



REGISTERED LANDSCAPE ARCHITECT Membership Application

A **Registered Landscape Architect** is a person admitted into Membership of the Society in accordance with the requirements of the Bylaws and the Act, including qualification by education, examination and experience, payment of fees and annual fees when due, and compliance with the requirements of professional conduct and standards. A complete copy of the Bylaws and the Act are available at www.bcsla.org.

Application Procedures:

- 1) Please review this material carefully. BCSLA membership application deadlines are on **January 31** and **June 30** of each year. The Credentials Committee reviews all applications and makes their recommendations to the Board of Directors who have the final approval. If required the Credentials Committee may meet more frequently to review applications.
- 2) Complete the application in full. Incomplete applications will delay application processing.
- 3) Required documentation. Proof of academic qualifications:
 - a) Academic transcript (original **or** certified copy sent directly to BCSLA from the learning institution). The transcript will confirm successful completion of a Bachelor or Masters program in Landscape Architecture at an accredited university, **and**
 - b) Academic degree, certificate or diploma (copy)

Application information for internationally trained professionals is available at www.bcsla.org

- 4) Two letters of reference from business or professional individuals who are personally acquainted with your character and professional abilities. One must be a Landscape Architect with whom you have worked.
- 5) Submit completed application form and all documentation either electronically at www.bcsla.org, by email to admin@bcsla.org or by regular mail to the BCSLA office.
- 6) Candidates who are accepted for membership will be notified in writing by the Society upon approval by the Board of Directors. Successful applicants will be invited to appear before the Board of Examiners, which is the final step in the Admission Program. Additional information on the oral exams is available at www.bcsla.org.
- 7) The Board of Examiners administers the oral exams twice annually in Vancouver, Canada. The Registrar will inform the Candidate of the results by telephone within one business day, and formally in writing shortly thereafter.
- 8) If the Candidate is unsuccessful, the Society will provide a detailed letter to the Candidate indicating weakness(es) to assist the Candidate in further developing those skills. The Candidate will be invited to appear at a future administration of the oral exams.
- 9) Upon successful completion of the oral exams, the Candidate will be admitted to the BCSLA as a Registered Member. The Candidate will be issued a registration number, professional stamp and certificate.



Please affix a recent full-face photograph here

APPLICATION FOR REGISTERED MEMBERSHIP

(please print clearly in black ink)

NAME: _____

RESIDENTIAL ADDRESS: _____

CITY: _____ PROV: _____ POSTAL CODE: _____

List current employer information below.

EMPLOYER NAME: _____

EMPLOYER ADDRESS: _____

CITY: _____ PROV: _____ POSTAL CODE: _____

TEL: (____) _____ FAX: (____) _____

EMAIL: _____ WEBSITE: _____

Address for Correspondence: Residence or Business

I hereby apply, by the method indicated below, for Membership and Registration into the British Columbia Society of Landscape Architects and submit the following information:

By Written Pre-Examination (LARE) and Oral Examination: I have met the minimum qualification for Membership as substantiated by the enclosed experience record.

By Reciprocal Registration: I am a Registered Member of a Landscape Architect Regulatory Agency.

Province or State: _____ Written Examination: _____

Registration Number: _____ Registration Date: _____

Registration Now in Force: Yes No

If not, provide reason: _____

Senior Practitioner: I have 10 (ten) or more years of sustained experience and membership in a Professional Landscape Architect Regulatory Agency.

Province or State: _____

Registration Number: _____ Registration Date: _____

Registration Now in Force: Yes No (provide reason) _____



Suite 110 - 355 Burrard Street
Vancouver, British Columbia V6C 2G8
T 604.682.5610 F 604.681.3394
E admin@bcsla.org www.bcsla.org

PART A. Education (original or certified copy sent directly to BCSLA from the learning institution)

INSTITUTION DEGREE/DIPLOMA RECEIVED: _____ YEAR: _____

INSTITUTION DEGREE/DIPLOMA RECEIVED: _____ YEAR: _____

INSTITUTION DEGREE/DIPLOMA RECEIVED: _____ YEAR: _____

Bachelor of Landscape Architecture Degree from a CSLA or ASLA Accredited Program or

Master of Landscape Architecture Degree from a CSLA or ASLA Accredited Program

Please contact the BCSLA office if you have a diploma/degree that is not from a CSLA or ASLA Accredited Program

PART B. References (attach letters of recommendation from each of these two references)

Name two individuals (may be Landscape Architects, Business or Professional persons), who are personally acquainted with your character and professional abilities, giving complete addresses, phone/fax numbers and email addresses. One reference must be a registered Landscape Architect you have worked with, or worked for, who is personally acquainted with your professional abilities.

