

Return to Active Practice Reference Form

Note: This form is for former members and licensees of Engineers Geoscientists Manitoba who are currently seeking reinstatement of their professional registration (Reinstatement Applicants), and current members in the on leave category of membership wishing to reinstate to active practice.

Date Submitted: _____ Professional Reference For: _____

Referee Profile:

1. Referee Name: _____
2. Professional Status: _____
3. Jurisdiction(s) of your registration(s): _____
4. Area of expertise: _____
5. Knowledge of the applicant's work experience at: _____
6. Working relationship to the applicant: _____
7. Known the applicant since: _____
8. Familiar with the applicant until: _____
9. Please state your opinion of the applicant's technical competence (i.e. knowledge of codes, standards, regulations, etc. and ability to apply engineering or geoscientific principles):

10. Please state your opinion of the ability to assume responsibility:

11. Please state your opinion of the applicant's character (maturity, integrity, etc.):

12. In your opinion, is this applicant ready for independent practice as a professional engineer/
geoscientist?

13. Please state any additional information which would be relevant to the Association in processing the application:

If you require additional space, please attach additional pages.

Printed Name: _____

Signature: _____ **Date:** ____ / ____ / ____
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