



لمبائك اركيٲيك جوروترا فرؤفيسيونل دان جورواوكور باهن نكارا بروني دارالسلام
Brunei Darussalam Board of Architects Professional Engineers and Quantity Surveyors

GUIDELINE NO. 21

**ARCHITECTS, PROFESSIONAL ENGINEERS AND QUANTITY SURVEYORS, ORDER 2011
AND
ARCHITECTS, PROFESSIONAL ENGINEERS AND QUANTITY SURVEYORS, RULES 2016**

PART II – SECTION 6 (b)

PROFESSIONAL COMPETENCE EXAMINATION
FOR ENGINEERS

-Supervising Engineer Application Form-

QUALIFICATION AND EXAMINATION COMMITTEE
16th May 2017

Supervising Engineer Application for Initial Professional Development

Please consult BAPEQS Document on "Continuing Professional Development Guidance" before completing this form.

Please note: A Supervising Engineer (SE) shall be in such a position of responsibility as will empower him/her to direct training according to the BAPEQS Training Scheme, and to exercise such supervision as will enable the trainee to take the appropriate Professional Review.

Proposed Supervising Engineer

Professional Institution		Membership no:	
Full Name:			
Title:		Date of Birth:	
Qualifications:			
Organisation:			
Position in organisation:			

Office address:

Organization:			
Address line 1:			
Address line 2:			
City:		Postcode:	
Telephone work		Telephone mobile	
Work email			

Important undertaking to be signed by the applicant

I wish to be registered as a **SE** to be responsible for overseeing and personally monitoring the training of engineers in accordance with the BAPEQS guidelines and requirements. I undertake to inform BAPEQS when I am no longer in a position to discharge these responsibilities.

Signed:		Date:	
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Please include with this Form an up-to-date CV and a copy of your CPD record

Declaration by Director or equivalent

I approve of the above proposal and confirm that we will support the applicant in discharging the duties and responsibilities of an SE, until such time as BAPEQS is notified otherwise.

Signed:		Date:	
Name:		Position:	

Please return your application an up-to-date CV and a copy of your CPD record to BAPEQS office. Email apeqs.sec@mod.gov.bn

BAPEQS OFFICIAL USE ONLY

Recommendation for approval of SE

SE visited and briefed on:			
Recommended / Not Recommended (Delete as appropriate)			
Comments:			
Approved by:			
Signature:		Date:	
Name:			