

### Use of this Form

This form is to be used by people who do not possess an architectural qualification, have completed the National Program of Assessment (NPrA) conducted by the Architects Accreditation Council of Australia (AACA), and are seeking a decision from the Architects Board of WA (Board) regarding acceptance of their standard of practice.

Before completing this form, please read **Information Sheet 10 – Becoming a Registered Architect in Western Australia** which can be downloaded from the Board's website ([www.architectsboard.org.au](http://www.architectsboard.org.au)).

### Acceptance of Standard of Practice

The Board's preferred method of establishing if an applicant who does not have a professional qualification has attained an acceptable standard in the practice of architecture is through the NPrA process which is conducted by the AACA.

After completion of the NPrA process, when the advice of AACA is that an applicant has fulfilled the requirements of the NPrA, the Board will regard the applicant as having attained an acceptable standard in relation to the practice of architecture (ie: as having satisfied the requirements of Regulation 12(a)(iii) of the *Architects Regulations 2005*).

### Fees

There is no fee for the Board's decision regarding an applicant's standard of practice.

### Privacy laws and use of this information

Information requested by the Board is strictly confidential. Only that information which is available for publication in the register may be provided to other registration authorities and to the public.

### Further Information

Please contact the Board if you require further information:

T. (08) 9287 9920  
E. [info@architectsboard.org.au](mailto:info@architectsboard.org.au)  
[architectsboard.org.au](http://architectsboard.org.au)

### Personal Details

Family Name \_\_\_\_\_

Given Names \_\_\_\_\_

Preferred Name (Known as) \_\_\_\_\_

Date of Birth \_\_\_\_\_

Gender  Female  Male

Address \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Postcode \_\_\_\_\_

Work Phone \_\_\_\_\_

Mobile \_\_\_\_\_

Home Phone \_\_\_\_\_

Email \_\_\_\_\_

Date of Notification of successful completion of NPrA \_\_\_\_\_



## Supporting Documentation Required

Please attach the following document to this application form:

Certified\* copy of AACA NPrA outcome letter.

\* Documents can be certified by a Justice of the Peace, architect, doctor, lawyer, pharmacist, bank manager or equivalent.

## Declaration by Applicant

I,

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Full Name of Applicant

declare that this application is true and correct and I know that it is an offence to make a declaration knowing that it is false or misleading in a material particular.

I authorise the Board to make any enquiries necessary to assist in the assessment of my standard of practice and to use any information supplied in this application for that purpose.

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Signature

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Date

## Submission of Application

This application form and supporting documents can be provided to the Board as original documents or via email.