



College of Applied Biology / Royal Society of Biology Mutual Recognition Agreement Authorization Form

The following information must be provided in order to apply for Chartered Biologist status under the Mutual Recognition Agreement between the College of Applied Biology (CAB) and the Royal Society of Biology (RSB).

APPLICANT		
Name:		
Address:		
CAB Membership Number:		
College Entry via TILMA: ☐ Yes ☐ No		
In order to proceed with this application, the RSB must o submitting this form to the CAB, you confirm that the CA the Registrar of the RSB.		-
I hereby give permission for the CAB Registrar to releas register.	e the information request	ed by the RSB
Signed:	Date:	
Applicant: mail CAB/RSB MRA Authorization Form to: Registrar, College of Applied Biology #205-733 Johnson Street Victoria, B.C., Canada, V8W 3C7.		
CAB REGISTAR: I hereby confirm that:		
(RPBio Full	Name)	
Is a RPBio in good standing with the CAB	☐ Yes	□ No
Is not presently the subject of a discipline action/enquiry	y □ Yes	□ No
In the event the answer to any of the above questions is appropriate on a separate sheet.	No, please provide addition	onal information a
Signed:	Date:	
CAB Registrar		

CAB Registrar: please place this form in a sealed envelope and forward to: Royal Society of Biology, 1 Naoroji Street, London WC1X 0GB