

board of architects singapore

5 Maxwell Road, #01-03 Tower Block, MND Complex, Singapore 069110. Tel: 6222 5295 Fax: 6222 4452

APPLICATION FOR ADMISSION TO THE PROFESSIONAL INTERVIEW UNDER SECTION 15(2)(C) OF THE ARCHITECTS ACT

Paste a recent
passport size
photograph of
applicant

Please complete this form using BLOCK LETTERS and tick boxes [] where appropriate

A PERSONAL DETAILS

Full Name (Underline Surname) * Mr/Mrs/Miss/Mdm/Dr/Prof

*NRIC/Passport No.

Home Address

Home Telephone No. Mobile No.

Email

Website

Nationality

*Residential Status Singapore PR [] / Professional Employment Pass []

Country of birth Date of birth

Race Chinese [] Malay [] Indian [] Others []

Please specify: _____

Mailing Address Home [] Office []

* Delete where not applicable

B OFFICE PARTICULARS

Office Name

Office Address

Office Telephone: Office Fax:

Email

Website

C PRACTICAL EXPERIENCE

I seek registration by reason of having the practical experience referred to in section 15(2)*(a)/(b)/(c) of the Architects Act 1991.

My practical experience in architectural work has been as follows:

(Give full particulars, including the names of employers, positions held and dates when employed by each employer)

Not applicable to applicant under Section 15(2)(a). For application under Section 15(2)(b) and (c), applicant is required to submit details as set out in the required Appendix 1.

D ARCHITECTURAL QUALIFICATION & ACCREDITATION

Qualification in architecture and country obtained	Year

Full name and address of the University, College or educational institution which conferred the above degree, diploma or other architectural qualification.

Name and address of University or Institution	Normal length of course	Date commenced	Date Completed	Full Time/ Part Time

* Delete where not applicable

E CHARACTER REFERENCE

For evidence that I am of good character and reputation, reference may be made to the following persons not being my immediate relations:

i) Name _____
Address _____

Occupation or Profession _____ Period of acquaintance _____

ii) Name _____
Address _____

Occupation or Profession _____ Period of acquaintance _____

F I enclose the fee of S\$2,000.00 (*cash/cheque/bank draft No. _____ made payable to **Board of Architects**)

G DECLARATION

I, the undersigned, hereby declare that all the foregoing statements are true in every respect.

Signature of Applicant

Date

* Delete where not applicable

Note: Applicant is reminded that it is an offence to make any false or fraudulent representation or declaration, either verbally or in writing in connection with this application.

RESULT OF THE APPLICATION

This space is not to be filled by the applicant.

The application was considered at a meeting of the Board of Architects held at the office of _____
_____ on the _____ day of _____ of the year _____ at
which meeting the following members were present:

President : _____

Members :

Registrar : _____

The application was Approved/Disapproved/Deferred

Endorsed by:

President _____

Registrar _____

FOR OFFICIAL USE ONLY

Date received _____

Registration fee received _____

Receipt No _____

Sent on _____

Registration No _____

Entered in Register _____