



# CTTAM

The Certified Technicians and Technologists Association of Manitoba  
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## REQUEST FOR (RECLASSIFICATION) MEMBERSHIP From Student Member or New Graduate to Associate

Indicate Engineering Technology discipline:

CTTAM File No. \_\_\_\_\_

CIVIL

ELECTRICAL

ELECTRONIC

MECHANICAL

OTHER (specify) \_\_\_\_\_

**PLEASE PRINT**

Name: Mr.  
Mrs.  
Miss  
Ms.

\_\_\_\_\_  
Surname Given Names Birth Date:

Residence: \_\_\_\_\_  
Street City Province Postal Code

Telephone (Residence) \_\_\_\_\_ E-mail: \_\_\_\_\_

Company Name: \_\_\_\_\_

Business Address: \_\_\_\_\_  
Street City Province Postal Code

Telephone: (Business) \_\_\_\_\_ E-mail: \_\_\_\_\_

Preferred mailing address: Residence Business Preferred e-mail address: Residence Business

### **ACADEMIC QUALIFICATIONS**

- An ORIGINAL transcript of your marks with photocopies plus a COPY of your diploma must be included with this application. If you bring your application to the CTTAM office, originals can be returned immediately.

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- You will receive a letter confirming the completion of the reclassification process after the next scheduled Board of Directors meeting.
- Associates pay annual dues of \$110.
- When you have attained two years of technical work experience you may apply for certification. Co-op work experience can contribute a maximum of six months to the total work experience requirement. To apply for certification you would complete the *Reclassification Form for Certification* and arrange for three Professional References who will be contacted by the CTTAM office to complete Professional Reference Questionnaires.
- The successful completion of the Professional Practice Exam is a requirement for certification. The PPE exam fee is \$25 and the study guide is available at the CTTAM office. It is advisable to complete the exam prior to applying for reclassification.

Date: \_\_\_\_\_ Signature: \_\_\_\_\_