

# Architectural Practice Examination

## Parts 1 & 2

# Form.12

Architects Board of Western Australia

6 February 2019

This information will be kept by the Architects Board of WA (Board) and the Architects Accreditation Council of Australia (ACA). Privacy legislation controls the use, and access to, this information.

### Personal Details

Family Name:	
Given Names:	
Address: Postcode:	
Email:	Tel (W):
Mobile:	Tel (H):
Date of Birth:	Country of Birth:

Attach  
Passport-sized  
Photo

### Qualification (Please complete the following, where applicable)

Qualification	Institution	Year
<input type="checkbox"/> M Arch <input type="checkbox"/> B Arch		
<input type="checkbox"/> Equivalence of Qualification	Board	
<input type="checkbox"/> Standard of Practice	Board	
<input type="checkbox"/> Review of Academic/Graduate Equivalence (RAE/RGE)	ACA	
<input type="checkbox"/> Overseas Qualification Assessment (OQA)	ACA	
<input type="checkbox"/> National Program of Assessment (NPrA)	ACA	

### Practical Experience

Pre-Graduate (Years/Months):	Post-Graduate (Years/Months): Post-Graduate in Aust (Years/Months):
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### Declarations

I hereby make application to take the Architectural Practice Examination (APE) Parts 1 & 2 to be conducted in Western Australia in \_\_\_\_\_ (month and year).

I seek admission pursuant to the provisions of the ACA's "APE Procedure for Candidates" publication, submit the required documents as per the Board's Logbook Submission Instructions Checklist and enclose the exam fee of \$363.25 (GST free).

I previously applied for admission to the APE Parts 1 & 2 in \_\_\_\_\_ (State/Territory) in \_\_\_\_\_ (month/year).

I previously undertook the APE Part 2 in \_\_\_\_\_ (State/Territory) in \_\_\_\_\_ (month/year).

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

Date Payment Received: \_\_\_\_\_ Receipt Number: \_\_\_\_\_



Architects Board  
of Western Australia

33 Broadway  
Nedlands WA 6009

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

## Payment

Fees can be paid using one of the following methods:

### Cheque

Send cheque or money order made payable to the Architects Board of WA.

### Credit Card

Visa     Mastercard

\_\_\_\_\_  
Card Number

\_\_\_\_\_  
Expiry Date

\_\_\_\_\_  
Name on Card

**\$363.25**  
Amount Payable

\_\_\_\_\_  
Cardholder's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Cardholder's Daytime Phone Number

### In Person

Cash, credit card and eftpos payments can be made at the Board's office between 9am and 4pm, Monday to Friday.

