

**SUMMARY OF INFORMATION FOR  
APPLICATION FOR REDUCTION IN TERM OF ARTICLES**

Name: \_\_\_\_\_ Date of Application: \_\_\_\_\_

Firm: \_\_\_\_\_ Articling Surveyor: \_\_\_\_\_

Commencement Date of Articles: \_\_\_\_\_ Monitor: \_\_\_\_\_

**YOUR EXPERIENCE**

Please complete the following summary table, listing your experience gained prior to your proposed articles:

Type of Professional Surveying Experience	Days of Experience				Details Place(s) of Employment, Level of Responsibility, Supervisor, Date(s) (Include Resume, Job Descriptions)
	Management & Admin	Party Chief	Non-Party Chief	Total	
Cadastral					
Engineering		N/A	N/A		
Construction		N/A	N/A		
Geodetic		N/A	N/A		
GIS		N/A	N/A		
Post Graduate Studies					
Other (specify)					
1.					
2.					
Totals					

**APPLICATION FOR REDUCTION IN TERM OF ARTICLES**

**REDUCTION REQUESTED (Student to complete COLUMN 2 ONLY)**

	(1) Required (Days)	(2) Requested Reduction (Days)	(3) AERC Reviewer's Proposed Reduction	(4) AERC's Approved Reduction
<b>1. Practical Cadastral Experience</b>				
a) Party Chief	≥150			
b) Non-Party Chief	75			
TOTAL OF 1a) and b)	>225			
<b>2. Management and Administration of Professional Surveying</b>	≥113			

**Applications will not be considered if the requested days are more than 113 days.**

**Application Prepared By:**

**Reduction application reviewed by:**

\_\_\_\_\_  
Student

\_\_\_\_\_  
AERC Member

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Signature

**Confirmed by:**

**Acknowledged by:**

\_\_\_\_\_  
\*Supervising Professional for Experience

\_\_\_\_\_  
Articling Surveyor

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Signature

\* This confirmation is required from the Professional who supervised the experience set out in this application, if different from the Articling Surveyor.