

APPROVED PROFESSIONAL EXAMINATION APPLICATION

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Supervisor Reference Form

CSAP Applicant:

Please select 3 Supervisors from your Presentation of Experience to act specifically as References for you. Please supply each of the selected References with a reference form and the portion(s) of your work experience summary that you are asking each Supervisor to validate. Ask each Supervisor acting as a Reference to complete the form and return it directly to the Society. They will need to sign the relevant portion(s) of your work experience details send a copy to us and the original to you. Reference forms returned care of the applicant or without the relevant portion(s) of your work experience details attached will not be accepted.

Note: Your application requires only 3 project experience summaries to be accompanied by a full reference from the Supervisor. Additional experience summaries require only a signature from the Project Supervisor to acknowledge that they are substantiating the experience information provided.

For Completion by the Applicant:

Applicant Name: _____

Reference Name: _____

Reference Telephone: _____

Reference E-Mail: _____

Reference Address: _____

Position(s) number(s) Reference is asked to validate: _____

The individual listed above has applied for membership with the Society of Contaminated Sites Approved Professionals (CSAP Society). CSAPs are authorized to make a submission, including advice and recommendations, to the Director of Waste Management respecting:

- (i) A determination that a site is a contaminated site,
- (ii) A contaminated soil relocation agreement,
- (iii) An approval in principle,
- (iv) A certificate of compliance, or
- (v) Other matters specified by the Rules of the Society.

The applicant has asked you to provide a reference to be considered by the Society when it reviews the candidate's application for membership. Because a large portion of the Society's evaluation process is based upon peer evaluation of the candidate, it is essential that you provide considered and candid responses to each of the questions below. These questions concern the professional capabilities and character of the candidate. Please answer all questions to the best of your direct knowledge only.

If, for any reason, you feel that you cannot provide a completed reference form for this applicant, please return the form to the Society with an explanation of why you are unable to complete the form.

Your completed reference form will be handled in accordance with the Freedom of Information and Protection of Privacy Act. Your comments will only be shared with the applicant in accordance with the Act upon his or her request and only if the comments cannot be attributed to you.

Please submit your completed form, with a signed copy of the relevant portion(s) of the candidate's work experience details as provided by the applicant, directly to the CSAP Society. Reference forms returned care of the applicant or without the relevant portion(s) of the applicant's work experience details attached will not be accepted. Please give original of signed relevant portion(s) to the candidate.

Should you have any questions about this form or about the CSAP Society, please do not hesitate in contacting Society staff.

For Completion by the Reference:

1. Are you a member of:

EGBC; Registration number: _____

CAB; Registration number: _____

BCIA; Registration number: _____

ACPBC; Registration number: _____

Other Professional Organization: _____

Registration Number: _____

2. For how long have you known the applicant personally?

From (month/year) _____ To (month/year) _____

3. For how long have you known the applicant professionally?

From (month/year) _____ To (month/year) _____

4. For each of the positions that you are asked to validate, what was your professional relationship to the applicant? (e.g. supervisor, client, colleague)

Position # _____

Relationship _____

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Relationship _____

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Relationship _____

5. Do you know of any reason that the Society should not grant membership to the applicant?

No

Yes; if yes, please provide the reason here:

6. In your opinion, is the attached portion of the applicant's work experience details accurate (e.g. duration of position(s), hours of claimed experience, position role and responsibilities, project descriptions, decision-making role, etc...)?

Yes

No; if no, please provide and comment on the inaccuracies here:

7. Please add any additional comments here:

Reference Signature:

Date: _____