

APPLICATION FOR MEMBERSHIP

Name of Applicant (Please Print)

Date of Application

INSTRUCTIONS FOR COMPLETING APPLICATION FOR MEMBERSHIP

GENERAL

The “Application for Membership” is used by all bona fide applicants for registration by the Architects’ Association of Prince Edward Island.

The form must be filled out accurately, neatly and completely. Use “N/A” for those sections which do not apply in your situation, and attach additional sheets when necessary to explain complex or unusual situations. (**Do Not** attach a resume in lieu of completing the form.) The form should be typed or neatly printed using black ink so that clear reproductions can be made.

Return one original copy to the Association.

A. REGISTRATION HISTORY

Indicate registration status in all jurisdictions where you are currently or have been previously registered. For each registration, include your registration number and the date you were initially registered. Note any registration not currently in good standing and the reason for it no longer being in good standing. Include foreign registrations and licenses for any other professions held. Attach additional sheets as necessary.

B. EDUCATION HISTORY

Education qualifications must be verified. Please indicate your Canadian Architectural Certification Board (formerly RAIC Certification Board) Number.

List the colleges and universities you have attended. Designate those from which you received your architectural education. Those who have had 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 recognised 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.

C. EXPERIENCE HISTORY

All applicants must provide complete information on all of their employment experience. Accuracy of dates and the types of employment is very important. Employers will be contacted for confirmation to establish the employment record. 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 complete 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 complete 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: Graduate architects applying for registration are required only to list employers. Complete employment history is accepted through the submission of the Canadian Experience Record Book and evidence of approved completion of the three-year work experience requirement.

D. EXAMINATION HISTORY

Indicate the examination(s) you have completed and give the jurisdiction for which you took the exam(s). Indicate if you have successfully completed a treatise or seminar on special subjects e.g., seismic forces, sub-arctic conditions, etc. on the line marked "Other".

E. PROFESSIONAL, PUBLIC AND COMMUNITY SERVICE

List membership in professional, public and community organizations, noting special activities and offices held.

IDENTIFICATION**(Please Type or Print)**NAME IN FULL: _____
(Surname) (First Name) (Initial)RESIDENCE ADDRESS: _____
(Street) (City)

(Province) (Postal Code)PLACE OF BUSINESS: _____
(Firm Name)

(Street) (City, Province) (Postal Code)ADDRESS FOR CORRESPONDENCE: Residence Business

RESIDENCE TELEPHONE: _____ BUSINESS TELEPHONE: _____

DATE OF BIRTH: _____ PLACE: _____ SIN: _____
(Yr/Mo/Day) (City, Country)**A. REGISTRATION HISTORY**

1. Jurisdiction of initial registration: _____

Registration Number: _____ Date Acquired: _____

2. List all other jurisdictions (with registration number and date acquired) in which you currently hold or have previously held a registration to practice architecture:

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 an action pending or threatened? Yes No 6. Have you ever been convicted of an 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

If you have answered "yes" to any of the above questions, provide dates and details of the situation in the space below. Include the result of any appeals. Use a supplementary sheet if necessary.

B. EDUCATION HISTORY

1. Indicate Canadian Architectural Certification Board approval:

Certificate Number: _____ Date: _____

2.	a)	Colleges, Universities, Technical Schools, Syllabus of Studies	Dates of Attendance	Degree Received*	Date Degree Received
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(* if no degree, indicate credit hours earned. Specify semester or quarter system)

b) Other: _____

C. EXPERIENCE HISTORY: Record only experience in architectural work received subsequent to completion of a recognized program of studies in architecture. Record most recent experience first. Include periods of self-employment as well as non-architectural employment. Note: All applicants are to submit a detailed history of work experience.

D. EXAMINATION HISTORY

	Exams Completed	Jurisdiction where taken	Year succeeded
1.	Canadian Architectural Practice Examination		
	● (a) Legal Aspects of Architecture	_____	_____
	● (b) The Regulation of the Architectural Profession	_____	_____
	● (c) Management of the Practice	_____	_____
	● (d) Other (Indicate) _____	_____	_____
2.	NCARB (Architectural Registration Examination)		
	● Pre-design	_____	_____
	● General Structures	_____	_____
	● Lateral Forces	_____	_____
	● Mechanical & Electrical Systems _____	_____	_____
	● Materials & Methods	_____	_____
	● Construction Documents & Services	_____	_____
	● Site Planning	_____	_____
	● Building Planning	_____	_____
	● Building Technology	_____	_____
3.	Oral Examination _____		
4.	Other _____		

If other than above, please state Professional Registration Examination(s) successfully completed. (Submit evidence)_

E. PROFESSIONAL, PUBLIC AND COMMUNITY SERVICE: Give particulars of any further information in regard to experience and qualifications, membership in architectural societies, academic distinctions, community service and such other information that you may consider to be of assistance to the Board of Examiners. __

F. OATH:

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

“Solemnly do I declare that having read and understood the Prince Edward Island Architects Act and its Bylaws , I am eligible for membership. Further do I announce that I will uphold professional aims, and 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 honourable and learned profession.”

G. DECLARATION:

“The applicant acknowledges that the AAPEI 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 AAPEI.

The applicant acknowledges that any statements, papers or documents received by the AAPEI in its investigation may be transmitted by the AAPEI 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 AAPEI to transmit the applicant’s record and all other pertinent information obtained in the course of its investigation to Architectural Registration Boards, Provinces or States or other authorities licensing architects.

In consideration of the services to be rendered by the AAPEI, the applicant hereby releases, discharges and exonerates the AAPEI’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.”

The undersigned, being duly sworn upon oath, deposes and says that he/she is the person making the foregoing statements, and that they are made in good faith and are true in every respect.

COUNTRY OF: _____
Signature of Applicant

JURISDICTION OF: _____
Sworn by the deponent _____
known to me, at _____
on the _____ day of _____ 20 ____
Before me, _____

(Notary or other officer qualified to take oaths) **SEAL**

FOR OFFICE USE ONLY

Date Application Received: _____
Supporting Documents Received:

- Evidence of Registration
- Work History

Date Application Accepted: _____
Registration Number: _____

AAPEI PROFESSIONAL LIABILITY INSURANCE FORM

Professional Liability Insurance in an amount not less than \$250,000.00 limit per claim, and an aggregate limit per year of \$250,000.00 is a mandatory requirement for obtaining a Certificate of Practice from the AAPEI. All Certificate of Practice holders must submit this form. All holders of a Certificate of Practice and all Temporary License holders shall immediately notify the Registrar of the AAPEI if their Professional Liability Insurance is cancelled or is not renewed annually.

name of insured (please print)

name of insurance company

name of insurance broker

insurance policy number

date of expiry

signature of insured (please print)

date