

ABC FP OFFICE USE ONLY Received: \_\_\_\_\_  
 Request Complete: \_\_\_\_\_  
 Date Change of Status Approved: \_\_\_\_\_



# Request for Change of Status

In British Columbia, the [Foresters Act](#) restricts the practice of professional forestry to members of the Association of BC Forest Professionals. Requests for a change of status may, or may not receive approval by council. For enrolled members, please read the relevant sections of the [Enrolled Members Change of Status Procedures](#) pertaining to your membership category. For registered, associate members or holders of a limited license, refer to the [Members Change of Status Procedures](#) to ensure you are eligible to request a change of status. Completed forms, accompanying documentation and the appropriate fee (if required) should be sent to the association office (see page 6). Pages 1 and 2 must be completed for all requests, for other sections please refer to the header.

**Personal Information** (required)

<b>Last Name</b>	<b>First Name</b>	<b>Member #</b>

Preferred First Name \_\_\_\_\_ Salutation:  Mr.  Ms.  Mrs.  Dr.

**Current Membership Category** (check all that apply)

- |   |  |
|---|--|
| <input type="checkbox"/> Accredited Timber Cruiser (ATC)      | <input type="checkbox"/> Registered Professional Forester (RPF)              |
| <input type="checkbox"/> Accredited Timber Evaluator (ATE)    | <input type="checkbox"/> Retired Registered Forest Technologist (RFT(Ret))   |
| <input type="checkbox"/> Associate Member (AM)                | <input type="checkbox"/> Retired Registered Professional Forester (RPF(Ret)) |
| <input type="checkbox"/> Forester in Training (FIT)           | <input type="checkbox"/> Silviculture Accredited Surveyor (SAS)              |
| <input type="checkbox"/> Limited Licence Holder               | <input type="checkbox"/> Trainee Natural Resource Professional (TNRP)        |
| <input type="checkbox"/> Natural Resource Professional (NRP)  | <input type="checkbox"/> Trainee Forest Technologist (TFT)                   |
| <input type="checkbox"/> Registered Forest Technologist (RFT) |  |

**Status Change Requested** (check one)

- |  |   |
|--|---|
| <input type="checkbox"/> Leave of Absence (expires annually on November 30 <sup>th</sup> ) | <input type="checkbox"/> Retired Membership |
| <input type="checkbox"/> Resignation   | <input type="checkbox"/> Life Membership    |

Send Correspondence to:  Business  Home

**Home Address** (required)

<b>Street Address</b>		<b>Mailing Address (if different)</b>	
<b>City</b>	<b>Province</b>	<b>Postal Code</b>	
<b>Home Phone</b>	<b>Mobile</b>		
<b>Home Email</b>			

**Business Address** (required)

**Currently Unemployed**

Job Title

Organization Name

Street Address

Mailing Address (if different)

City

Province

Postal Code

Work Phone

Extension

Fax

Work Mobile

Business Email

### All: Communications Preference

It is important to keep your contact information up-to-date during your membership, including your communication preferences. ABCFP communications are conducted primarily by email; notifications will be sent to your preferred email address.

Preferred Email:  Business  Residence  
Preferred Mail:  Business  Residence  
Magazine (BCFP):  Business  Residence  Do not Send  
E-newsletter:  Business  Residence  Do not Send

### Privacy Statement

The ABCFP publishes an online membership directory for its members ([abcfp.ca/web](http://abcfp.ca/web)). The *Freedom of Information and Protection of Privacy Act* does not allow the ABCFP to release a member's home address without consent. See ABCFP's [Privacy Policy](#) for details.

**NOTE:** the ABCFP's mailing list is not released to advertisers or any other outside parties.

I authorize the ABCFP to publish the following address in the membership directory:

Business Address  Both Addresses  
 Home Address  Neither Address

The information in this form is collected by the ABCFP under the authority of the [Foresters Act](#) and will be used to assess your request for change of status. Should you have any questions, please contact the Manager of Registration by mail (see page 6), by phone at 604.687.8027 or by email at [admissions@abcfp.ca](mailto:admissions@abcfp.ca).

