

ONTARIO INSTITUTE OF AGROLOGISTS

Ontario AGRICentre
100 Stone Road West, Suite 108, Guelph, ON N1G 5L3
Tel: 519-826-4226 Fax: 519-826-4228
Web: www.oia.on.ca

APPLICATION FORM



Purpose of Application (please tick (✓) one)

- Sign up as a Student Affiliate member
- Sign up as an Accredited member
- Reinstate OIA membership
- Transfer in from another provincial Agrology Institute
- Sign up as a dual province member



SECTION 1: PERSONAL INFORMATION

Title: Mr. Mrs. Ms. Miss

Surname First Name Middle Name

Gender: Male Female

Date of Birth (mm/dd/yyyy): ____ / ____ / ____

SECTION 2: CONTACT INFORMATION

Apt. Number, Street Number, Street Name

City Province / State

Country Postal Code

Home Telephone Work Telephone

Cell Fax

Email

**IF YOU ARE A STUDENT AFFILIATE APPLICANT...
PLEASE SKIP SECTIONS 3 - 5 AND GO TO SECTION 6 DIRECTLY.**

SECTION 3: EDUCATION (List most recent education first.)

Have you obtained any post secondary degrees outside of Canada? Yes No

1	University/College		Location/Country
	Degree/Diploma Obtained	Specialization	Year Obtained
2	University/College		Location/Country
	Degree/Diploma Obtained	Specialization	Year Obtained
3	University/College		Location/Country
	Degree/Diploma Obtained	Specialization	Year Obtained
4	University/College		Location/Country
	Degree/Diploma Obtained	Specialization	Year Obtained

SECTION 4: EMPLOYMENT (List most recent employment first.)

1	Employer's Name	Job Title	Period (from - to)
2	Employer's Name	Job Title	Period (from - to)
3	Employer's Name	Job Title	Period (from - to)
4	Employer's Name	Job Title	Period (from - to)

**IF YOU ARE A REINSTATEMENT/TRANSFER/DUAL MEMBERSHIP APPLICANT...
PLEASE COMPLETE SECTION 5 ACCORDINGLY.**

SECTION 5(a): REINSTATEMENT

What was the last year you were registered with OIA? _____

What was your previous OIA Registrant number? _____
(If earlier than 2005, new number will be created.)

What was your reason for leaving? Explain briefly and attach formal letter.

SECTION 5(b): TRANSFER

From what Province are you transferring? _____

What was your designation in that Province? P.Ag. T.Ag. A.Ag.

Have you ever been registered with OIA in the past? Yes No
If Yes, what was the last year you were registered with OIA? _____
(If earlier than 2005, new number will be created.)

Have you ever had a public complaint or disciplinary action? Yes No
If Yes, explain briefly and attach a formal letter.

SECTION 5(c): DUAL MEMBERSHIP

What provincial Agrology Institute are you currently registered with? _____

What was your designation in that Province? P.Ag. T.Ag. A.Ag.

Have you ever been registered with OIA in the past? Yes No
If Yes, what was the last year you were registered with OIA? _____
(If earlier than 2005, new number will be created.)

Have you ever had a public complaint or disciplinary action? Yes No
If Yes, explain briefly and attach a formal letter.

SECTION 6: ACADEMIC INFORMATION

_____ Name of Institution	
_____ Name of Program	_____ Duration of Program
_____ Current Year of Study	_____ Expected Date of Graduation (MM/YYYY)

Communication Preferences

- I wish to be on the OIA Mailing Lists.
- I wish to be on the OIA Online Directory.
- I wish to release my contact information to Branch Executive for branch purposes.

DECLARATION

I, _____, hereby certify the foregoing information to be true and that I have read the professional designation information and the Code of Ethics of the Ontario Institute of Agrologists, that I assent to them, and that I shall at all times endeavour to abide by them.

_____ Signature of Applicant	_____ Signature of Witness
_____ Date	_____ Date

If approved for membership I would like my name to appear on the Membership Certificate as follows:

Print your name

Professional Fees Schedule (in CDN \$)

FEES	1 st Quarter (Jan – Mar)	2 nd Quarter (Apr – Jun)	3 rd Quarter (Jul – Sept)	4 th Quarter (Oct – Dec)
A.Ag.	\$225.00 + HST	\$168.75 + HST	\$112.50 + HST	\$56.25 + HST
P.Ag./T.Ag.	\$450.00 + HST	\$337.50 + HST	\$225.00 + HST	\$112.50 + HST
Student Affiliate	\$26.55 + HST			

PAYMENT DETAILS

PLEASE NOTE: Application fee is waived for Student Affiliate applicant.

Application Fee: \$ 125.00

HST: \$ 16.25

Total: **\$ 141.25**

Payment Type:

Cheque

Credit Card

- I hereby authorize the OIA to debit the total amount as outlined above to my credit card account. By signing and submitting this authorization, I acknowledge:
- That I confirm all information provided is current and accurate;
 - That it is my responsibility to notify the OIA of any changes in credit card information or termination of this authorization;
 - That there will be a \$25 CDN plus HST assessed to each declined transaction or returned cheque (in the event of returned cheque, only payments by certified cheque or money order will be accepted thereafter); and
 - That **I HAVE READ, UNDERSTAND AND ACCEPT ALL THE TERMS CONTAINED IN THIS FORM.**

If payment is by Credit Card:

VISA

Master Card

Name on Credit Card

Credit Card Number

Expiry Date

Security Code

Signature

Date