

The Regulator of Professional Foresters in Ontario

APPLICATION FOR

RE-ADMISSION

1. Personal Information						
Ame:IIII						
referred name:						
Date of Birth (YYYY/MM/DD):/ Gender (optional):						
PFA Member #:						
Home Address Send correspondence to: Home Business						
Address:						
Unit/Apt #:City: Province:						
ostal Code: Country: Phone Number:						
well Address.						
mail Address:						
Business Address (* mandatory section if employed)						
Business Address (* mandatory section if employed) Im (pick one): Self-employed Not Currently Employed						
Business Address (* mandatory section if employed)						
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Business Address (* mandatory section if employed) Im (pick one):						

4. 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 at 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 correspondence is sent; see Sections 2 & 3 above. The Member Directory that is accessible to the public does not contain the addresses or contact information of members.

NOTE: The OPFA's mailing list is not released to advertisers or other outside parties.

5. Memberships				
Are you a member of another technical society or professional organization?				
If yes, please specify:				
6. Declaration				
□ I have completed a Personal Practice Focus and a Learning Plan and have retained them in my files.				
□ I will only practise in those professional forestry fields where training and ability make me professionally competent.				
□ I am familiar with <u>The Professional Foresters Act, 2000</u> , the current OPFA <u>Bylaws</u> , OPFA <u>Practice</u> <u>Guidance</u> and the <u>Ontario Regulation 145/01: Professional Foresters Association</u>				
7. Certification				
I recognize that under the <i>Professional Foresters Act, 2000</i> 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 any documents attached is correct, complete and provides full disclosure. I also certify that, if granted membership, I agree to abide by the terms of the <i>Professional Foresters Act, 2000</i> and the association's Bylaw including the Code of Ethics and the Professional Standards of Practice.				
Signature of Applicant: Date:				

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

Completed forms are to be emailed to <u>registration.coordinator@opfa.ca</u> or mailed to the Ontario Professional Foresters Association, PO Box 30038 Georgetown RPO Mountainview, ON L7G 6J8.

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



DECLARATION OF GOOD CHARACTER BY APPLICANT FOR LICENSING

All applicants must complete this declaration. Please note that failure to disclose information or provide 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 relating to professional negligence or malpractice? Yes No If yes, provide details:

5.	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:	

your charact ability to eng	event, circumstance, or matte ter, conduct, competence or ca gage in the practice of profession accordance with the law?	
If yes, provid	e details:	
11. Are you a C Canada? Yes If no, provic	O _{No}	wfully permitted to work or study in
-	•	n is true and accurate, and I will notify responses to the above questions.
Nam <u>e:</u>		Date:
Signature:		

The Declaration of Good Character must be submitted along with the application form. Additional pages may be attached if additional space is required.