

APPLICATION FOR REGISTERED MEMBERSHIP

(FOR APPLICANTS WITH BROADLY EXPERIENCED FOREIGN ARCHITECT CERTIFICATION)

Name of Applicant (please print)

DATE OF APPLICATION

INSTRUCTIONS FOR COMPLETING APPLICATION

GENERAL

This application must be filled out accurately, neatly, and completely. Use 'N/A' for those sections which do not apply and attach additional sheets when necessary to explain complex or unusual situations. <u>Do not</u> attach a resume in lieu of completing the form.

All Sections of the application must be completed in full. Please allow 2-3 weeks for processing your application.

FEES

Required Fees must accompany your completed original application form.

LICENSE TERM

January 1 – December 31 of each calendar year.

REGISTRATION HISTORY

Indicate registration status in all jurisdictions where you are currently or have been previously registered. For each registration, include your registration number (if applicable), the date you were initially registered, and any registration not currently in good standing. Include foreign registrations held and attach additional sheets as necessary.

EDUCATION HISTORY

Please indicate your Canadian Architectural Certification Board Certification number AND/OR your Broadly Experienced Foreign Architect certification number. Evidence of certification must be provided.

List the colleges and universities you have attended. Designate those from which you received your architectural education. An applicant who did not complete a degree from a college or university or recognized equivalent (Syllabus of Studies) should show major field(s) of study, i.e. architecture, etc. and the number of credit hours (semester or quarter) attained.

EXPERIENCE HISTORY

All applicants must provide complete information on all their employment experience. Accuracy of dates is very important.

ARCHITECT REFERENCE

One architect reference is required for all applications. Present employers and fellow employees are permitted. The applicant is to complete Side 'A' and forward it to the Reference noted for completion of Side 'B'.

APPLICANT INFORMATION

NAME	:						
		(Surname)	(First Name)	(Initial)			
DATE	OF BIRTH:			Attached copy of proof required			
		(Month/Day/Year)					
COUN	ITRY OF ORIGIN:						
I AM A	A CANADIAN CITIZEN (I	Provide a copy of E	Birth Certificate or Passport):	YES 🗆 NO 🗆			
OR							
I AM L	EGALLY ENTITLED TO	WORK IN CANAD	A (attach a copy of Certificate / V	lisa, etc.): YES \square NO \square			
LANG	UAGES:	☐ English ☐	French Other				
PLACE	E OF BUSINESS:						
		(Firm Name)					
		(Street)	(City/Town)	(Province/State) (Postal/Zip Code))		
TELEPHONE:		EMAIL:					
MAILI	NG ADDRESS:						
(If differ	rent than above)	(Street)	(City/Town)	(Province/State) (Postal/Zip Code))		
COMN	MUNICATIONS:	I agree to subso	cribe to the AANB E-Bulletin.				
		☐ YES ☐ N	NO ENGLISH FRE	NCH			
A.	REGISTRATION HISTORY						
1.	Jurisdiction of initial re						
	Registration Number:		Date Acc	uired:			
2.	-		urrently hold or have previously	v held a registration:			
			REGISTRATION NUMBER		\neg		
	JURISDICT	ION	REGISTRATION NUMBER	DATE ACQUIRED	_		
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3.	Have you ever been denied registration	YES 🗆	NO \square			
4.	Has your registration ever been susper	YES 🗆	NO 🗆			
5.	Have you surrendered or allowed your jurisdiction due to action pending or the	YES 🗆	NO 🗆			
6.	Have you ever been convicted of any conv	ant YES 🗌	NO 🗆			
7.	Have you ever been found guilty of pro incompetence in another jurisdiction, o competence presently the subject of pro-	YES 🗆	NO \square			
	If you have answered 'YES' to any of the peals. Use a supplementary sheet if neo		details in the space b	elow and include re	sults of	
B.	EDUCATION HISTORY					
1.	Indicate Canadian Architectural Certification Board Certification AND/OR Broadly Experienced Foreign Architect Certification (provide evidence):					
	CACB Certificate Number:		Date:	Oate:		
	BEFA Certificate Number:		Date:			
2.						
	COLLEGES, UNIVERSITIES, TECHNICAL SCHOOLS, SYLLABUS OF STUDIES	DATE(S) OF ATTENDANCE	DEGREE RECEIVED	DATE DEGREE RECEIVED		
C.	EXPERIENCE HISTORY	<u> </u>				
	low experience received after completio yment as well as non-architectural emplo		architecture. Include	e periods of self-		

D. ARCHITECT REFERENCE

Give the name and address of one architect who is currently personally acquainted with your professional experience,
abilities, and professional activities. Present employers, fellow employees, present partners are permitted for this
reference. Complete Side 'A' of the attached form and forward it to the reference listed below for completion of Side 'B'

1)	Reference Name:	
	Address:	
	Telephone:	

E. OATH

If my application is accepted, I will subscribe the following declaration:

"I do solemnly declare that having read and understood the Architects' Association of New Brunswick <u>Act and Bylaws</u>, I am eligible for membership. Further, I do announce that I will uphold professional aims, the art and the science of architecture and thereby improve the environment. I also accept with obligation the need to further my education as an architect. I promise now that my professional conduct, as it concerns the community, my work and my fellow architects, will be governed by the ethics and the tradition of this honorable learned profession."

ADMISSION COURSE:

I have successfully completed the following modules of the AANB admissions course (if applicable)

- ☐ Module 1
- ☐ Module 2
- Module 3

F. DECLARATION

"The applicant acknowledges that the AANB will compile and evaluate a record with respect to all aspects of the applicant's career. The applicant agrees to provide any additional information in connection with the investigation as may be required by the AANB.

The applicant acknowledges that any statements, papers of documents received by the AANB in its investigation may be transmitted by the AANB to Architectural Registration Boards of Provinces or States or other authorities licensing architects and will not be available to the applicant.

The applicant hereby authorizes the AANB to transmit the applicant's record and all other pertinent information obtained, in the course of its investigation, to Architectural Registration Boards, Provinces, States or other authorities licensing architects.

In consideration of the services to be rendered by the AANB, the applicant hereby releases, discharges and exonerate the AANB's directors, officers, and agents from any and all liability of every nature and kind arising out of the transmission of information concerning the application.

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THE UNDERSIGNED, being duly sworn upon oath deposes and state, that I am the person making foregoing statements and that they are made in good faith and are true in every respect.

COUNTRY OF:	(Signature of Applicant)
Sworn by the deponent:	
known to me at	
on the day of 20	
Before me,(Notary or other qualified to take oath)	SEAL