



MEMBERSHIP/ CERTIFICATION APPLICATION

The Certified Technicians
and Technologists
Association of Manitoba Inc. (CTTAM)

602 - 1661 Portage Avenue
Winnipeg, Manitoba R3J 3T7
Phone: 784-1088 Fax: 784-1084

For CERTIFICATION in the Engineering Technology discipline indicated:

CTTAM File No. _____

CIVIL

ELECTRICAL

ELECTRONIC

MECHANICAL

OTHER (specify) _____

PLEASE PRINT

Mr.
Mrs.
Miss
Ms.

Name: _____
Last Name First Name Birth Date (month/day/year)

Home Address (including postal code) _____

Home Email Address _____ Home Phone Number _____

Employer Information (only complete this boxed section if applicable)

Employer Name _____

Employer Address _____

Employer Phone Number _____

Employer Email Address _____

Citizenship: Canadian Permanent Resident Other, please specify: _____

APPLICANT'S AGREEMENT: I hereby acknowledge that:

1. The information contained on this form is true and correct, to the best of my knowledge.
2. The Certification Board reserves the right to certify as they find me qualified, and in no way does this application represent a request for a specific classification. Also, the Certificate is the property of CTTAM and shall be returned to the Association if my membership ceases for any reason.
3. The Association has the right to publish my name and classification.
4. I will abide by the Code of Ethics of this Association, if accepted into membership.

Date: _____ Regular Signature: _____

PLEASE ENSURE THAT YOU HAVE ENCLOSED THE FOLLOWING with the Application Form:

- Original transcripts/diplomas/notarized translations
- Photocopies of all academic documents
- Resume
- Application Fee - \$140.00 (includes Professional Practice Exam (PPE) Study Guide fee)

If possible, submit your application in person to the CTTAM office. Original documents will be immediately returned and applicants will receive the PPE Study Guide.