



## ASPB Applicant - College Application Form

Name in Full	_____	Email Address	_____
Home Address	_____	City	_____
Province	_____	Postal Code	_____
Home Phone	_____		
Employer	_____	Employer Address	_____
City	_____	Province	_____
Postal Code	_____	Employer Phone	_____

Application Fee \$175.00

Annual Dues \$360.00 (includes cost of seal)

### Checklist - Have you submitted the following? Omissions will delay your application

#### Professional Biologist Applicants

The College / ASPB Authorization Form - A separate form is available [online](#)

Indictable Offence Declaration - A separate form is available [online](#)

2 cheques or I have included credit card information below



Pay By Credit Card (Visa or Mastercard only)

Card Number and 3 digit CVD number ( on back of card) \_\_\_\_\_

Expiration Date \_\_\_\_\_

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

Signature of Card Holder \_\_\_\_\_

Application Declaration

*I hereby declare that the information provided in this application form is complete and accurate.*

Signed \_\_\_\_\_

Date \_\_\_\_\_

Mail Application and Supporting Documents to:

College of Applied Biology  
#205 – 733 Johnson St.,  
Victoria, B.C. V8W 3C7