



INTERN Membership Application

An Intern is an associate who has been accepted by the Board into the admission program for Membership in the Society, and on such acceptance the applicant is entitled to use the designation "BCSLA Intern". A complete copy of the Bylaws is available at www.bcsla.org.

APPLICATION PROCEDURES:

- 1) Please review this material carefully. BCSLA Membership application deadlines are **January 31st** and **June 30th** of each year. The Credentials Committee reviews all applications and makes their recommendations to the Board of Directors for 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 record 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) Attach a current resume in chronological order starting with your most recent employer.
- 5) Provide a **letter** from your qualified mentor confirming they have agreed to serve as your mentor. According to 2008 BCSLA Bylaw 3.86 (p):

"Qualified Mentor" means a Registered Landscape Architect, Landscape Architect, or other allied professional with experience, qualifications and knowledge in the area they are mentoring. [Amended: May 3, 2008]

- 6) Submit your completed application form and all required documentation electronically at www.bcsla.org, by email to admin@bcsla.org or by regular mail to the BCSLA office.
- 7) Candidates who are not accepted for membership will be advised in writing of reasons for deferment and the next step in the Admission Process.
- 8) Candidates who are accepted for membership will be notified in writing and will be advised to begin the Admission Program.

To safeguard and protect any personal information provided to us, the BCSLA/BCSLA adheres to 'Ten Principles of Privacy Protection' which addresses the requirements for handling "personal information" as defined in both the federal 'Personal Information Protection and Electronic Documents Act', and the 'BC Personal Information Protection Act'. Visit www.bcsla.org for a complete copy of the Policy. Your application will be processed upon receipt of your signature on the application form.



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

APPLICATION FOR INTERN MEMBERSHIP

(please print clearly in black ink)

NAME: _____

RESIDENTIAL ADDRESS: _____

CITY: _____ PROV: _____ POSTAL CODE: _____

EMPLOYER NAME: _____

EMPLOYER ADDRESS: _____

CITY: _____ PROV: _____ POSTAL CODE: _____

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

Address for Correspondence: Residence or Business

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

INSTITUTION DEGREE/DIPLOMA RECEIVED: _____ YEAR: _____

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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. Qualified Mentor *(attach confirmation letter)*

Identify your qualified mentor supplying complete mailing address, phone/fax numbers and email address.

NAME: _____

PROFESSIONAL REGULATORY BOARD: _____ MEMBER #: _____

BUSINESS NAME: _____

ADDRESS: _____

CITY: _____ PROV: _____ POSTAL CODE: _____

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



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PART C. Practical Experience

Note: All employment related to Landscape Architecture should be listed. Use an additional page if required.

Name and Address of Employer: _____

Telephone: _____
Hours per Week: _____
Dates of Employment: _____
Contact: _____

WORK PERFORMED

Client Liaison _____
Design _____
Construction Documentation _____
Specification Writing _____
Field Services _____
Other (Please explain) _____

Stamped by Employer

Name and Address of Employer: _____

Telephone: _____
Hours per Week: _____
Dates of Employment: _____
Contact: _____

WORK PERFORMED

Client Liaison _____
Design _____
Construction Documentation _____
Specification Writing _____
Field Services _____
Other (Please explain) _____

Stamped by Employer

Name and Address of Employer: _____

Telephone: _____
Hours per Week: _____
Dates of Employment: _____
Contact: _____

WORK PERFORMED

Client Liaison _____
Design _____
Construction Documentation _____
Specification Writing _____
Field Services _____
Other (Please explain) _____

Stamped by Employer

Name and Address of Employer: _____

Telephone: _____
Hours per Week: _____
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Contact: _____

WORK PERFORMED

Client Liaison _____
Design _____
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Specification Writing _____
Field Services _____
Other (Please explain) _____

Stamped by Employer



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PART D. Volunteer or Community Service

Name and Address of Organization: _____

Activities: _____

PART E. Reasons for Membership Application

I wish to apply for BCSLA Intern 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.

INTERN MEMBERSHIP APPLICATION CHECK LIST

- BCSLA Application Form completed in full
- Resume in chronological order starting with most recent employer
- Original transcripts sent directly to BCSLA by educational institution
- Confirmation Letter from Qualified Mentor. Please include name of regulatory body **and** membership number.

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