

Application for Online Examinations Regular ACLS Candidates

CONTACT INFORMATION

		(First Name & Initials)
	Prov/Terr:	Postal Code
()	Email:	
	(Family Name)	(Family Name) Prov/Terr: Email:

PROFESSIONAL EXAMINATIONS

Subject

P1 -	Acts and Re	gulations Re	elating to	Surveys of	Canada	Lands	
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P2 - Property Rights Systems on Canada Lands (P2 - A and P2 - B)..... \Box

P3 - Government Structures and Aboriginal Government Issues......

I UNDERSTAND THAT AFTER ACCEPTING MY APPLICATION YOU WILL SEND ME A USERNAME AND PASSWORD TO ACCESS THE EXAMINATION I HAVE CHOSEN AND I WILL THEN HAVE THIRTY DAYS WITHIN WHICH TO WRITE THE EXAMINATION.

DATE THAT I PREFER TO RECEIVE MY USERNAME AND PASSWORD

THE EXAMINATION WILL BE INVIGILATED BY THE FOLLOWING PERSON:

NAME _____

ADDRESS _____

TEL. #s _____

THE EXAMINATION WILL BE WRITTEN AT THE FOLLOWING LOCATION:

EMAIL

NAME OF ORGANIZATION _____

ADDRESS _____

Note: Examination fees are \$175.00 per examination.

Payment must be sent with registration form. Payment may be made by cheque or money order or by Visa or MasterCard. A \$30 penalty will be charged for a bounced cheque or declined credit card.

Payment by Credit Card:

Card No.	Exp.	
3-Digit Code (back of card): Signature of card holder:		
Name of Card Holder:		

Are you using credit(s) from the previous exam cycle? If yes, how many credits are you applying?

Email to: admin@acls-aatc.ca