



# APEGGA

The Association of  
Professional Engineers, Geologists  
and Geophysicists of Alberta

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1-800-661-7020

## APPLICATION TO WRITE THE NATIONAL PROFESSIONAL PRACTICE EXAMINATION

**Please Print Clearly:**

Name in Full	APEGGA OFFICE USE ONLY									
Mailing Address	Pseudonym Number									
	Member Number									
E-Mail Address	Amount									
Business Telephone	Home Telephone	Receipt Number								
I wish to write the Professional Practice Examination in: <table style="display: inline-table; vertical-align: top; margin-right: 20px;"> <tr><td><input type="checkbox"/> Calgary</td></tr> <tr><td><input type="checkbox"/> Edmonton</td></tr> <tr><td><input type="checkbox"/> Fort McMurray</td></tr> <tr><td><input type="checkbox"/> Grande Prairie</td></tr> </table> <table style="display: inline-table; vertical-align: top;"> <tr><td><input type="checkbox"/> Lethbridge</td></tr> <tr><td><input type="checkbox"/> Medicine Hat</td></tr> <tr><td><input type="checkbox"/> Red Deer</td></tr> </table>		<input type="checkbox"/> Calgary	<input type="checkbox"/> Edmonton	<input type="checkbox"/> Fort McMurray	<input type="checkbox"/> Grande Prairie	<input type="checkbox"/> Lethbridge	<input type="checkbox"/> Medicine Hat	<input type="checkbox"/> Red Deer	<input type="checkbox"/> Engineer <input type="checkbox"/> Geologist <input type="checkbox"/> Geophysicist <input type="checkbox"/> M.I.T. <input type="checkbox"/> Prof. Member Appl. <input type="checkbox"/> R.P.T. (Eng) Appl.	
<input type="checkbox"/> Calgary										
<input type="checkbox"/> Edmonton										
<input type="checkbox"/> Fort McMurray										
<input type="checkbox"/> Grande Prairie										
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<input type="checkbox"/> Medicine Hat										
<input type="checkbox"/> Red Deer										
<input type="checkbox"/> _____ other, subject to approval. For additional instructions contact <b>Jocelan Tanner, Examinations Coordinator at 1-800-661-7020</b> <b>or e-mail: jtanner@apegga.org</b> prior to the Deadline Date.		Mark								
on: <table style="width: 100%; border: none;"> <tr> <td style="width: 50%;"><input type="checkbox"/> July 21, 2003</td> <td style="width: 50%;">(Deadline Date – June 3, 2003)</td> </tr> <tr> <td><input type="checkbox"/> October 20, 2003</td> <td>(Deadline Date – September 1, 2003)</td> </tr> <tr> <td><input type="checkbox"/> January 19, 2004</td> <td>(Deadline Date – December 1, 2003)</td> </tr> <tr> <td><input type="checkbox"/> April 19, 2004</td> <td>(Deadline Date – February 27, 2004)</td> </tr> </table>			<input type="checkbox"/> July 21, 2003	(Deadline Date – June 3, 2003)	<input type="checkbox"/> October 20, 2003	(Deadline Date – September 1, 2003)	<input type="checkbox"/> January 19, 2004	(Deadline Date – December 1, 2003)	<input type="checkbox"/> April 19, 2004	(Deadline Date – February 27, 2004)
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Enclosed is my cheque for \$ 100.00 (G.S.T. exempt) made payable to APEGGA <b>or</b> <input type="checkbox"/> Visa <input type="checkbox"/> Master Card <input type="checkbox"/> AMEX # _____ <div style="text-align: right;">Expiry Date: _____</div> Additional \$50.00 "USA Writing Fee" is required ( <i>Payable in Canadian Funds</i> ).										
Date: _____ Signature: _____										
<b>Note:</b> Applications will not be accepted after the Deadline Date. Candidates who <i>request a deferral to the next exam session after the Deadline Date,</i> <i>cancel after the Deadline Date, fail to write the exam, or do not pass the</i> <i>exam</i> will not have their fees refunded, nor will a credit be carried to the next exam session.										