

Confidential Work History Reference

An applicant applying for an FPBC Limited Licence has asked that you provide a Confidential Work History Reference. To act as a reference, you must be an FPBC practising registrant (RPF) and have direct knowledge of the applicant's work experience as a supervisor or colleague for the time period specified in the work history detail you are providing.

Once you have completed this form, sign, date, stamp/seal and send directly to the FPBC via email c/o [Registration Department](#). Accordingly, you should inform the applicant that the form has been sent following the instructions in the form to avoid any potential delay in the application process.

Applicant

Last Name

First Name

Reference

Last Name

First Name

Prof. Designation

Registrant #

Job Title

Organization Name

Street Address

Mailing Address (if different)

City

Province

Postal Code

Phone #

Extension

E-mail



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1. I have known the applicant for a period of: _____ (months or years)
2. I have known or been associated with the applicant as their:

☐ Supervisor ☐ Colleague ☐ Other
3. Do you consider the applicant to be suitable for registration as a limited licensee in the practice areas described in the Intended Scope of Practice?

☐ Yes ☐ No ☐ Acceptable with reservations
4. If you answered 'No' or 'Acceptable with reservations' in the previous question, please provide a brief but candid explanation:

Part B: Work History Detail

A detailed account of the applicant's work history should be summarized in the work history detail below. The work history detail section consists of four columns which must include the following information:

1. **Start and end date:** Provide start and end dates for each work history detail provided.
2. **Employer and location(s):** Provide the name of the applicant's employer and the location(s) where specific duties were performed.
3. **Position (job title or project name):** Provide the job title(s) or the name of the project(s) undertaken.
4. **Specific duties performed:** List specific duties the applicant has undertaken in each period.

Start (dd/mm/yy)	End (dd/mm/yy)	Employer & Location(s)	Position (job title/project name)
Specific Duties Performed			



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Part C: Certification

I recognize that under the [Professional Governance Act](#) (PGA) and [FPBC Bylaws](#), a person commits an offence if he/she applies for a Limited Licence using false or fraudulent representation and that a person commits an offence who knowingly assists another person to apply using false or fraudulent representation. I, therefore, certify that the information provided in this form is true to the best of my knowledge and belief.

Date

Signature of Applicant

Affix
Seal Or Stamp Here