



CLT/CHT/CLD/CLP Ontario Test Dates, Times And Locations for 2012

When	Where	Start time	Room	Test Type
January 12 th	Congress – Toronto Congress Center, 650 Dixon Rd Toronto, ON	2pm	Patcher Karsh Room	All Written Certification Tests
January 31 st	Algonquin College, 1285 Woodroffe Ave, Building M Ottawa, ON	1pm	Room M – 105	All Written Certification Tests
March 22 nd	Canada Blooms – Direct Energy Center 1000 Princes' Blvd, Toronto, ON	1pm	Meeting Room A2	All Written Certification Tests
April 20 th	St. Clair College 2000 Talbot Road West Windsor, ON N9G 3C3	1pm	Horticulture Building	All Written Certification Tests
July 26 th	Landscape Ontario 7856 Fifth Line, Milton, ON	1pm	Hemlock/Hawthorne Rooms	All Written Certification Tests
July 27 th	Landscape Ontario 7856 Fifth Line, Milton, ON	8am	Outside Landscape Ontario Office	CLT Practical Exterior, and all designation written retests ONLY
Sept 27 th	Kemptville College 830 Prescott St. Oxford-ON-Rideau, ON	1pm	AJ Logsdale	All Written Certification Tests
Sept 28 th	Kemptville College 830 Prescott St. Oxford-ON-Rideau, ON	8am	Outside AJ Logsdale	CLT Practical Exterior and all designation written retests ONLY
Oct 18 th	Expo – Toronto Congress Center 650 Dixon Rd Toronto, ON	TBA	TBA	All Written Certification Tests
Oct 25 th	Landscape Ontario 7856 Fifth Line, Milton, ON	1pm	Hemlock/Hawthorne Rooms	All Written Certification Tests
Oct 26 th	Landscape Ontario 7856 Fifth Line, Milton, ON	9am	Outside Landscape Ontario Office	CLT Practical Exterior, and all designation written retests ONLY
Nov 10 th	Fanshawe College 1001 Fanshaw Blvd London, ON	9am	Room M-1033	All Written Certification Tests

Brought to you by;

HORTICULTURAL TRADES ASSOCIATION
landscapeontario.com



Landscape Ontario Horticultural Trades Association
7856 Fifth Line South, Milton, ON L9T 2X8
Tel: 1.800.265.5656
Fax: 905.875.3942
email: certification@landscapeontario.com



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January 12 ^{5h}	Congress – Toronto Congress Center, 650 Dixon Rd Toronto, ON	2pm	Patcher Karsh Room	All Written Certification Tests
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Landscape Industry Certified

2012 Post-Secondary / SHSM-Student Application

Please be sure to fill out the entire application, or it may be void!

PLEASE PRINT CLEARLY

Applicants Name _____	School Name _____
Home Address _____	Address _____
City _____ Postal Code _____	City _____ Postal Code _____
Phone _____ Fax _____	Teacher Email _____
Please send correspondence to my: <input type="checkbox"/> School <input type="checkbox"/> Home	Phone _____ Fax _____

Practical
 Please check off the appropriate test date: Jul. 26 Sep. 28

Orientation
 Yes, please contact me to arrange for a Certified Technician to come speak to my class about the Certification Test Day Procedure and Policies.

Verification of School/Co-op Experience:
 Student agrees to review the manual and test book prior to test day and is familiar with Best Practices associated with operation of all tools and equipment

Teacher Signature: _____ Student Signature: _____ Date: _____

Payment: (Must accompany registration, no invoices will be issued, Please keep a copy as your receipt)

Student Price: \$195.00 includes 3 practical stations (and written for post-secondary) \$ _____

Study Manuals: \$80 ea.+ \$20 shipping Hard/Softscape Installation Turf/Ornamental Maintenance Retail \$ _____
 (Number of copies) X _____ X _____

Method of Payment: <input type="checkbox"/> Visa <input type="checkbox"/> MasterCard <input type="checkbox"/> Cheque (payable to Landscape Ontario) must be enclosed	Subtotal \$ _____
Card # _____ Exp. Date: _____	HST 13% \$ _____
Cardholder Name: _____	Shipping \$ 20.00
Signature: _____	TOTAL \$ _____

Stations/Sections: (Please check 3 practical stations)

<input type="checkbox"/> Basic Program Controller	<input type="checkbox"/> Intermediate Walk-Behind Mower	<input type="checkbox"/> Tree Planting and Staking	<input type="checkbox"/> Instrument
<input type="checkbox"/> Lateral Repair and Head Adjustment	<input type="checkbox"/> Riding Mower	<input type="checkbox"/> Chainsaw	<input type="checkbox"/> Paver Installation
<input type="checkbox"/> Power Blower	<input type="checkbox"/> Edger and Trimmer	<input type="checkbox"/> Sod Installation	<input type="checkbox"/> Skid-Steer Operation
<input type="checkbox"/> 21" Mower	<input type="checkbox"/> Aerator	<input type="checkbox"/> Plant Layout	<input type="checkbox"/> Pruning
	<input type="checkbox"/> Plant ID	<input type="checkbox"/> Grading and Drainage	<input type="checkbox"/> Rototiller

REGISTRATION CLOSING 2 WEEKS PRIOR TO PRACTICAL TEST DATE. REGISTRATIONS MUST BE COMPLETE AND INCLUDE PAYMENT OR YOUR APPLICATION WILL BE DENIED.

RESCHEDULE POLICY: Reschedule of Practical Tests within 2-14 days of the test will be charged \$50. Reschedule 2 days or less will be charged \$150.

You are not considered registered until you have received a confirmation letter/receipt.

Mail: Landscape Ontario Certification, 7856 Fifth Line South, Milton ON L9T 2X8
 Phone: 1-800-265-5656 • Fax: 905-875-3942 • certification@landscapeontario.com

2012 Certification Liability/Sign-In and Release Form

Please fill in your personal information listed below. Be sure to sign the form at the bottom when you are finished.

Date: _____ Candidate ID #: _____

Name :

Personal Data: If this information has not changed since you registered do not fill it in!

Address:

City: _____ Province: _____ Postal Code: _____

Phone (include area code): _____

Email Address: _____

Company Information: If this information has not changed since you registered do not fill it in!

Firm:

Address:

City: _____ Province: _____ Postal Code: _____

Phone (include area code): _____

Liability Release Statement

I release PLANET*, CNLA* and Landscape Ontario of any and all liability resulting from injury to myself as a result of participation in the Landscape Industry Certified Exam being held at Landscape Ontario, in Milton, Ontario.

I hereby grant PLANET* CNLA*, Landscape Ontario and its authorizing officers permission to use my likeness, voice, picture and name for print, radio, web cast or television broadcast anywhere throughout Canada, the United States and the world; and to edit such material on film or videotape for these purposes. I have been advised that this information is being used for educational and community/industry outreach purposes relative to the Landscape Industry Certified (CLT) program. I release PLANET*, CNLA*, Landscape Ontario and its authorized officers and partners from any liability as a result of these pictures, film, or video being taken. I also understand that there will be no compensation paid to me for this service.

Full Name (printed) _____

Signature _____ Date _____
(Parent or Guardian if under age of majority)

*PLANET = Professional Landcare Network, CNLA = Canadian Nursery and Landscape Association

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