

Canadian Hydrographer Certification Scheme (CHCS)

Application for Certification with CHCS via AHSCP - Form

This form is for a person with CPHS 1 or CPHS 2 status to request certification from the Canadian Hydrographer Certification Scheme (CHCS) via the Mutual Recognition Agreement (MRA) with the Australasian Hydrographic Surveyors Certification Panel (AHSCP) to obtain Certified Hydrographer (CH) or Certified Hydrographic Technician (CHTech) status

AHSCP Certification Numb applicable)	er: Status:	: CPHS 1 or CPHS 2 (d	cross out which is not	
Surname:	Given	Names:		
Preferred Name:		Date of Birth:		
Address:				
City or Town:	Prov.	/ Terr. / State:		
Postal or Zip Code:	Country:	Tel:	Ext.:	
Email:				
I am applying for certification force at the time of this applic on the International Board of Strecognized AHSCP Scheme for Certified Hydrograph Certified Hydrograph	ation with the Associatestandards of Competen for one of the following wher (CH)	tion of Canada Lands Sur ice for Hydrographers and :	rveyors (ACLS), based	
I have / do not have (cross certification. I have / have no certification. I acknowledge the previously been rejected for certification.	t (cross out which is no nat if I have a current	ot applicable) previously application in progress v	applied to the CHCP for with the CHCP, or have	
 I acknowledge I have to provie A certified copy of applicantificate. A copy of applicant's resur A one-page description of applicantification 	icant's AHSCP Hydro ne.	ographic Surveying Cer	tificate of Competence	
Applicant's Signature		 Date		

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Instructions: Once the applicant has filled in the necessary information, please send a scanned copy of page 1 and 2 to the ACLS Registrar at registrar@acls-aatc.ca.

ACLS Fee Payment Details

Along with your submission of this application, you should pan o surcharge to pay by Credit Card.	ay the ACLS assessment fee. There is
Please indicate your method of credit card payment.	
☐ MasterCard ☐ Visa	
Card Number	_Expiry Date
Name on Card	
Card Holder's Signature	
Amount CAD \$	
Receipt Please check this box if you would like an emailed receipt.	
Please note that once the applicant's payment details information will not be kept on file and this page will be s	

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Instructions – Once the applicant has filled in the boxes with *Italic* font for the Declaration of Applicant and the Certificate of Conduct forms below, and signed the Release of Documents Declaration on the next page, a scanned copy of the pages 3 and 4 should then be emailed to the AHSCP Secretariat at ahscp@hydro.gov.au. The AHSCP Secretariat will complete the Certificate of Conduct. The AHSCP Secretariat will then email the completed pages directly to the ACLS Registrar.

Declaration of Applicant

Certification Panel	Australasian Hydrographic Surveyors Certification Panel					
Applying to Certification Panel	Canadian Hydrographer Certification Panel					
Applicant's Full Name						
Certificate Number		Date of Issu	ıance			
Current Status or Standing decl	ared by the applican	t:				
Are there any pending, ongoing or outstanding complaints, legal proceedings, insurance claims or						
disciplinary proceedings that relate to your competence or conduct? (If yes, please explain.)						
Does the applicant have any restrictions or conditions of practice imposed on them? (If yes, please						
	CHOIS OF CONGRESS OF	practice impo	JSEU OII L	nem? (ii yes, piease		
explain.)						
Signature of Applicant			Date			
Certificate of Conduct						
Certification Panel	Australasian Hydrographic Surveyors Certification Panel					
Applying to Certification Panel	Canadian Hydrographer Certification Panel					
Applicant's Full Name						
Certificate Number		Date of Issu	ıance			
Current Status or Standing						
Are there any pending, ongoing o	r outstanding complain	nts or discipl	inary pro	ceedings that relate		
to the competence or conduct of the applicant?						
Does the applicant have any restrictions or conditions of practice imposed on them?						
Name	Jasbir Randhawa					
Title	AHSCP Secretariat					
Signature of AHSCP Secretariat			Date			

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Authorization to Release Applicant's Submission Documents to the AHSCP and Subsequent AHSCP Assessment to the CHCP

To allow your application to proceed all of the documents AHSCP application process will be provided to the CHCF application to proceed. By your signature below, you authoroward to the ACLS Registrar any or all of those docume	P. This page has to be signed to allow your orize the AHSCP Secretariat to release and
Applicant's Signature	Date

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