

لمباڠ ارڪيٽيڪ جوروترا قروفيسيونل دان جورواوكور باهن نڱارا بروني دارالسلام
Brunei Darussalam Board of Architects Professional Engineers and Quantity Surveyors

**APPLICATION FOR AN ARCHITECT
TO BE REGISTERED AS**

ASEAN ARCHITECT (AA)

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APPLICATION FOR AN ARCHITECT TO BE REGISTERED AS ASEAN ARCHITECT (AA)

(To be completed by Applicant in BLOCK LETTERS)

Name of Architect Applicant :
(As in Passport)

Name of Country of Origin :

Qualification Obtained :

Qualification Place and date obtained :

Architect Registration No.(Country of Origin) :

Architect Registration Date :

ASEAN Architect Register (AAR) :

Certified Compliance with ASEAN Architect Criteria:

Completed an accredited or recognised architectural programme, or assessed recognised equivalent	
Been assessed within their own country as eligible for independent practice	
Gained a minimum of not less than ten (10) years of continuous architectural practice after graduation, of which at least five (5) years shall be after licensure/registration	
Spent at least two years in responsible charge of significant architectural work	
Complied with the Continuing Professional Development policy of the Country of Origin at a satisfactory level	
Confirmed signature on statement of compliance with codes of ethics	

Signed :

Name of Officer Delegated :

ASEAN Architect Monitoring Committee : BRUNEI DARUSSALAM
(Name of Country of Origin)

Date :

**SIGNIFICANT ARCHITECTURAL WORK APPLICATION FOR
ASEAN ARCHITECT REGISTRATION**

Receipt No. :

Name of Architect (As in Passport) :

Name Title (if any) :
(eg. Mr., Mrs, Ms., Ar., Dr., etc)

Architect Registration No. :

Architect Registration Date :/...../.....
(DD/MM/YY)

Qualification :

Date of Birth :/...../.....
(DD/MM/YY)

Mailing Address :
.....

Postcode :

Country : **BRUNEI DARUSSALAM**

Present Company/Work Place Name :
.....

Company/Work Place Address :
.....

Postcode :

Country : **BRUNEI DARUSSALAM**

I wish to be placed on the ASEAN Architect Register (AAR) and apply as described below in accordance with the provision that defines two years' experience in responsible charge of significant architectural works.

1. Significant Architectural Work Experience (describe in retrospective order, beginning with the most recent one.)

Work No.	Starting Date/ Ending Date/ (months)	Name of Organisations/ Position/Title	Name of Work	Attestant's Column		
				Signature	Relationship of Attestant to Applicant	Tel/Fax

Note: The attestant above shall be, in principle, the representative of the organisation under which the applicant executed his architectural work.

2. Detailed Description of Significant Architectural Work (Describe, in detail, each work listed in the preceding page.)

Work No.	Position in Architectural Work	Contents of Work (Describe the contents and significance of the work, the applicant's role, and the degree of the applicant's responsibility. Using about 50 words.)

Note: Make a copy of this sheet when an extra sheet is needed.

To ASEAN Architect Monitoring Committee,

I hereby declare that the above descriptions are true to the best of my knowledge.

Signature :

Architect Applicant's name :

Date :

DECLARATION FOR THE APPLICATION AS ASEAN ARCHITECT

Please tick (v) in the relevant box.

I hereby declare that:

	YES	NO
I am an Architect registered with the Board of Architects, Professional Engineers and Quantity Surveyors	<input type="checkbox"/>	<input type="checkbox"/>
I meet the entire requirement as stated in Article 3 of the ASEAN Mutual Recognition Arrangement (MRA) on Architectural Services	<input type="checkbox"/>	<input type="checkbox"/>
No disciplinary action have been taken against me	<input type="checkbox"/>	<input type="checkbox"/>
I am not a bankrupt	<input type="checkbox"/>	<input type="checkbox"/>

Others:

.....

.....

.....

Yours Sincerely,

.....
(Signature)

Name (As in Passport):
.....

Passport No.: IC No:

Architect Reg. No.:

Date:

ASSESSOR'S REPORT

Date of Assessment:

Candidate's name:

Position of employment: Age:

ASSESSOR'S REPORT

1. DOCUMENTS:

Report (training and experience):

.....
.....
.....

CPD:.....

.....

2. INTERVIEW:

Office Design Experience (amount and quantity):

.....

Site Workshop Experience (amount and quantity):

.....

.....

3. ASSESSOR'S RECOMMENDATION:

Please tick (v) in the box where appropriate.

PASS

FAIL

If fail, candidate's weakness lies in the following:

- Design/Office Experience
- Field Experience
- Others, please specify:

Elaborate on reasons for failure:

.....

.....

.....

.....

Assessors:

(1) Signature :

Name :

(2) Signature :

Name :

MONITORING COMMITTEE SUMMARY OF ASSESSMENT OF APPLICATION FOR ASEAN ARCHITECT REGISTRATION

Name of Applicant:
(As in Passport)

Name of Country of Origin:

Qualification obtained:.....

Qualification's place and date obtained:

Architect Registration No. (HomeCountry):

Architect Registration Date (Home Country):

ASEAN Architect Register:

Certified Compliance with ASEAN Architect Criteria:

Completed an accredited or recognised architectural programme, or assessed recognised equivalent	<input type="checkbox"/>
Been assessed within their own country as eligible for independent practice	<input type="checkbox"/>
Gained a minimum of not less than ten (10) years of continuous architectural practice after graduation, of which at least five (5) years shall be after licensure/registration	<input type="checkbox"/>
Spent at least two years in responsible charge of significant architectural work	<input type="checkbox"/>
Complied with the Continuing Professional Development policy of the Country of Origin at a satisfactory level	<input type="checkbox"/>
Confirmed signature on statement of compliance with codes of ethics	<input type="checkbox"/>

Signed :

Name of Officer Delegated :

ASEAN Architect Monitoring Committee : **BRUNEI DARUSSALAM**
(Name of Country of Origin)

Date :

Brunei Darussalam Board of Architects, Professional Engineers and Quantity Surveyors

Board Management Division Office

Ground Floor (East Wing),

Ministry of Development Building,

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Negara Brunei Darussalam

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Email : [apeqs.sec@mod.gov.bn](mailto:apeqsec@mod.gov.bn)