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BCSLA ADVISORY DESIGN PANEL APPLICATION FORM

Please refer to the BCSLA ADP Guidelines at <u>http://www.bcsla.org/profession/policies-and-procedures</u> before applying.

Name:		Date:
Firm:		
Position in Firm:	BCSLA Registration #:	
Address:		
City:	_ Province:	Postal Code:
Telephone:	Fax:	
Email:		
Are you currently serving on a Design Panel?	🗌 No	
	🗌 Yes. Jurisdicti	on:
	Term Ending:	
Order of preference of Advisory Design Panel pos	itions:	
1.		
2.		
3		

Attach Resume and include: education, work experience, relevant projects, professional and community affiliations, current/past ADP appointments.

Note: As Advisory Design Panel appointments become available, the BCSLA will forward the names of Members in Good Standing to fill vacant positions. All ADP appointments must be assigned through the BCSLA and its Advisory Design Panel Sub-Committee to ensure that an equal opportunity is afforded to all members.

DO NOT APPLY DIRECTLY TO THE LOCAL GOVERNMENT. Please submit completed application form and current resume to the BCSLA office by email to admin@bcsla.org or by fax to (604) 681-3394, along with a copy to Al Tanzer, BCSLA Advisory Design Panel Sub-Committee Chair by email to landspace@telus.net or by fax to (604) 252-9554.