### All: Reason(s) you are Requesting a Change of Status

If you are applying for a Leave of Absence or Resignation you must state why. If you are applying for Retired Membership or Life Membership, you must state how and why you meet the criteria outlined in the [Members Change of Status Procedures](#) and include your last date of work if you are still employed. Attach a separate sheet, if additional space is required. If you are applying for Life Membership, you must also submit a resume outlining your forestry career.

**All: Practice Description** (This section does not apply to enrolled members or to those who are not currently employed in BC.)

The ABCFP is required by the [Foresters Act](#) to ensure that each person engaged in the practice of professional forestry is accountable to the association.

If you are employed in British Columbia in any capacity, whether in forestry or not, the onus is on you to demonstrate that you are not engaging in the practice of professional forestry as defined in the [Foresters Act](#).

You must submit the following as evidence that you are no longer engaging in the practice of professional forestry:

- a) a current, accurate and detailed description of the task(s) you are performing (i.e. a current job description is adequate provided it identifies the tasks that you are hired to do or are responsible for completion);
- b) your written rationale as to why the tasks described in a) do not include the practice of professional forestry; and
- c) your completed Professional Practice Questionnaire (see page 5 form and instructions).

**LOA and RESIGNATION: Sponsoring Forester**

Yes

No

**IMPORTANT:** Members who are granted a leave of absence or resign from the association are not eligible to remain a sponsor. Retired and Life Members may remain sponsors.

You must advise the enrolled member(s) whom you are mentoring that you are no longer eligible to be a sponsor, and that they should therefore seek a new Sponsor immediately and notify the association of the change. If they do not obtain a new sponsor, they will not receive credit for their work experience. Change of Sponsor forms are available at [abcfp.ca/web](http://abcfp.ca/web).

Please include the name(s) of the enrolled member(s) you are sponsoring:

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I confirm that I have notified these enrolled members that I am no longer qualified to be their Sponsoring Forester.  Yes

**Resignation: Surrender Certificate and Stamp/Seals**

If you are a registered member (RFT or RPF), an associate member (ATC, ATE, NRP, SAS) or a limited licensee who wishes to resign from the association, you MUST surrender your certificate of registration, seal and stamp to the registrar and director of act compliance.

**Enrolled members:** If you are an enrolled member who wishes to resign from the association, please note that should you choose to reinstate your membership at a future date, you will lose two months of your work experience credit for each month, or portion thereof, you are not a member.

**All: Non-Practice Declaration**

I certify that the information provided in this form and in any documents attached is correct, complete and provides full disclosure.

I have read the definition of the practice of professional forestry as defined in the [Foresters Act](#). I certify that I am not currently engaged in the practice of professional forestry within the province of British Columbia. If my application is approved, I will not engage in the practice of professional forestry within the province of British Columbia while not an active member of the ABCFP.

I further certify that should I wish to once again engage in the practice of professional forestry within the province of British Columbia, I will not do so without first reinstating my membership status to that of an active member of the ABCFP.

Finally, I confirm that I understand that engaging independently in the practice of professional forestry within the province of British Columbia while not an active member of the ABCFP constitutes a contravention under the [Foresters Act](#).

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Date (mm/dd/yyyy)

Signature of Applicant

## LOA or Retirement: Fees

If you are applying for a Leave of Absence or Retired Membership, you must submit the applicable payment with this application.

Please refer to the [current fee schedule](#) for a complete list of fees available on our website.

Applications received or completed between December 2<sup>nd</sup> and January 31<sup>st</sup> are also required to include the administrative fee on late membership renewal. Dishonoured payments will be subject to a NSF fee.

**Fee(s):** \$ \_\_\_\_\_ including GST

**Fee Payment Options:**  Cheque or money order  Charge my credit card for the full amount

**Credit Card Information:**  Visa  MasterCard

\_\_\_\_\_  
Credit Card Number

\_\_\_\_\_  
Expiry Date

\_\_\_\_\_  
Name on Card

\_\_\_\_\_  
Signature of Cardholder

# Professional Practice Questionnaire

The practice of professional forestry, as defined in the *Foresters Act*, means, for fees or other remuneration, advising on, performing or directing works, services or undertakings which, because of their scope and implications respecting forests, forestlands, forest resources and forest ecosystems, require the specialized education, knowledge, training and experience of a registered member, an enrolled member or a special permit holder (and includes the areas listed under section 4).

