



# APPLICATION FORM UPDATE

Use this form if you are a member of another CTTIC member society or OTTIAQ and are already an ATIO Professional with new qualifications.

## ADMISSION CRITERIA

**You are a Candidate for Certification or a Certified Member of a CTTIC member society or of OTTIAQ.**

You must be in good standing at your home association at the time of submitting your complete application package to ATIO. Applications must be submitted separately for multiple professions.

Your package must include:

1. Application form
2. A letter from your home association attesting that you are in good standing for the current membership year, your professional title and language combination.
3. Appendix A from the Mutual Recognition Agreement is required for each language combination, pair and/or profession.

I am an ATIO Professional and wish to update my professional qualifications.

## CONTACT INFORMATION

First and Last Name:		Preferred Name:	
Native language:	Title: Mr. Ms. Mrs.	Telephone:	
Mailing address:		Email:	
City:	Province:	Postal code:	
Preferred language of correspondence: EN FR		Date of Birth:	
<b>Association :</b>	CTINB	ATINS	ATIO ATIM ATIS ATIA STIBC OTTIAQ

## LANGUAGE COMBINATION AND PROFESSION

List all language combinations or pairs.

Translator	Interpreter:	Conference	Court	Community	Medical	Terminologist
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**Language Combination/Pair**  
ALL that apply

*You must complete this form for each new professional category.*

## Administration fee: \$55.00 plus tax

*This is the difference in dues for newly certified members.*

**New or updated qualifications will only be added or modified upon receipt of the fee.**

**Applications paid by credit card must be submitted electronically via email to [application@atio.on.ca](mailto:application@atio.on.ca)**

**Applications paid with a cheque must be submitted via regular mail to:**

1 Nicholas Street, Suite 1202, Ottawa, Ontario, K1N 7B7

**(Please do not submit your application using both methods).**

### PAYMENT INFORMATION

Payment type:      Visa                      MasterCard                      Cheque (payable to ATIO)

The ATIO office will call you at the number you provided to process your payment if using a credit card.

### SUPPORTING DOCUMENTS

**The following supporting documents must accompany this signed and dated application form.**

- The application form. Two or more forms for different professions.
- The application fee.
- A copy of your official letter attesting that you are a member in good standing with a professional association under CTTIC or OTTIAQ.
- A signed and complete copy of Appendix A of the Mutual Recognition Agreement.

### IMPORTANT, MUST-READ INFORMATION

**Upon receipt of a signed copy of the ATIO Code of Ethics (if applicable), approved Certified Members will receive the following:**

1. An ATIO Certificate Number.
  - a. If a member is certified in more than one profession, they will receive a unique certificate number for each profession.
2. An ATIO Certificate.
3. An ATIO membership card.
4. Are eligible to purchase an ATIO self-inking stamp or embossing seal (when available).
5. The right to vote during ATIO General Meetings.

Approved Affiliate Candidates for Certification are eligible to either write the CTTIC Certification Exam OR submit an application for certification by on-dossier.

**Affiliates pay reduced ATIO Annual Dues when ATIO is **not** the home association.**

- a. Affiliation status must be proven annually at the time of renewal. Affiliates must be in good standing for the renewal year at their home association and must renew at their home association before renewing at ATIO.
- b. *If there is an overlap (i.e., 2021-2022 and 2022-2023), either is acceptable.*
- c. *Proof must be received in the form of an attestation letter, receipt, or current membership card plus receipt.*

### SIGNATURE

I have read and understand all instructions on this form as well as on the ATIO website.

I have completed this form as indicated.

I have included the required documents.

I authorize the verification of the information provided on this form and in the attached documents.

**Applicant's signature:**

**Date:**

**Please submit this form and all supporting documentation to: [application@atio.on.ca](mailto:application@atio.on.ca)**