



Architects Accreditation Council of
Australia

Application for Admission

Architectural Practice Examination Parts 1 and 2

Registration Authority:

Board of Architects of Queensland (Telephone: 07 3069 2397)

Address:

Level 3, 87 Wickham Terrace, SPRING HILL
GPO Box 316, BRISBANE QLD 4001

1. Personal Details (please print)

Family name _____

Given names _____

Employer/Company _____

Preferred Postal Address _____

_____ Postcode _____

Telephone: Work _____ Home _____

Facsimile: Work _____ Mobile _____

Email: _____

Date of Birth _____ Place of Birth _____

This information will be kept by the Board of
Architects of Qld and AACA.
Privacy legislation controls use of and access
to this information.

Please provide a
recent passport-
size colour photo.
(A colour copy
is **not** acceptable.)

2. Education

Academic Qualifications or equivalent _____

Institution/Body _____ Date of Advice of Final Results _____

3. Practical Experience

Pre Graduate _____ years and _____ months | Post Graduate _____ years and _____ months

I seek admission to the APE Parts 1 & 2 pursuant to the provisions of the *Procedure for AACA APE Candidates*.

I submit the following required **documents** in the following order (**Originals + 2 photocopies**):

- Application form with **Examination fee \$465.00** (payment to be made payable to the Board of Architects of Qld)
- **Candidate's Checklist** signed by you
- **Certified copy of Degree**, Diploma or equivalent (must be signed by an identifiable Justice of the Peace)
- **Statutory Declaration** attesting to the accuracy of all documents submitted (must be signed by an identifiable JP)
- **Employment Record** (brief list of employers with dates starting with current employer - not curriculum vitae)
- **Statement of Practical Experience** (cross-referenced to the Performance Criteria).

I also submit the **AACA Electronic Logbook** converted to **one only pdf** format less than 1MB on **one CD** labelled with name and date. (Hard copies are not acceptable.)

To be completed if applicable:

I previously applied for admission to the Architectural Practice Examination Parts 1 and 2 in _____ (State/Territory)
in _____ (month/year).

I previously undertook the Architectural Practice Examination Part 2 in _____ (State/Territory) in
_____ (month/year).

DATE / /

SIGNATURE OF APPLICANT _____

FOR OFFICE USE ONLY

Status

☐ Accepted Date / /
☐ Not accepted Date / /

Comments _____

Signed _____ Date / /

CANDIDATE'S CHECKLIST

Please complete with ticks or numbers as required.

CANDIDATE'S NAME:		
Three bundles of the following documents + 1 CD/USB submitted Original, Copy 1 & Copy 2 two-hole punched and fastened with file fasteners in specified order below (No folders, covers or plastic sleeves)		
	Yes	No
Application Form (1 Original + 2 photocopies)		
Photo attached to application form		
Certified copy of Degree/equivalent signed by identifiable JP		
Candidate's Checklist (in Original bundle only)		
Statutory Declaration signed by identifiable JP		
List of Employers (Name & dates only commencing with current)		
Summary CV (maximum one page – exclusive of the word limit for SOPE)		
Statement of Practical Experience (SOPE) cross-referenced to Performance Criteria and with name and registration number of supervising architect on each page. Ensure layout is consistent with requirements of the AACA Procedures for Candidates.		
Invoice with Payment attached (in Original bundle only)	Amt.	Method
<input type="checkbox"/> Electronic Logbook on CD or USB (non-returnable) In one pdf file of less than 1MB on one CD clearly labelled with name and date of submission		

Are at least 3,300 hours logged ranging over all 15 Performance Criteria? ☐ Yes ☐ No

Is there at least one year's experience post academic qualification? ☐ Yes ☐ No

OR are you applying under the NPRA rule? ☐ Yes

Is there at least one year's post-graduate experience in Australia? ☐ Yes ☐ No

At least 40 hours in each of the 15 Performance Criteria? ☐ Yes ☐ No

At least 40 hours **Executive** experience in each of at least **five** of the 15 Performance Criteria? ☐ Yes ☐ No

CANDIDATE'S SIGNATURE :

TAX INVOICE

The Board of Architects of Queensland
ABN 47 081 662 530

AACA APE Parts 1 & 2 Fee

\$465.00

GST Exempt

Enquiries: (07) 3069 2397

PLEASE RETURN THIS SECTION WITH YOUR PAYMENT TO:

The Registrar
Board of Architects of Queensland
GPO Box 316
BRISBANE QLD 4001

By Cheque for \$465.00 made out to The Board of Architects of Queensland ☐

Or

By Credit Card

☐ Visa ☐ Mastercard

Cardholder's Name:

Card No. _ _ _ _ _ _ _ _ _ _

APE Parts 1 & 2 Fee A\$

Expiry Date: _ _ / _ _

Signature:

Office Use only

Name:

Receipt Number:

Address:.....

Receipt Date:

.....

Statutory Declaration

QUEENSLAND
TO WIT

I,

of

in the State of Queensland

do solemnly and sincerely declare that

And I make this solemn declaration conscientiously believing the same to be true, and by virtue of the provisions of the Oaths Act 1867.

Signature of declarant/deponent

Taken and declared before me at

this day of

A Justice of the
Peace/Commissioner for
Declarations.