

APPLICATION FOR REGISTERED MEMBERSHIP

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.

FEES

Required Fees must accompany your completed original application form.

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

Education qualifications must be verified. Please indicate your Canadian Architectural Certification Board (formerly RAIC Certification Board) number. Evidence of certification must be provided.

List the colleges and universities you have attended. Designate those from which you received your architectural education. Those who have no college education should list the date of graduation from high school (or high school equivalent) and the name of the school. 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 and the types of employment is very important. Employment with organizations that are not architectural firms and employment not directly related to architectural work must be included so that no gaps appear in the chronological listing. Note periods of unemployment, where they occur rather than leaving a period of time without explanation.

Differentiate carefully between periods of part-time and full-time employment.

NOTE: Part-time means less than 35 hours/week. Seasonal employment should be listed as full time if more than 35 hours/week.

List current addresses for all employers. If a former employer is deceased, the firm has dissolved, or is now operating under a different name, list a current address of a reference source (preferably an architect) who can verify the employment history with the firm.

NOTE: Intern Architects applying for registration are only required to list employers. Complete employment history is accepted through submission of the Canadian Experience Record Book/Internship in Architecture Program Manual and evidence of approved completion of the work experience requirement.

EXAMINATION HISTORY AND/OR CONFIRMATION OF REGISTRATIONS/LICENSES

Indicate the examinations(s) you have completed in the appropriate section of the application form.

ARCHITECT REFERENCES

Three architect references are required for all applications. Present employers, fellow employees, present partners or relatives may not be used. The applicant is to complete Side 'A' and forward it to the three references noted for completion of Side 'B'.

APPLICANT INFORMATION

_EGA	AL NAME:	(Surname)	(First Name)		(Initial)	
ADDF	RESS:	(Street)	(City/Town)	(Province/State)	(Postal/ZIP Code	
ELE	PHONE:	· · ·	EMAIL:			
LAC	E OF EMPLOYME	NT:				
OM	MUNICATIONS:	I agree to subscribe to	o the AANB E-Bulletin.			
		\square YES \square NO	☐ ENGLISH ☐ FRENCH			
TO	E:					
lave	you previously bee	en registered in any oth	ner Canadian jurisdiction? YES	□ NO □		
f YES	S. complete Section	on A. / If NO, procee	d to Section B.			
	, ,					
۸.	REGISTRATIO	ON HISTORY				
	Jurisdiction of ir	Jurisdiction of initial registration:				
	Registration Nu	mber:	Date Ac	equired:		
2.	List all other juri architecture:	List all other jurisdictions in which you currently hold or have previously held a registration to practice architecture:				
	JUF	RISDICTION	REGISTRATION NUMBER	DATE ACQUIR	ED	

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3.	Have you ever been denied registration	YES \square	NO \square		
4.	Has your registration ever been suspen	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 of to your suitability to practice architecture.	ant YES □	NO 🗆		
7.	Have you ever been found guilty of proincompetence in another jurisdiction, competence presently the subject of p	YES 🗆	NO 🗆		
	: If you have answered 'YES' to any of th opeals. Use a supplementary sheet if neo		details in the space b	elow and include res	sults of
B. 1.	EDUCATION HISTORY (Submit cer Indicate Canadian Architectural Certific		omas and other certif	icates received)	
	Certificate Number:		Date:		
2.	COLLEGES, UNIVERSITIES, TECHNICAL SCHOOLS, SYLLABUS OF STUDIES	DATE(S) OF ATTENDANCE	DEGREE RECEIVED	DATE DEGREE RECEIVED	
	EXPERIENCE HISTORY sperience received subsequent to compleyment as well as non-architectural employment		s in architecture. Incl	ude periods of self-	

D. **EXAMINATION HISTORY** (Complete applicable section)

1.	EXAMINATION FOR ARCHITECTS IN CANADA	DATE PASSED	
	☐ Section One		
	☐ Section Two		
	☐ Section Three		
	☐ Section Four		
2.	ARCHITECT REGISTRATION EXAMINATION	DATE PASSED	
	☐ Pre-Design or Pre-Design A		
	$\ \square$ General Structures or Structural Technology General & Long Span D/F		
	☐ Lateral Forces or Structural – Technology		
	 Mechanical and Electrical Systems or Mechanical, Plumbing and Electrical Systems G 		
	☐ Construction Documents & Services or Construction Documents and Services I		
	☐ Site Planning or Site Design-Written and Graphics B		
	☐ Building Planning or Building Design C		
	☐ Building Technology or Building Design C		
3.	CANADIAN ARCHITECTURAL PRACTICE EXAMINATION	DATE PASSED	
	☐ Legal Aspects of Architecture		
	☐ The Regulation of the Architectural Profession		
	☐ Management of the Practice		
	Other (Indicate)		
4.	QUEBEC FOUR PART WRITTEN EXAMINATION		
5.	PROVINCIAL PROFESSIONAL PRACTICE EXAMINATION		
6.	ORAL EXAMINATION		
7.	If other than above, please state Professional Registration Examination(s) successfully completed (Submit evidence)		

E. ARCHITECT REFERENCES

Give the name and address of three architects who are currently personally acquainted with your professional experience, abilities and professional activities. **Present employers, fellow employees, present partners or relatives are not to be used for these references.** Complete Side 'A' of the attached form and forward it to the references listed below for completion of Side 'B'.

1)	Reference Name: Address:	
	Telephone:	
2)	Reference Name:	
	Address:	
	Telephone:	
	·	
3)	Reference Name:	
•	Address:	
	Telephone:	

F. 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> and having passed the examinations, 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

G. 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 say 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