



APPLICATION FOR ASSOCIATE DESIGNATION WITH THE CHARTERED GOVERNANCE INSTITUTE OF CANADA

PLEASE NOTE:

Please review your eligibility before completing and submitting this form.

The criteria to be elected as an Associate (ACG) is outlined on page 7.

Please read all notes on page 6 before completing the form.

If you have any queries about any aspect of your application or would like to discuss it before filling in the form, contact CGIC by email (info@charteredsingaporeinstitute.ca) or telephone (+1-613-595-1151).

Please ensure the form and supporting documentation are complete.

When you submit the form, please check that:

- The form has been signed and dated (page 2).
- All fields on the form have been completed (pages 2 to 4).
- The required supporting signatures have been obtained (page 5).
- All the required supporting documentation has been appended to the application, including:
 - a letter of introduction outlining your reasons for pursuing the Associateship designation and providing information on what contribution you foresee yourself making to your own career, the profession, your community, and to The Institute.
 - a detailed resume/curriculum vitae.
 - an organizational chart showing your current position within the company.
 - a detailed description of the company, including the number of employees and annual earnings.

Please return the completed form by email to info@charteredsingaporeinstitute.ca or by mail to 1568 Merivale Road, Suite 739, Ottawa, ON Canada K2G 5Y7.

Please use block capitals or typescript, throughout.

TO: THE COMMITTEE FOR CANADA OF THE CHARTERED GOVERNANCE INSTITUTE

I offer myself for election to The Institute as an Associate (ACG) as deemed appropriate and agree to be bound by the Charter, Bye-laws, Canadian By-laws, and Rules of The Institute.

I agree to pay \$100.00 CAD (plus any applicable taxes) upon receipt of an invoice for the application process. I also agree to pay annual membership fees to maintain my designation.

SIGNATURE: _____

DATE: _____

(mm/dd/yyyy)

APPLICANT INFORMATION:

NAME: _____

Last Name(s)

First Name(s)

Initials

Any diploma will bear the names given above, which should, therefore, be in full.

DATE OF BIRTH: _____

(mm/dd/yyyy)

**DATE OF PROGRAM
COMPLETION:** _____

(mm/dd/yyyy)

HOME ADDRESS: _____

Street

City

Province

Postal Code

HOME EMAIL: _____

HOME/MOBILE PHONE: _____

BUSINESS ADDRESS: _____

Street

City

Province

Postal Code

BUSINESS EMAIL: _____

BUSINESS PHONE: _____

ORGANIZATION: _____

JOB TITLE: _____

Please indicate which address is to be used for correspondence:

- Home
 Business

CHARACTER AND STANDING:

In order to satisfy the fit and proper person requirements laid down in the By-laws, you are requested to answer all questions in this section.

Where the answer to any of the questions is YES, supporting documentation clarifying the issue must be attached to this application.

Yes	No	
<input type="radio"/>	<input type="radio"/>	Are you an undischarged bankrupt or are your affairs currently subject to an arrangement with creditors or other external administration or are any such proceedings pending against you?
<input type="radio"/>	<input type="radio"/>	Within the past five years have you been convicted of any offense of such a nature that, had you been a member of The Institute at the time, would have been likely to have given rise to disciplinary action being taken against you by The Institute under the By-laws and Charter?
<input type="radio"/>	<input type="radio"/>	Within the past five years, have you conducted yourself, whether by act or default, in a manner that, had you been a member of The Institute at the time, might or is likely, to have been discreditable to The Institute having regard to The Institute Code of Ethics?

POST SECONDARY EDUCATION:

University/College Degree(s)	Dates		Degree (s) Obtained
	From	To	

PROFESSIONAL QUALIFICATIONS & DESIGNATIONS:

Name of Professional Body	Designory Letters	Date Exams Completed	Date Elected to Membership

RELEVANT EXPERIENCE:

The total length of relevant professional experience (in years): _____

LIST OF RECENT POSITION HELD:

A detailed curriculum vitae should also be provided

Name of Organization	Job Title	Dates	
		From	To

ACTIVE INVOLVEMENT IN THE AFFAIRS OF CGIC OR RELATED PROFESSIONAL MATTERS:

FORM OF RECOMMENDATION:

We the undersigned, having known the above named for the period noted*, hereby recommend him/her, from personal knowledge, for election as an Associate of The Institute. (A letter of reference is optional)

RECOMMENDATION 1

NAME: _____

TITLE: _____

COMPANY: _____

EMAIL: _____

ADDRESS: _____

Street

City

Province

Postal Code

If a Chartered Member, please indicate:

FCG

ACG

*The number of years you have known applicant:

_____ years

SIGNATURE: _____

DATE: _____

(mm/dd/yyyy)

RECOMMENDATION 2

NAME: _____

TITLE: _____

COMPANY: _____

EMAIL: _____

ADDRESS: _____

Street

City

Province

Postal Code

If a Chartered Member, please indicate:

FCG

ACG

*The number of years you have known applicant:

_____ years

SIGNATURE: _____

DATE: _____

(mm/dd/yyyy)

NOTES CONCERNING THE COMPLETION OF THE FORMS:

INCORRECT OR MISLEADING INFORMATION:

If information is revealed to be inaccurate or misleading, before or after the election, then the application is liable to be rejected. Furthermore, if you are currently an Associate, such misleading information may lead to disciplinary action under the By-laws.

RELEVANT EXPERIENCE:

Relevant experiences can be obtained in one or more organizations and in any type of organization. Some of the major relevant work areas include general management and administration, accounting and finance in a management position, company secretarial and legal work, pensions, insurance, information systems management, and committee administration.

ELIGIBILITY:

Requirements for election to membership are as follows:

ASSOCIATES

To be elected an Associate (ACG):

- you must have passed The Institute's examinations from which you are not exempt.
- you must satisfy the Committee for Canada that, considering your own character and your position, you are fit and proper to be elected.
- you must provide any information required by the Committee for Canada about your duties and any organization you have served.
- your main occupation for at least six years, or for periods totaling at least six years, must have been in one or more positions that are relevant to the profession of being a Chartered Secretary or Chartered Governance Professional, or alternatively, you must have completed any other professional development that the Committee decides on.

The Committee for Canada can reduce the 6-year qualifying period by up to 3 years where a person has:

- *a degree from a university which the Committee for Canada considers of suitable academic standing.*
- *a diploma or other certificate which is nationally recognized as being equivalent to a degree from such a university*
- *a professional qualification which the Committee for Canada recognizes as justifying the reduction*
- *completed any other professional development that the Committee for Canada decides justifies a reduction.*

GRADUATES

When individuals have passed the applicable Institute's examinations, they become Graduates. Note that:

- A Graduate is not a member of the Institute and is not entitled to vote at any general meeting.
- A Graduate is, however, subject to the same disciplinary rules as a member.
- A Graduate must pay an annual subscription, but this will not be more than the subscription for Associates.
- Graduates may describe themselves as Graduates of the Institute and use the letters 'GradCG' after their name; however, they must not describe themselves as a Chartered Secretary or Chartered Governance Professional.
- Graduates should apply to become either an Associate or a Fellow within 10 years of becoming a Graduate.