



CONFIRMATION OF GOOD STANDING INTERNATIONAL

Member please complete part A, and send both pages of this document by email cphr@hrma.ca, fax 604-684-3225, or mail.

PART A – TO BE COMPLETED BY MEMBER:

Member Name: _____	
Title: _____	Organization: _____
Business Address: _____	
Business Phone: _____	Business E-Mail: _____
Home Address: _____	
Home Phone: _____	Home E-Mail: _____

Please confirm my CPHR status details, including past or current professional conduct or discipline matters, with the following association: _____

PART B – TO BE COMPLETED BY CPHR BRITISH COLUMBIA & YUKON:

This will serve as verification that: (Member's Legal Name) _____	
(Member's Common Name if different from Legal Name) _____	
is a member in good standing with CPHR BC & YK until (date): _____	
And the following information is accurate:	
1. Was granted a CPHR designation on (date): _____	
with CPHR ID Number: _____	
2. Has the member ever been suspended, disqualified, censured or otherwise disciplined as a member of CPHR BC & YK:	
<input type="checkbox"/> Yes or <input type="checkbox"/> No	
3. Is the member currently subject to a proceeding for professional misconduct, incompetence or incapacity which has not yet been resolved? <input type="checkbox"/> Yes or <input type="checkbox"/> No	
Attestation and Signature: I, _____ (name and position with CPHR BC & YK) am a Senior representative of CPHR BC & YK. I solemnly affirm that the above person is a member of CPHR BC & YK and has been a member in good standing for the last _____ (# of years or months).	
Signature of Senior CPHR BC & YK Representative: _____	
Phone No/Email of Senior Representative: _____	