



Academic Evaluation Application Form

Association of Ontario Land Surveyors

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Please print clearly and attach any documentation as required.

PERSONAL INFORMATION:

COUNTRY OF BIRTH : _____

MOTHER TONGUE: _____

Surname: _____

Date of Birth (mm/dd/yy) : _____

Given Name(s): _____

Sex: M F

CONTACT INFORMATION:

Preferred Contact Address : Home Work

RESIDENTIAL ADDRESS INFORMATION :

Address: _____

City/ Town: _____

Province: _____

Postal Code: _____

Res. Tel: _____

Res. Fax: _____

Personal Cell: _____

Personal E-mail: _____

EMPLOYMENT ADDRESS INFORMATION :

Employer Name: _____

Position Held: _____

Address: _____

City/ Town: _____

Province: _____

Postal Code: _____

Work Tel: _____

Work Fax: _____

Work Cell: _____

Work E-mail: _____

A COVER LETTER

B DETAILED RESUME

C EDUCATION or CERTIFICATION— AT LEAST ONE OF THE FOLLOWING MUST BE PROVIDED

*Note : An official transcript must be forwarded **directly** from the education institution (If this is not possible you may submit your original documents to the AOLS office to be copied) **along with detailed course descriptions**. All documentation must be in English or translated to English.*

1. University Degree

Degree : _____

Name of Institution: _____ Country : _____

Date of Graduation: (dd/mm/yy) _____

2. Technological Degree or Diploma in Engineering or Geomatics 2YR 3YR

Degree or Diploma: _____

Name of Institution: _____ Country: _____

Date of Completion of Degree: (dd/mm/yy) _____

3. Professional Survey Commission in another recognized jurisdiction

Commission: _____

Name of Group: _____

Date of Commission: (dd/mm/yy) _____ Commission Number: _____

PAYMENT INFORMATION

Evaluation Fee: \$339.00 (\$300+ HST)	Date Payment Received : (dd/mm/yy): _____
Cheque : <input type="checkbox"/>	Cash : <input type="checkbox"/>
Credit Card Information	Visa <input type="checkbox"/> MasterCard <input type="checkbox"/>
Card # : _____	Expiry Date : (mm / yy) _____ / _____
CVV: _____	Name on Card : _____
Assessment obtained date: (dd/mm/yy) _____	CES <input type="checkbox"/> OR WES <input type="checkbox"/>
Notes:	
OFFICE USE ONLY:	

****Note: A convenience fee of 3% of the total amount will be charged for credit card payments.**