



Application for Admission

Architects Accreditation Council of Australia Incorporated

Architectural Practice Examination
Parts 1 and 2

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: 46 346 672 655



16 Challis Street,
Dame Pattie Menzies House,
2nd Floor South Building,
DICKSON ACT 2602

1. Personal Details (please print)

Family name
Given names
Full postal address
Postcode
E-mail



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

Overseas Experience:

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 Board of the ACT)

Examination Fee: \$350 (GST Free) Method of Payment: Cash Cheque Credit Card
Receipt provided: Yes No

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
Comments
Signed