

Reinstatement Policy

(Registrants are cancelled April 1):

Registrants who are cancelled:

1. Within One Year of Cancellation (April 1 to December 31)

- a. On or after April 1 (or nearest working day), registrants who resigned or have been cancelled (including expired registration) in the current year and have not paid their annual dues and related late fees must apply for reinstatement and pay the current reinstatement fee.
 - i. T.T. registrants who are approved for reinstatement:
 - will be assessed the reinstatement fee
 - the T.T. Join Date will remain unaffected
 - ii. The annual dues are waived the year in which the registrant is reinstated.
 - iii. After April 1 (or nearest working day), T.T. registrants who are cancelled in the current year for non-payment of dues will not be able to complete a Registration Status Change form.
 - T.T. registrants who would like to complete a Registration Status Change form must do so prior to cancellation.

2. After One Year and Within Four Years of Cancellation

- a. On or after January 1 of the following year (or nearest working day), registrants who resigned or have been cancelled (including expired registrations) in the previous year and have not paid their annual dues and related late fees must apply for reinstatement, and pay the current reinstatement fee.
 - i. Registrants who are approved for reinstatement:
 - will be assessed the reinstatement fee
 - the Join Date will be updated to reflect the reinstatement date
 - ii. The annual dues are waived the year in which the registrant is reinstated.
 - iii. T.T. registrants are not eligible to re-apply if they have held a T.T. registration within the last 4 years.

3. After Four Years of Cancellation

- a. Registrants applying for reinstatement after a four-year period will be required to reapply and resubmit all required documentation.

Personal Information

Name:

ASET No.:

Former name:

Preferred name:

Gender: Male Female Prefer not to say

Date of birth (MM/DD/YYYY):

Home address

Apt./Suite/Unit:

Street address:

City/Town:

Prov./Terr.:

Postal code:

Email:

Phone:

Work address

Employer:

Apt./Suite/Unit:

Street address:

City/Town:

Prov./Terr.:

Postal code:

Email:

Phone:

Please forward all **email** correspondence to : Home address Work address

Please forward all **physical** correspondence to : Home address Work address

Reinstatement information

I am applying for reinstatement as a T.T. (please select **one**):

- Within one year** of cancellation for non-payment of dues
- After one year and within four years** of cancellation

Please note: former registrants applying for reinstatement **after four years of cancellation are required to reapply** for this designation.

Payment of reinstatement fee

Please refer to the ASET website (www.aset.ab.ca) for current information on application fees and registration dues.

- Cheque/money order enclosed (make payable to ASET)
- Direct deposit through financial institution (please contact ASET staff prior to payment)
- Credit card (please fill bellow)

Visa MasterCard AMEX

Name on card:

Credit card number:

Exp. (MM/YY):

ASET Privacy statement / consent

ASET maintains address information of all members to keep them informed on pertinent issues, to prepare annual invoices, and to verify membership to outside organizations or individuals. ASET ensures that his information is secure and that the privacy of members is respected. On occasion, membership mailing information is made available to suppliers of ASET member benefit programs of other organizations to provide members with information pertinent to their careers. These one-time use agreements are strictly limited by contract for specific, ASET-approved promotions. Member email addresses are never provided to outside organizations or individuals.

If you wish to be excluded from such mailings, please contact ASET or check the box below.

- Please remove my name from all lists provided to outside organizations for the purpose of marketing ASET member benefit programs or other professional development information.

Declaration

"I certify that the information provided on this form is complete, true, and accurate to the best of my knowledge and that all documentation included in support for my application is authentic. I reaffirm that I will abide by the Engineering and Geoscience Professions Act, ASET Regulation, and ASET Code of Ethics."

Signature:

Date:

INSTRUCTIONS: Email the completed form to registration@aset.ab.ca for processing.