

**Request to Change Member Status from
RPP or Candidate Non-Practicing to
RPP or Candidate Practicing**

First Name: _____ Last Name: _____

Home Address: _____

(City, Province, Postal Code)

Phone / Email: _____
(Home Phone) (Cell) (Home Email)

Employer Name: _____ Position: _____

Employer Address: _____

(City, Province, Postal Code)

Employer Phone / Email: _____
(Employment Phone) (Employment Email)

Preferred mailing address

☐

home

☐

employment

Preferred email address

☐

home

☐

employment

Current Non-Practicing Member Class with APPI: ☐ Registered (RPP) ☐ Candidate

I, _____ (print name), hereby declare that I am/have returned to the practice of professional planning under the Professional Planner Regulation of Alberta.

Date Submitted: _____

Signature of Applicant: _____

Personal and commercial information is collected under the authority of the Personal Information Protection Act of Alberta (PIPA). The use of personal and commercial information is limited to administration of applications, program and event registrations and membership management.

Please email this completed form to the APPI Office: office@albertaplanners.com

Form Updated: October 2026