

APPLICATION FOR SPECIAL LICENCE

Name of Applicant (Please Print)

Date of Application

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. I am currently a member in good standing of _____ and enclose a duly signed certificate of good standing, and undertake to advise AAPEI of any change of status in my membership.

2. Jurisdiction of initial registration: _____

Registration Number: _____ Date Acquired: _____

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

4. Have you ever been denied registration? Yes No

5. Has your registration ever been suspended or revoked? Yes No

6. Have you surrendered or allowed your registration to lapse in any jurisdiction due to an action pending or threatened? Yes No

7. Have you ever been convicted of an offence which may be relevant to your suitability to practise architecture? Yes No

8. 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

(*If no degree, indicate credit hours earned. Specify semester or quarter system).

b) Other: _____

C. 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 _____		

D. PROJECT INFORMATION:

I hereby make application to the Council of AAPEI for a Special licence so that I may undertake the following work on the following project:

- (a) Location _____
- (b) Description of Project _____
- (c) Client _____
- (d) Approximate cost _____
- (e) Date of Architectural Commission _____
- (f) Anticipated Date of Substantial Completion _____

I shall be employed with or acting as a Sub-consultant to _____ who is a co-applicant herein and is a registered or reciprocal member of AAPEI.

Responsibilities of Applicant: _____

Responsibilities of AAPEI Co-Applicant: _____

E. 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 a special licence. 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."

F. 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 _____ 19 _____

Before me, _____

(Notary or other officer qualified to take oaths)

SEAL

G. REGISTERED (OR RECIPROCAL) ARCHITECTS ENDORSEMENT

I, _____, am a registered or reciprocal member of the Architects' Association of Prince Edward Island and hereby certify that I am a party to an agreement with _____ to act as Sub-consultant for the services set out in the summary contained in Section D of this application, and I make application for the issuing of a licence as requested.

Signature _____ Date _____

FOR OFFICE USE ONLY

Date Application Received: _____

Supporting Documents Received:

Evidence of Registration

Date Application Accepted: _____

Licence 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