website: www.egbc.ca

CONFIRMATION REQUEST FORM

FOR APPLICANT ONLY:

NOTE TO APPLICANTS: ***Please ask all other regulators in which you are or have been a member to complete this form.***

APPLICANT'S NAME: _____ **DATE OF BIRTH:** _____

ASSOCIATION/ORDRE: _____ **REGISTRATION NUMBER:** _____

BY THE ASSOCIATION/ORDRE ONLY:
The above applicant for registration has stated that he/she is/was a member of your Association/Ordre. 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.

Jason Ong, Director – Registration & Licensing

Do you have on file for this applicant: either proof of: ☐ Canadian Citizenship/Birth in Canada or ☐ proof of Permanent Resident Status in Canada? ☐ No record on file
Name on proof of citizenship/permanent residency document ☐ Same as above or ☐ Other (please provide in the space below)
_____

Date of Enrolment as an EIT/GIT: _____

P.Eng ☐.Ing☐.P.Geo☐.P.Geol☐.P.Geoph☐ P.E ☐ EIT ☐ GIT ☐ Other_____ ☐ in good standing? : Yes ☐ No ☐

Passed Professional Practice Examination? Yes ☐ No ☐ Date Passed (yy/mm/dd) _____

Passed the Fundamentals of Engineering Examination (U.S.)? Yes ☐ No ☐ Date Passed (yy/mm/dd) _____

Date registration granted: _____under ___ years of experience requirement and **evaluated under** _____ discipline. This applicant was given credit ___ months of experience upon registration.

Date to which fee paid :_____

Membership Status: Practicing ☐ Non-Practicing ☐

Has this member ever ☐ resigned ☐ been removed?

Date of Resignation/Removal: _____

Date of Reinstatement: _____

Has this member ever been subjected to any disciplinary action? (if yes attach details) 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