

APPI Subscriber Application Form

Name: _____

Home Address: _____
(Street)

(City, Province, Postal Code)

(Phone) (Cell)

(Home email)

Employer Name: _____ Position: _____

Employer _____

Address: _____
(Street)

(City, Province, Postal Code)

(Employment Phone) (Employment email)

Preferred mailing address

home employment

Preferred email address

home employment

Specify your post secondary academic credentials

Program/Degree _____ Institution _____ Year Conferred _____

Are you currently employed in planning? If yes, state the firm and how long?

Is it your intent to pursue a career in planning and apply for Candidate membership in the Institute when you become eligible to do so? _____

I certify that I have read the information on this application form and that the information provided is true and correct.

Signature of Applicant

Date

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. If, for any reason you do not want your information visible to other APPI members, please state what that information is:

Fees: Written confirmation of your acceptance, along with an invoice for the annual APPI Subscriber Fee and CIP Pre-Candidate Fee (if applicable), will be sent to you. To review the applicable rates for the current year, please visit <https://www.albertaplanners.com/membership/member-information>. Member fees are payable upon receipt of the invoice and prior to formal admission. Include your resume or CV with this application.

Application Submission: Please submit this form along with your resume or CV to APPI Office via fax, email or mail as per below:

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