



APPLICATION FORM TO BECOME A  
**PRE-CANDIDATE**

**PLANNING INSTITUTE OF BRITISH COLUMBIA**  
1750 - 355 Burrard Street, Vancouver, BC V6C 2G8  
Tel: 604.696.5031 | Fax: 604.696.5032 | Email: [info@pibc.bc.ca](mailto:info@pibc.bc.ca)

Please print or type clearly.

**Contact Information:**

\_\_\_\_\_  
*Last Name* *First Name*

\_\_\_\_\_  
*Street Address*

\_\_\_\_\_  
*City* *Province* *Postal Code*

\_\_\_\_\_  
*Phone (Home)* *Phone (Work)* *Fax*

\_\_\_\_\_  
*E-mail*

**Do you hold a university planning degree from a CIP/PIBC accredited planning school or program?**

Yes  No Please specify: \_\_\_\_\_

**Do you hold another university degree or similar academic credential?**

Yes  No Please specify: \_\_\_\_\_

**Would you like to add CIP Membership as well? (additional annual CIP Fee \$248.74 + GST)**

Yes  No

**Are you currently employed in planning?**

Yes  No If yes, please specify for how long: \_\_\_\_\_ years.

**Is it your declared intention to pursue a career in planning and apply for Candidate membership in the Institute when you become eligible to do so?**

Yes  No If yes, please initial here: \_\_\_\_\_

I certify that I have read, understand & agree to comply with the bylaws of the Institute (available at: [www.pibc.bc.ca](http://www.pibc.bc.ca)), and I further certify that the information and declaration(s) provided on this form and in any attached document is true and correct.

I agree and consent to PIBC sending me via e-mail PIBC's electronic newsletter (PIBC e-News) and annual membership renewal invoices and notices. I understand that I may opt-out of receiving PIBC e-News at any time.

\_\_\_\_\_  
*Signature of Applicant* *Date*

**Enclosures:**

Include a copy of your current resume or CV with this application.

NOTE: Separate membership fees for *new* members become due and payable *prior* to formal admission.

OFFICE USE ONLY:

\_\_\_\_\_  
*Received* *Payment* *Cheque #*