



Engineers PEI is the business name of The Association of Professional Engineers of the Province of Prince Edward Island

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www.EngineersPEI.com

For office use:

APPLICATION FOR REGISTRATION TRANSFER

Instruction: This form will become the Association's basic source of information. It is essential that all parts of it be completed carefully in type or legible printing. Forward the completed form to the above address.

A. [] Dr. [] Mr. [] Mrs. [] Ms. [] Other
Last Name First Name Middle Name

Transferring from: _____

I have forwarded my current Association the Transfer Form in duplicate. [] Yes [] No
Membership No. Are current year's dues paid? [] Yes [] No
[] Canadian Citizen [] Landed Immigrant Date of Birth: _____

B. Residence Address: _____
City: _____ Prov. _____ Postal Code: _____
Home Tel _____
Home Email: _____
Employer Name: _____
Employer Address: _____
City: _____ Prov. _____ Postal Code: _____
Work Tel _____ Cell No. _____
Work Email: _____
Present Position: _____

C. I qualify in the discipline of: (Check one only – based on education degree received)
[] Civil [] Chemical [] Industrial [] Agricultural/Biological
[] Electrical [] Geological [] Metallurgical [] Computer
[] Mechanical [] Mining [] Aerospace [] Other _____

Dues and Fees Enclosed:

Table with 7 columns: Amount, Operator, Description, Operator, Amount, Operator, Total. Values: \$50.00, +, \$360.00, +, \$30.00, =, \$440.00. Labels: Transfer Fee, Membership Dues, Engineering Stamp, Total.

Engineering Stamp:

Please print your name as you wish it on your stamp: _____

D. Post- Secondary Education

Table with 5 columns: University, Location, Applied Science Degree (s), Discipline, Graduation Date

E. Other Education Qualification

F. Engineering Experience (Years, Months)

Company Name	Position	Duration

References: List of names and addresses of three people (**preferably Professional Engineers**) who will answer enquiries as to character and engineering experience.

A)	Name			
	Address			
	Telephone:		Email	
B)	Name			
	Address			
	Telephone:		Email	
C)	Name			
	Address			
	Telephone:		Email	

I declare the statements made on this form to be true and correct to the best of my knowledge and belief. I have read and understand and agree to be governed by the Act, By-Laws and Code of Ethics of the Association of Professional Engineers of the Province of Prince Edward Island. I agree that the Association that I am transferring from may release my files to Engineers PEI.

I will immediately advise the regulatory bodies in all jurisdictions in which I practice of any disciplinary action taken against me by a regulatory body or any conviction against me for a regulatory or criminal offence

Signature

Date

****Please submit a copy of your government issued photo identification with your application.**

For more information, refer to our website: <http://www.engineerspei.com>

FOR OFFICE USE:	File No.	Date Received
RECOMMENDED APPROVAL:	Yes <input type="checkbox"/> No <input type="checkbox"/>	Date Application Complete
Executive Director's Approval:	Date:	
Council's Endorsement:		