

LICENCE REACTIVATION APPLICATION

NOTE: Use this form **ONLY** if you were a **professional member**, a **licensee**, or a **professional licensee** **AND** if your licence cancellation has not exceeded 90 days at the date submitting this form.

If it is **over 90 days (3 mo.)**, but not exceeding **seven (7) years** since your APEGA licence lapsed, you must apply through the reinstatement of licensure application.

Licence reactivation applications are subject to a **one-time, non-refundable** application fee. The application will not be processed until the application fee has been paid. Please carefully read the fee payment information provided at the end of this form.

I wish to apply for a licence reactivation as a: _____ in Engineering
 Geoscience

1. LICENCE REACTIVATION ACKNOWLEDGEMENT STATEMENT

I _____ acknowledge that my licence **was cancelled within** 90 days, and I meet the additional criteria:

- My licence was cancelled due to missed payment of the annual membership dues, voluntary resignation, or failure to complete the annual declaration, and
- I was compliant in reporting my Continuing Professional Development (CPD) hours up to the date of cancellation.
- I have not previously reactivated my licence.

I request to have my licence reactivated and agree to pay the associated administration fee upon receiving the invoice for payment. I also agree to pay any outstanding professional dues attached to my record once reactivated.

To access history of reported CPD hours and to verify date of registration cancellation, log into the [myAPEGA](#) portal. For more information, please visit the [Practice Standards, Bulletins, and Guidelines](#) webpage to read CPD practice standard.

If your application does not meet the criteria noted above, you must apply for licensure through the reinstatement application process.

2. PERSONAL INFORMATION

APEGA ID (If known) _____

Legal Name
Last Name _____ First and Middle Names (NO initials) _____

Preferred Name
Last Name _____ First and Middle Names (NO initials) _____

Home Contact Information
Street _____

City _____ Province _____ Postal Code _____

Telephone _____ Fax _____ Email (Is this your primary email?) _____

3. DECLARATION

I declare that all the above statements are complete and correct to the best of my knowledge. I agree to file additional information if the response to any question changes between now and the date of my registration. I understand that a false statement or misrepresentation may disqualify me for registration.

I give APEGA permission to collect any information from other organizations that may be required for my application.

If granted an APEGA licence, I will follow the requirements of the *Engineering and Geoscience Professions Act* of Alberta, the *General Regulation* including the *Code of Ethics*, and the bylaws of APEGA.

I declare that I do not have any alcohol or drug dependency or suffer from any medical condition that renders me incapable of fulfilling the requirements of a professional member, licensee, or professional licensee.

Date: _____

Signature: _____

If APEGA approves your application for reactivation you will be reinstated back to the same status at the time of cancellation.

To submit the completed application form, click on the link, [Licensure Administration Upload | APEGA](#) and follow the instructions. This document must be submitted in PDF format.

Information on Fee Payments and myAPEGA account

You must pay a **one-time, non-refundable** reactivation fee. The fee must be paid before the application can be processed.

The reactivation fee is **not** your annual membership dues. **You will receive a separate invoice(s) for all outstanding membership dues** once your licence is reactivated.

Fee payments are to be made online by logging onto your myAPEGA account, using your credit card or Visa debit. An invoice for the reactivation fee will be issued to your myAPEGA account **within 5 to 7 business days**. To review the invoice and pay the fee, click on the “*Finance Centre*” pull-down tab at the menu bar and select “*Invoices*”. The name of the invoice will be, “*Missed Dues Payment – Licence Reactivation*”.

Confirm your contact information in myAPEGA is accurate to ensure you receive all communications from APEGA.