



Application for Admission

Architects Registration Board of Victoria

Architects Accreditation Council of Australia Incorporated

Architectural Practice Examination Parts 1 and 2

Registration Authority: Architects Registration Board of Victoria Level 7, 372 Albert Street East Melbourne VIC 3002

This information will be kept by your State/Territory Board and AACA. Privacy legislation controls use of and access to this information.

TAX INVOICE ABN: 31 592 419 109

1. Personal Details (please print)

Family name, Given names, Full postal address, Postcode

Please attach personal photograph DO NOT PIN OR STAPLE

Telephone Work Home Date of Birth Facsimile Work Home Country of Birth

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 hereby make application to take the Architectural Practice Examination Parts 1 and 2 to be conducted in (State/Territory) in (month and year)

I seek admission pursuant to the provisions of NCSA 01/GC and submit the following required documents:

- Log Book Statement of Practical Experience Degree, Diploma or equivalent (original to be sighted) Examination fee (payment to be made payable to the Architects Registration Board of Victoria (ARBV))

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

Office use only Status Accepted Not accepted Date Date Signed Comments Parts 1 & 2 Fee: \$350 (GST Free) Method of Payment: Cash Cheque Credit Card Receipt provided: Yes No (Credit card payment only available at the Office)