



Reference (2) – Supervisor or Colleague

Reference Name: _____

Email: _____ Phone Number: _____ Position: _____

Name of Applicant: _____

An applicant applying for registration as a Limited License Agrologist (LLAg) has asked you to provide a work reference. **To act as a reference, you must have direct knowledge of the applicant’s work experience as a supervisor or colleague for the time period specified in the detail you are providing.** You may wish to review BCIA’s Practice Areas (www.bcia.com) to assist your explanations of how the applicant’s work experience and knowledge fit within the respective Practice Area for which you believe the applicant may be qualified to work within.

*Once you have completed this form **including the declaration below**, return to the applicant for inclusion with their application package.*

Start Date (m/y)	End Date (m/y)	Applicant’s Title	Name of Company & City

Activities: Describe the major activities during this period including duties performed, skills and techniques used and the level of responsibility.

I certify that the information provided is correct, complete and provides full disclosure.

Dated: _____