

Architect Application for Registration

Completion of the Internship in Architecture Program (IAP)

Include this page with your application. Retain copies of the application documents for your records.

Date this application was emailed to	ap@aibc.ca:

Checklist:

- · Completed and signed application form.
- · Successful completion of all Internship in Architecture Program requirements, including:
 - ExAC
 - Oral Examination
 - All required **experience hours**, including **940 hours** within the past three years on B.C. projects Refer to Appendix B of the Internship in Architecture Program (IAP) Manual for more information.
 - AIBC Professional Development Courses
 - NOTE: If you have not completed all of the mandatory courses, include the <u>Undertaking and</u> <u>Covenant by Intern Architects AIBC and Broadly Experienced Applicants for Registration as</u> <u>Architect AIBC</u> with your application.

Submission Information:

- 1. Submit your complete application, attachments, and this checklist by email to iap@aibc.ca. Incomplete applications will be destroyed after three months of inactivity.
- 2. Once your application is approved, you will be emailed an invoice with payment instructions. For applicable fees, refer to Schedule B: Fees, found in the AIBC Bylaws.
- **3.** If you wish to register a firm, you may submit the <u>firm application form</u> at the same time as your application for architect registration.
- **4.** After submitting your documents by email, please send the original application form and checklist to the <u>AIBC</u> by Canada Post. The originals do not need to be received before your application is approved.
- **5.** Processing will take up to approximately **five weeks** from the date of receipt of your complete application package by email. Applications are reviewed once a month by the Credentials Committee. The schedule for estimated approval dates can be found on the <u>AIBC website</u>.

Architect Application for Registration

IDENTIFICATION (please type or print)

FULL LEGAL NAME						
FULL LEGAL NAME:	(first name) (middle name)		niddle name)	(last name)		
PREFERRED NAME:						
HOME ADDRESS:						
HOME ADDICESS.	(unit)	(street addre	ess)			
	(city)	(provi	nce)	(postal code)	(count	rv)
BUSINESS ADDRESS:	(oity)	(provi		(postar code)	(oount	• 37
	(firm name))				
	(unit)	(street addre	ess)			
	(city)	(prov	ince)	(postal code)	(count	ry)
PREFERRED MAILING	ADDRESS:	Home	Busii	ness		
PERSONAL PHONE: _			BUSINESS P	HONE:		
PREFERRED PHONE N	UMBER: F	Personal	Busi	ness		
PERSONAL EMAIL:						
BUSINESS EMAIL : _						
PREFERRED EMAIL AD	DRESS: P	ersonal	Busi	ness		
GENDER: Woman	n	Man	Non-Binary	Pre	efer not to Respo	nd
DATE OF BIRTH (MM/D	D/YYYY):					
LANGUAGES: Eng	jlish	French				
Other(s):						

List your Architecture related post-secondary programs. Use supplementary sheet as necessary.

Name of School Credential Received Architectural Tech				Graduation Year	
CACB # (if applicable	e):	NCARB	# (if applicable):		
LICENCE HISTORY					
Jurisdiction of initial	l architect regist	tration (if applicable): _			
Are you applying for	reinstatement v	with the AIBC? Yes	No		
_	_		luding British Columbi hitecture. Use a supple	a, in which you currently mentary sheet as	
Jurisdiction	Licence No.	Date Issued	Date Resigned/Cancelled (if applicable)	Reason for Resignation/Cancellation (if applicable)	

Yes No

- 1. Have you ever been denied registration or a licence by a regulatory organization/licensing authority?
- 2. Have you ever been convicted of a criminal or other such offence that may be relevant to your suitability to practise architecture?
- 3. Have you been convicted of an indictable offence in British Columbia, or an equivalent offence in any other jurisdiction?
- 4. Have you been, or are currently, the subject of any proceeding by a regulator in any jurisdiction (i.e., misrepresentation, illegal practice)?
- 5. Has your registration/licence ever been cancelled, suspended, or revoked?
- 6. Have you resigned your registration with any regulatory organization/licensing authority or allowed your registration/licence to lapse for any reason?
- 7. Was your conduct or competence under review in any of your former jurisdictions of registration or licensing at the time of your resignation or cancellation?
- 8. Have you ever been found guilty, or currently subject to any proceeding, concerning professional misconduct or incompetence?
- 9. Have you been issued a registration/licence in any jurisdiction which is subject to any terms, conditions, or limitations?
- 10. Is there a record of any disciplinary action involving you with any regulatory organization/licensing authority?
- 11. Have you ever been found by a regulatory body, or made admissions, of illegal or unlawful practice of architecture or another profession?

If you have answered 'yes' to any of the above, use a supplementary sheet to provide dates and details.

 I hereby consent and authorize the AIBC to request from other regulatory bodies information and documents that in any way relate to any past, current, or pending investigations or proceedings that may impact my character assessment.

RIGHTS AND RESPONSIBILITIES WHEN APPLYING FOR REGISTRATION

- I am applying for registration under the Professional Governance Act of British Columbia.
- I agree to comply with the *Professional Governance Act*, the AIBC Bylaws, and the Code of Ethics.

- I understand that only a holder of a Certificate of Practice is permitted to offer and/or provide to a
 member of the public a service that is part of the practice of architecture, and should I wish to offer
 such services, I will either apply for a Certificate of Practice or work in/with a firm holding a current
 Certificate of Practice.
- If I am applying under a Mutual Recognition Agreement, I have read and understood the terms and conditions outlining the requirements of the Mutual Recognition Agreement and affirm that I am eligible for registration as an Architect under these requirements.

DECLARATION

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

"Solemnly do I declare that having read and understood the <u>Professional Governance Act</u> and the <u>Bylaws</u> and <u>Code of Ethics and Professional Conduct</u> of the Architectural Institute of British Columbia, and having passed the examinations, I am eligible for registration. Further do I announce that I will uphold professional aims, uphold the art, and the science of architecture, and I will 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, in the public interest."

The facts set out in this 'Application for Registration' are true and correct in every particular. I swear that all statements contained in the application are true. I make this solemn declaration conscientiously believing it to be true and knowing that it is of the same force and effect as if made under oath.

Full Legal Name of Applicant typed or printed:	
Signature of Applicant:	
Declared before me at the City of in the Province/Territory/State	
this,	
Name of Lawyer, Notary Public, or Authorized Individual*:	
Profession/Title of Authorized Individual* (Notary, Judge, Lawyer etc.):	
Signature of Lawyer, Notary Public, or Authorized Individual*:	
Notary Seal (if applicable)	

^{*}Any judge, notary public, justice of the peace, provincial court judge, recorder, mayor, or commissioner authorized to take affidavits to be used either in provincial or federal courts, or any other functionary authorized by law to administer an oath in any matter. Architects are not included as authorized individuals to take affidavits.

COLLECTION NOTICE

The information on this form is collected under the authority of AIBC Bylaws under the Professional Governance Act, S.B.C. 2018, c. 47. The information will be used to process your application and update the AIBC's records on the status of its applicants and Registrants. If you have questions about the collection and use of this information, please contact the AIBC's Registration & Licensing department by phone at 604.683.8588 or by email at registration@aibc.ca. As a public body under the provisions of the Freedom of Information and Protection of Privacy Act, the AIBC provides security and confidentiality of your personal information.