

Become a



CERTIFIED PROFESSIONAL

2007 International Certification Evaluation

WHAT IS CHT?

An international evaluation for the landscape industry. The designation Certified Horticultural Technician (CHT) is an initiative of the Landscape Ontario Horticultural Trades Association and the Canadian Nursery Landscape Association. The evaluation consists of practical and written evaluations to verify your knowledge and ability to produce quality landscape work.

WHY EVALUATE?

Certification demonstrates your commitment to the profession. Receiving your certification shows your peers, supervisors, and in turn, the general public of your commitment to your chosen career and your ability to perform to set standards. Certification sets you apart as a leader in your field.

WHY EVALUATE?

The goal of the industry is to upgrade and qualify the skills level of all who practice landscaping. The industry will promote the "CHT" to the public as one of their best assurances of quality workmanship.

WHO CAN APPLY?

Those who have been in the industry more than two years and have more than 2,000 hours of practical experience.

THERE IS NO GRAND-FATHERING FOR THIS CERTIFICATION.

STUDY GUIDES

One Study Guide is included with each exam registration fee. Landscape Installation and Landscape Maintenance Study Guides can also be purchased individually for \$80 (+GST).

APPLICATION FORMS

Applications must be received by August 15 (4 weeks prior to evaluation date). Applications are processed on a first-come, first-serve basis and are not complete without payment by Visa, MasterCard, or cheque. (See reverse side for an application form).

CANCELLATION CHARGE

We must be notified of any cancellations more than 7 days prior to the evaluation date. Less than 7 days notice will result in a 50% cancellation charge of the registration fee paid. No refunds for no shows.

DATES & LOCATION

OTTAWA Installation or Maintenance

Practical:

Friday, September 14, 2007 (7 a.m.-6 p.m.)

Written:

Saturday, September 15, 2007 (9 a.m.)

WHAT ARE THE FEES?

Installation or Maintenance

L.O. members:

\$350 (+GST) per person

Potential members:

\$450 (+GST) per person

PAYMENT AND INFORMATION

Send your completed application form to:

Landscape Ontario
7856 Fifth Line South, RR 4
Milton, ON
L9T 2X8

For more information, contact Beverley Benjamin, ext. 354 at Landscape Ontario, 905-875-1805 or 1-800-265-5656, Fax 905-875-3942 or visit www.hort-trades.com.

(GST NUMBER R-119005049)

An initiative of:



Landscape Ontario
HORTICULTURAL TRADES ASSOCIATION

Taking horticulture to the next level



Canadian Nursery
Landscape Association
Association Canadienne des
Pépiniéristes et des Paysagistes

CERTIFIED HORTICULTURAL TECHNICIAN APPLICATION FORM

(PLEASE PRINT CLEARLY AND COMPLETE ALL AREAS IN FULL IN ORDER TO EXPEDITE THE APPLICATION PROCESS)

APPLICANT NAME: _____

HOME ADDRESS: _____

PROVINCE: _____ CITY: _____ POSTAL CODE: _____

PHONE: _____ FAX: _____

PLEASE REGISTER ME FOR THE _____ INSTALLATION EVALUATION _____ MAINTENANCE EVALUATION

EVALUATION DATE: September 14-15, 2007 **LOCATION:** Ottawa

COMPANY NAME: _____

COMPANY ADDRESS: _____

PROVINCE: _____ CITY: _____ POSTAL CODE: _____

PHONE: _____ FAX: _____

ARE YOU A MEMBER OF LANDSCAPE ONTARIO? _____ YES _____ NO.

IF YES, PLEASE SPECIFY A COMMODITY GROUP: _____ LANDSCAPE CONTRACTOR _____ LANDSCAPE DESIGNER _____ GROUNDS MANAGEMENT
_____ RETAIL _____ LAWN CARE _____ GROWER _____ IRRIGATION _____ INTERIORSCAPE

POST SECONDARY EDUCATION: (REQUIRED FOR 1000 HOURS EXPERIENCE CREDIT)

INSTITUTION: _____

NAME OF CERTIFICATE/DIPLOMA/DEGREE: _____

LENGTH OF PROGRAM: _____ DATE COMPLETED: _____

(PLEASE ENCLOSE A COPY OF THE FINAL TRANSCRIPT, OR SIMILAR DOCUMENT OF VERIFICATION)

VERIFICATION OF EXPERIENCE: (TO BE COMPLETED BY THE EMPLOYER)

APPLICANT'S NAME: _____ HAS WORKED IN THE HORTICULTURE INDUSTRY FOR _____ MONTHS AND _____ YEARS.

I VERIFY THAT THE ABOVE APPLICANT HAS EXPERIENCE IN THE GENERAL SKILLS AREAS TO BE EVALUATED BY THE LO CERTIFICATION COMMITTEE.

NAME (PLEASE PRINT): _____ SIGNATURE: _____

DATE: _____ COMPANY: _____

PAYMENT INFORMATION:

_____ VISA _____ MASTERCARD _____ CHEQUE

CARD # _____ EXPIRY DATE: _____

NAME: _____ SIGNATURE: _____

AMOUNT: \$ _____ + \$ _____ (GST) = \$ _____ TOTAL PAYABLE

FAX OR MAIL THE COMPLETED FORM TO:

LANDSCAPE ONTARIO, c/o: Beverley Benjamin

7856 Fifth Line South, RR 4, Milton, ON L9T 2X8 Phone: 1-800-265-5656 or (905) 875-1805 Fax: (905) 875-3942