

STUDENT MEMBERSHIP APPLICATION FORM

1.	Personal information						
Name:							
	Legal Last Name	Legal First l	Name	Middle Name			
Preferred Name:			Salutation (optional):				
Date of Birth:		(YYYY/MM/DD)	(YYYY/MM/DD) Gender (self-identify):				
2.	Mailing Address						
Mailing	g address:						
City: Pro		rovince:		Postal Code:			
Country:		Pho	Phone Number:				
Email Address:							
3.	Post-secondary Institution where Currently Enrolled						
Univer	sity/College Name:						
Program:							
Expected degree/diploma:							
Expect	ted Graduation Date:		(YYYY/MM/DD)				
4.	Prior post-secondary Ed	ucation					
Please list all prior degrees & diplomas (attach a separate sheet if additional space is required)							
1.	Institution Na	me		Province/State, Country			
2.	Degree/Diploma Received			Graduation Month/Year			
	Institution Name			Province/State, Country			
3.	Degree/Diploma Received			Graduation Month/Year			
	Institution Name			Province/State, Country			
	Degree/Diploma F	Received		Graduation Month/Year			

4. Certification

I recognize that under the *Professional Foresters Act 2000* a person commits an offence if they apply for membership by a false or fraudulent representation. I certify that the information provided in this form and in any documents attached is correct, complete and provides full disclosure.

Signature of Applicant: Date:

NOTE: A signed and dated copy of this form must be sent by email, fax or mail to the OPFA office.

Privacy Statement

The Freedom of Information and Protection of Privacy Act does not allow the OPFA to release a member's home address without their consent. The OPFA publishes an online membership directory for its members (www.opfa.ca). Members must sign into the Members Only side of the website to access the membership directory that contains the addresses of members where OPFA correspondence is sent (see Sections 2 & 3 above). The Member List that is accessible to the public does not contain addresses or contact information for our members. NOTE: The OPFA's mailing list is not released to advertisers or any other outside parties.

Note: The information in this form is collected by the OPFA under the authority of the *Professional Foresters Act 2000* and will be used to the corresponding application for membership.

Completed forms are to be emailed to opfa@opfa.ca or sent by regular mail to the Ontario Professional Foresters Association, PO Box 30038, Georgetown RPO Mountainview, Ontario, L7G 6J8.

Questions? Please contact the Registration Coordinator by phone: (905) 877-3679 or by email at: registration.coordinator@opfa.ca.

Information on how Student Members can continue with the registration process to become a Registered Professional Forester (R.P.F.) or an Associate Registered Professional Forester (Associate R.P.F.) can be found here, or by contacting the OPFA Registration Manager at registration.manager@opfa.ca

Applicants are also required to complete and submit the Declaration of Good Character which is found on the following 2 pages.



DECLARATION OF GOOD CHARACTER BY APPLICANT FOR LICENSING

All applicants must complete this declaration. Please note that failure to disclose information or providing false information on this declaration may result in an application being denied.

1.	Have you ever been charged with, found guilty of, or been convicted of a criminal offence? Yes No If yes, provide details:
2.	Are you currently the subject of any criminal proceedings? Yes No If yes, provide details:
3.	Has any action ever been entered against you involving fraud? Yes No If yes, provide details:
4.	Are there any outstanding civil actions against you? Yes No If yes, provide details:
5.	Are you currently under investigation or the subject of proceedings by any regulatory authority? Yes No If yes, provide details:

6.	Have you ever been suspended, disqualified, revoked, or otherwise disciplined as a member of any regulated profession? Yes No If yes, provide details:
7.	Have you ever been denied a licence or registration, or had any licence or registration revoked for failure to meet good character requirements? Yes No If yes, provide details:
8.	While attending a post-secondary institution, were you found to have engaged in academic dishonesty or misconduct? Yes No If yes, provide details:
9.	Have you ever been refused admission by any regulatory body? Yes No If yes, provide details:
10.	Is there any event, circumstance, or matter not disclosed above with respect to your character, conduct, competence or capacity that might affect your ability to engage in the practice of professional forestry with honest and integrity or in accordance with the law? Yes No If yes, provide details:
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I certify that the information provided on this form is true and accurate, and I will notify the Registrar within 30 days of any changes in my responses to the above questions.				
Name:	Date:			
Signature				
The Declaration of Good Character must be submitted along with the application form.				
If additional space is required to answer any of the questions:				