

# Architects' Association of New Brunswick

# 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'.

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# **APPLICANT INFORMATION**

LEGA	L NAME:					
		(Surname)	(First Name)	(Initial)		
DATE OF BIRTH:			A	ttached copy of proof required		
		(Month/Day/Year)				
COUN	NTRY OF ORIGIN:					
IAM	A CANADIAN CITIZEN	(Provide a copy of I	Birth Certificate or Passport):	YES 🗆 NO 🗆		
OR						
I AM I	LEGALLY ENTITLED TO	O WORK IN CANAE	DA (attach a copy of Certificate / Vi	isa, etc.): YES 🗆 NO 🗆		
LANGUAGES:		English French Other				
PLAC	E OF BUSINESS:					
		(Firm Name)				
		(Street)	(City/Town)	(Province/State) (Postal/Zip Code)		
TELE	PHONE:		EMAIL:			
MAILI	NG ADDRESS:					
(If diffe	rent than above)	(Street)	(City/Town)	(Province/State) (Postal/Zip Code)		
COMMUNICATIONS:		I agree to subscribe to the AANB E-Bulletin.				
		🗆 YES 🗌 I		NCH		
Α.	<b>REGISTRATION H</b>	IISTORY				
1.	Jurisdiction of initial	registration:				
	Registration Number	ber: Date Acquired:				
2.	List all other jurisdict	tions in which you <b>c</b>	urrently hold or have previously	<b>held</b> a registration:		
	JURISDICTION		REGISTRATION NUMBER	DATE ACQUIRED		

# APPLICATION FOR REGISTERED MEMBERSHIP

Date: \_\_\_\_\_

(FOR APPLICANTS WITH BROADLY EXPERIENCED FOREIGN ARCHITECT CERTIFICATION)

3.	Have you ever been denied registration?	YES	NO 🗌
4.	Has your registration ever been suspended or revoked?	YES	NO 🗌
5.	Have you surrendered or allowed your registration to lapse in any jurisdiction due to action pending or threatened?	YES	NO 🗌
6.	Have you ever been convicted of any offence which may be relevant to your suitability to practice architecture:	YES	NO 🗌
7.	Have you ever been found guilty of professional misconduct or incompetence in another jurisdiction, or is your conduct or competence presently the subject of proceedings?	YES	NO 🗌

**NOTE**: If you have answered '**YES**' to any of the above questions, provide details in the space below and include results of any appeals. Use a supplementary sheet if necessary.

# B. EDUCATION HISTORY

1. Indicate Canadian Architectural Certification Board Certification AND/OR Broadly Experienced Foreign Architect Certification (provide evidence):

 CACB Certificate Number:
 Date:

BEFA Certificate Number: \_\_\_\_\_

2.

Colleges, Universities, Technical Schools, Syllabus of Studies	DATE(S) OF ATTENDANCE	DEGREE RECEIVED	DATE DEGREE RECEIVED

# C. EXPERIENCE HISTORY

List below experience received after completion of a program of studies in architecture. Include periods of selfemployment as well as non-architectural employment.

# 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,	SEAL	