Please answer all the questions below with respect to your work situation. If you answer “yes” in boxes 1, 2 and 3, and “yes” in any of the boxes 4a to 4f below, then you are engaging in the practice of professional forestry and are required to complete the Self-Assessment Evaluation Form, Professional Development Plan and submit a Self-Assessment Declaration as part of your annual membership renewal. If you answer “yes” to some but not all of sections 1 to 4 below you may be practising professional forestry. Please contact the ABCFP director of professional practice and forest stewardship for assistance.

If any of your tasks are the practice of professional forestry (no matter what percentage of your job activities), they must be undertaken, or personally supervised, by an applicable ABCFP member.

1. Do you, for fees or other remuneration, provide advice, perform or direct works, services or undertakings as part of your employment responsibilities?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
2. Do your works, services or undertakings have a scope and implication respecting any of: forests, forest lands, forest resources and forest ecosystems?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
3. Does the advice, performance or direction you provide require the specialized knowledge, training and experience of a registered member, an enrolled member or a special permit holder? (this would include an expectation by your employer that your works, services or undertakings will be supported by your professional background)	<input type="checkbox"/> Yes	<input type="checkbox"/> No
4. Do any of your works, services or undertakings include any of the following types of activities in identified in 4a to 4f (answering “yes” to any sub-section means a “yes” for section 4)?  <b>NOTE:</b> Sub-sections 4a to 4f are not an all-inclusive list. Other related activities may also be the practice of professional forestry.	<input type="checkbox"/> Yes	<input type="checkbox"/> No
4. a) Planning, advising on, directing, approving methods for, supervising, engaging in and reporting on the inventory, classification, valuation, appraisal, conservation, protection, management, enhancement, harvesting, silviculture and rehabilitation of forests, forest lands, forest resources and/or forest ecosystems?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
4. b) The preparation, review, amendment and/or approval of professional documents?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
4. c) Assessing the impact of professional forestry activities to: <ul style="list-style-type: none"> <li>• verify that those activities have been carried out as planned, directed or advised;</li> <li>• confirm that the goals, objectives or commitments that relate to those activities have been met; or</li> <li>• advise or direct corrective action as required to conserve, protect, manage, rehabilitate or enhance the forest, forest lands, forest resources or forest ecosystems.</li> </ul>	<input type="checkbox"/> Yes	<input type="checkbox"/> No
4. d) Auditing, examining and verifying the results of activities involving the practice of professional forestry, and/or the attainment of goals and objectives identified in or under professional documents?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
4. e) Planning, locating and approving forest transportation systems including forest roads?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
4. f) Assessing, estimating and analyzing the capability of forest lands to yield a flow of timber while recognizing public values related to forest, forest lands, forest resources and forest ecosystems?	<input type="checkbox"/> Yes	<input type="checkbox"/> No

This Professional Practice Questionnaire is intended to assist you, the member, to be duly diligent in recognizing the practice of professional forestry, and to assist the ABCFP to ensure that each person engaged in the practice of professional forestry is accountable to the association.

The ABCFP Professional Practice Committee (PPC) is charged with addressing issues that relate to the professional practice of registered members and the practice of professional forestry. This function includes the assessment and determination of whether the activities of individual ABCFP members, or specific tasks conducted by non-members, include the practice of professional forestry.

## Return Completed Form and any Other Necessary Documentation

### by Mail, Fax, or Email (PDF) to:

Registration Department  
Association of BC Forest Professionals  
602-1281 West Georgia St  
Vancouver, BC V6E 3J7

**Fax:** 604.687.3264  
**Email:** [admissions@abcfp.ca](mailto:admissions@abcfp.ca)

**DO NOT SUBMIT FORMS SEPARATELY**

### Incomplete Applications

**Incomplete applications will not be processed.** Please read the instructions carefully. Your application must include the completed and signed form, any required fee(s), and/or supporting documentation. Applications completed or received between December 2 and January 31 must include an administrative fee on late membership renewal. An application is considered incomplete if there is any missing information and/or if the required fees are not submitted with your application.

### Complete Applications

Complete applications will be forwarded to the board of examiners or the professional practice committee for consideration. Requests determined not to include the practice of professional forestry in BC as defined by the [Foresters Act](#) will be forwarded to council for final approval. **Note:** fee(s) are processed only after council approval.