

## **Change of Sponsor**

**Forest Professionals BC** (FPBC) must be notified of any changes to sponsor/trainee relationships. Read the **Articling Procedures** for information on the change-of-sponsor process and requirements. The enrolled member must notify FPBC's registration department of the change by submitting this form. Please ensure this form has been completed by the enrolled member, the new sponsor and the previous sponsor. Email the completed form to the registration department at *admissions@fpbc.ca*.

Part A: Enrolled Registrant Information				
_ast Name	First Name	Designation & Registrant		
Effective Date of Sponsor Change:		_		
Reason(s) for Change:	dd/mm/yy			
f trained or anonger would like to state their	recease in confidence, contact the region	atration department directly		
trainee or sponsor would like to state their admissions@fpbc.ca.	reasons in confidence, contact the regis	stration department directly		
Preferred Contact Information If there have been any changes to your contact informa	Business Home Home ation, please sign-in to www.fpbc.ca to ensure that	at your information and communications preference is up-to-date.		
Employer Name	Job Title			
Street Address	Mailing Add	dress (if different)		
City	Province	Postal Code		
( )		( )		
Telephone	Extension	Fax		
( )				
Cellular	Preferred E-mail			
NOTE: The information in this application is collected the manager of registration at:  Mail: 602-1281 W. Georgia Street, Vancouver, BC, V Phone: 604.331.2329		ional Goverance Act. Should you have any questions, please contact		
Email: admissions@fpbc.ca				

## Part B: New Sponsor Information

•			
Last Name	First Name		Designation & Registrant #
Preferred Contact Information If there have been any changes to your contact information		Home ensure that your information and commu	inications preference is up-to-date.
Employer Name	Jo 	ob Title	
Street Address	Ma	Mailing Address (if different)	
City	Province	Postal Code	
( )		( )	
Telephone	Extension	Fax	
( )			
Cellular	Preferred E-n	nail	
Articling Agreement			
1	42 224 22 442 222		
I,	, agree to act as the spon	sor for	
By affixing our signatures to this agreeme	nt we confirm that:		
1. <b>I</b> ,	, as trainee, assume p	orimary responsibility to ensure t	that I maintain a strong relationship
and frequent contact with my sponsor and	d gain the necessary exposure t	to the practice areas outlined in	the Articling Procedures and to
complete my registration requirements.			
2. 1,			g the growth and development of the
trainee towards registration and the work As the sponsor, I will inform FPBC immed		ir articling period.	
become aware that the trainee may	•	is under the Articlina Procedure	e or
have any concerns about the traine	•	3 under the Articinity i roccuures	5, 01
3. We have read and understood the Articli	ing Procedures.		
4. We agree to be bound by the mutual obl	igations and duties outlined in the	he Articling Procedures.	
Signatures			
			Affix Optional Hare
New Sponsor Signature	Sponso	or Stamp or Seal (Optional)	Affix Stamp 1
Signature of Trainee	Datad	this day of	30 SealO
Part C: Previous Sponsor Information	Dated	ulis uay oi	
Part C: Previous Sponsor Information			
By affixing my signature to this form, I confirm	n that I agree to step down from	my role as sponsor for the train	ee mentioned above.
,		,	
Last Name	First Name		Designation & Registrant #
	I		Optional Here
Date	Signat	ture of Previous Sponsor	Affix Stamp
	. <b>3</b>	•	Seal