NAME: _____

ADDRESS: _____

CITY: _____ PROV: _____ POSTAL CODE: _____

TEL: (_____) _____ FAX: (_____) _____ EMAIL: _____

COMMENTS: _____

Registered Landscape Architect in the Province/State of: _____

NAME: _____

ADDRESS: _____

CITY: _____ PROV: _____ POSTAL CODE: _____

TEL: (_____) _____ FAX: (_____) _____ EMAIL: _____

COMMENTS: _____



PART C. PRACTICAL EXPERIENCE

Note: All employment related to Landscape Architecture should be listed. Use an additional page if required. Please start with your most recent experience.

Employer Name and Address: _____

Contact: _____

Telephone: _____

Hours per Week: _____

Dates of Employment: _____

WORK PERFORMED

Client Liaison _____

Design _____

Construction Documentation _____

Specification Writing _____

Field Services _____

Other (Please explain) _____

Stamped by Employer

Employer Name and Address: _____

Contact: _____

Telephone: _____

Hours per Week: _____

Dates of Employment: _____

WORK PERFORMED

Client Liaison _____

Design _____

Construction Documentation _____

Specification Writing _____

Field Services _____

Other (Please explain) _____

Stamped by Employer

Employer Name and Address: _____

Contact: _____

Telephone: _____

Hours per Week: _____

Dates of Employment: _____

WORK PERFORMED

Client Liaison _____

Design _____

Construction Documentation _____

Specification Writing _____

Field Services _____

Other (Please explain) _____

Stamped by Employer

Employer Name and Address: _____

Contact: _____

Telephone: _____

Hours per Week: _____

Dates of Employment: _____

WORK PERFORMED

Client Liaison _____

Design _____

Construction Documentation _____

Specification Writing _____

Field Services _____

Other (Please explain) _____

Stamped by Employer



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PART D. Professional Organization Service (i.e. BCSLA)

Name and Address of Organization _____

PART E. Public and Community Service

Name and Address of Organization _____

PART F. Registration

Have you been denied registration in any province or state? YES NO

If yes, please explain: _____

PART G. Reasons for Membership Application



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Statement of Candidate

I have read the BCSLA Standards of the Profession (www.bcsla.org/profession.htm) and hereby affirm that my method of practice of Landscape Architecture is in accordance with the principles contained in these statements. I further certify that all information given on this application form is true, correct and complete; and that I am aware that, upon acceptance to membership, false statements on this application may lead to immediate expulsion. A Member approved for Landscape Architect status will not represent himself or herself as a Registered Landscape Architect. A Landscape Architect will not use a stamp or seal of the Profession.

If I should be elected to the Society and subsequently withdraw, resign, be expelled from the Society or be dropped for non-payment of dues, I will immediately thereupon return any certificate and seal of the Society issued to me.

- I wish to apply for Registered Landscape Architect Membership. I have read and understand the BCSLA Ten Principles of Privacy Protection Policy. Dues will be pro-rated upon acceptance. A schedule of dues is available at www.bcsla.org.

Signature of Applicant

Date: yy / mm / dd

Information that you have provided above will be used to update the BCSLA websites and in other publications upon acceptance of the application. If you do not wish to be listed please contact our offices.

BCSLA Registered Landscape Architect Membership Application Checklist

- BCSLA Application Form completed in full
- Resume in chronological order starting with most recent employer
- Original transcripts sent directly to BCSLA by the educational institution
- Reference letter from a Registered Landscape Architect
- Reference letter from a Business Professional
- Current photo (passport photo, digital image, etc.)
- Cheque payable to "**BCSLA**" for \$33.60 Processing Fee (\$30 + \$3.60 HST)

NOTE: Applications for Registered Membership will only be reviewed if the application is **complete** and all of the above information is submitted. Annual member dues will be prorated upon acceptance of your application. Please visit www.bcsla.org for fee schedule. Please submit completed application using the online option or by regular mail to:

ATTN: Registrar
BC Society of Landscape Architects
#110, 355 Burrard Street
Vancouver, BC V6C 2G8
For further information contact BCSLA:
Tel: (604) 682-5610
Fax: (604) 681-3394
Email: admin@bcsla.org
Website: www.bcsla.org