

Licensed Professional Planners Association of Nova Scotia

Application for Membership and License



Part 1: Membership Type *(please check appropriate boxes)*

Membership Type		Required Information	
<input type="checkbox"/>	Licensed Member (LPP)	<input type="checkbox"/>	PSB eligibility letter
<input type="checkbox"/>	Candidate Membership	<input type="checkbox"/>	PSB acceptance letter
<input type="checkbox"/>	One-Year Term Membership		

Part 2: Contact Information *(please print)*

Full Name (as you wish to have it appear on your license)			
Current Employer			
Mailing Addresses			
Home:		Work:	
My preferred mailing address is:		Home <input type="checkbox"/>	Work <input type="checkbox"/>
Phone Numbers			
Home		Work	
Cell		Fax	
Email			
<i>By ticking this box <input type="checkbox"/> I am consenting to having my email included in the LPPANS mailing list for member outreach, to be informed of upcoming events, training opportunities and conferences, job postings, and other information relevant to the profession. Our email list is not sold to third parties for advertising.</i>			

Signature: _____

Date: _____

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Part 3: Nova Scotia Fair Registration Practices Act

Each year, LPPANS must provide the Nova Scotia Government with a report summarizing the number of applications received, how long they take to process, where our applicants are applying from, and where our applicants have received their qualifications.

Where did you receive your education that qualified you to become a LPP?	
<input type="checkbox"/>	In Nova Scotia
<input type="checkbox"/>	In another Canadian Province <i>Please list all applicable provinces:</i>
<input type="checkbox"/>	In another country <i>Please list all applicable countries</i>
For License Member applicants only, where did you do a majority of the work experience to meet your PSB requirements while you were a Candidate member?	
<input type="checkbox"/>	In Nova Scotia
<input type="checkbox"/>	In another Canadian Province <i>Please list all applicable provinces:</i>
<input type="checkbox"/>	In another country <i>Please list all applicable countries</i>

Part 4: Getting Involved

LPPANS is a volunteer-run organization, and there are always opportunities for interested individuals to help with committees, projects, and events. Each year at the Annual General Meeting, elections for Board of Directors seats are also held. Your volunteer time could be counted towards your unstructured CPL credit requirements.

If you are interested in volunteering with LPPANS, please contact registrar@lppans.ca

<i>For Office Use Only</i>			
Date Complete Application Received by Registrar		Date Registrar's Recommendation Received by Board	
Date Application Reviewed by Board		Date of Board Decision	
Comments / Conditions / Limitations Imposed and Reasons			
Board Decision	Approval <input type="checkbox"/>	Refusal <input type="checkbox"/>	
Letter of Notification sent to Applicant	<input type="checkbox"/>	Date:	
Membership/License Fee Received On:		Payment deposited by Treasurer (Date):	
License sent on:	By:		