

CPHR ALBERTA APPLICATION FOR CPHR/CANDIDATE REINSTATEMENT

Former Candidates or former CPHR Members of CPHR Alberta to apply for reinstatement of their membership.

Pursuant to CPHR Alberta Bylaw 3.14, former CPHR Alberta Candidates and CPHR Members may apply for reinstatement if their membership was revoked due to non-payment of dues, failure to meet Continuing Professional Development (CPD) reporting requirements, or if they voluntarily resigned their designation.

- i. CPHR Alberta Candidate and Chartered Members who have been revoked or resigned for one (1) to three (3) years (i.e., reinstating after the current year's membership renewal period has ended) will be required to pay the current year's membership dues.
- ii. CPHR Alberta Candidate and Chartered Members who have been revoked or resigned for four (4) and ten (10) years (based on the membership year when dues were last paid) will be required to:
 1. Pay the current year's membership dues.
 2. Submit a minimum of 30 Continuing Professional Development (CPD) hours. These hours may be earned in any year or combination of years during which the member was inactive. Applicable to Chartered members only.
 3. Complete the current Ethics course. Applicable to Chartered members only.

Members who were away for greater than 10 years (based on the membership year when dues were last paid). Must re-start the process to gain the designation and must meet the requirements applicable at the time.

*Please note that if your CPHR designation was revoked due to failure to submit a Continuing Professional Development (CPD) log, reinstatement may be granted as a one-time exception only. If your designation is revoked a second time due to failure to meet CPD reporting requirements, you will no longer be eligible for reinstatement through this process and will be required to restart the process to obtain the designation, including meeting all designation requirements in effect at that time.

Please complete this form and return it to CPHR Alberta by email. If you have questions about your reinstatement, please contact the Office of the Registrar at registrar@cphrab.ca.

Applicant Information:

Given Name: _____ Last Name: _____

Home Phone: _____ Work Phone: _____

CPHR Number: _____ Email Address: _____

Mailing Address: _____

City: _____ Province: _____ Postal Code: _____



Chartered Professionals in Human Resources Membership Reinstatement Form

Membership Information:

Date CPHR Alberta Membership was resigned or revoked: _____

Former Membership Category: ☐ CPHR ☐ Candidate

Number of CPD Log Submission Periods missed: _____

CPD Log Submission Date (date your CPD Log was last due): _____

Applicant Signature **Date**

FOR OFFICE USE ONLY

Approved by Office of the Registrar:

Date: