



# Application for Registration as an Architect

**APPLICANT TYPE:**  
[check one]

First-time Canadian  
Applicant (IAP)

Canadian Architect  
via reciprocity (CALA)

United States Architect  
via recognition (NCARB)

Broadly Experienced  
Foreign Architect (BEFA)

## 1. PERSONAL INFORMATION

**SALUTATION [check one]:**  Ms.  Mr.  Mx.  Other: \_\_\_\_\_

\_\_\_\_\_  
Last Name First & Middle Names

\_\_\_\_\_  
Preferred Name(s) Post-nominals & Designations

\_\_\_\_\_  
Home Address

\_\_\_\_\_  
City Province/Territory Postal Code

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

\_\_\_\_\_  
Personal Email

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

**LANGUAGE(S):**  English  French  Other: \_\_\_\_\_

## 2. EMPLOYMENT INFORMATION

\_\_\_\_\_  
Firm/Business Name

\_\_\_\_\_  
Address Line 1

\_\_\_\_\_  
Address Line 2

\_\_\_\_\_  
City Province/Territory Postal Code

\_\_\_\_\_  
Business Phone Business Fax

\_\_\_\_\_  
Business Email

**PRACTICE STATUS [select one]**

- Sole Practitioner  Employee  
 Partner  Director (Corporation)

## 3. ACADEMIC QUALIFICATIONS & CACB CERTIFICATION [NOT REQUIRED FOR CALA APPLICANTS]

DEGREE (OR EQUIVALENT)	SCHOOL	COUNTRY	GRADUATION DATE
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Have your academic qualifications been reviewed by the Canadian Architectural Certification Board?  YES  NO

CACB NUMBER: \_\_\_\_\_ CERTIFICATION DATE: \_\_\_\_\_

**[FOR UNITED STATES APPLICANTS ONLY]**

Have your academic qualifications been reviewed by the National Council of Architectural Registration Boards?  YES  NO

NCARB NUMBER: \_\_\_\_\_ CERTIFICATION DATE: \_\_\_\_\_

## 4. BEFA CERTIFICATION & EXPERIENCE [FOR BEFA APPLICANTS ONLY]

- SELECT ONE:**
- I am a Canadian citizen.
  - I am a permanent resident of Canada.
  - I currently hold a valid Canadian work visa.

BEFA CERTIFICATION NUMBER: \_\_\_\_\_ YEAR GRANTED: \_\_\_\_\_

Have you completed the BEFA program through the Canadian Architectural Certification Board, including 940 hours of Canadian experience under the personal supervision and direction of an Architect licensed to engage in the practice of architecture in the Northwest Territories?  YES  NO

NAME OF SUPERVISING ARCHITECT: \_\_\_\_\_

Was this experience was completed within three years prior to the date of my assessment interview?  YES  NO

DATE OF ASSESSMENT INTERVIEW: \_\_\_\_\_

Did you write the Examination for Architects in Canada (ExAC) as part of the BEFA program?  YES  NO

SECTIONS COMPLETED:  Section One  Section Two  Section Three  Section Four

Did you complete additional requirements in the BEFA program?  YES  NO

IF YES, PLEASE LIST: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**5. LICENCING HISTORY** [NOT REQUIRED FOR FIRST-TIME APPLICANTS]

JURISDICTION OF FIRST LICENCE \_\_\_\_\_ LICENCE NUMBER \_\_\_\_\_ DATE OF ISSUE \_\_\_\_\_

**ALL JURISDICTIONS IN WHICH YOU CURRENTLY HOLD A LICENCE:**

JURISDICTION	LICENCE NUMBER	DATE LICENCE ISSUED
_____	_____	_____
_____	_____	_____
_____	_____	_____

**ALL JURISDICTIONS IN WHICH YOU PREVIOUSLY HELD A LICENCE AND REASON YOU NO LONGER HOLD A LICENCE:**

JURISDICTION	LICENCE NUMBER	DATE LICENCE ISSUED	DATE	REASON
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Have you ever been denied a Licence?  YES  NO

Has your Licence ever been suspended or revoked?  YES  NO

Has your Licence ever been cancelled?  YES  NO

Have you resigned your membership in any organization of architects that licenses or authorizes the practice of architecture in a jurisdiction other than Ontario or allowed your Licence to lapse for any reason?  YES  NO

Have you ever been convicted of an offence which may be relevant to your suitability to practise architecture?  YES  NO

Have you ever been found guilty of professional misconduct or incompetence?  YES  NO

Is your conduct or competence presently the subject of proceedings?  YES  NO

Was your conduct or competence under review at the time of your resignation or cancellation?  YES  NO

**IF YOU HAVE ANSWERED "YES" TO ANY OF THE QUESTIONS ABOVE, USE A SUPPLEMENTARY SHEET TO PROVIDE DATES AND DETAILS.**

**6. EXAMINATION HISTORY [REQUIRED BY FIRST-TIME APPLICANTS ONLY]**

Enter the completion dates for all applicable examinations:

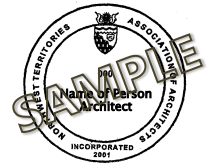
	Date Completed		Date Completed
<b>ExAC - Examination for Architects in Canada</b>		<b>ARE 3.1 - Architect Registration Examination</b>	
Section One	_____	<ul style="list-style-type: none"> <li>• Pre-Design</li> <li>• Site Planning</li> <li>• Building Design, Materials &amp; Methods</li> <li>• Building Planning</li> <li>• General Structures</li> <li>• Lateral Forces</li> <li>• Mechanical and Electrical Systems</li> <li>• Construction Documents &amp; Services or</li> <li>• Building Technology</li> </ul>	_____
<ul style="list-style-type: none"> <li>• Programming</li> <li>• Site and Environmental Analysis</li> <li>• Cost Management</li> <li>• Coordinating Engineering Systems</li> <li>• Schematic Design</li> <li>• Design Development</li> </ul>			
Section Two	_____	<b>ARE 4.0 - Architect Registration Examination</b>	_____
<ul style="list-style-type: none"> <li>• National Building Code (2005 Edition)</li> </ul>		<ul style="list-style-type: none"> <li>• Programming, Planning &amp; Practice</li> <li>• Site Planning &amp; Design</li> <li>• Building Design &amp; Construction Systems</li> <li>• Schematic Design</li> <li>• Structural Systems</li> <li>• Building Systems</li> <li>• Construction Documents &amp; Services</li> </ul>	
Section Three	_____		
<ul style="list-style-type: none"> <li>• Final Project</li> </ul>		<b>Other Professional Registration Examinations</b>	_____
Section Four	_____		_____
<ul style="list-style-type: none"> <li>• Bidding and Contract Negotiations</li> <li>• Construction Phase – Office</li> <li>• Construction Phase – Site</li> <li>• Project Management</li> </ul>			_____
<b>Provincial Professional Practice Examination</b>	_____		
<b>Quebec Four-Part Written Examination</b>	_____		
<b>Oral Examination</b>	_____		

**7. CONFIRMATION OF STAMP NAME PLATE**

Confirm your full name as it should appear on your NWTAA-issued Architect Stamp:

\_\_\_\_\_

Full Name (ie, John Smith or John P. Smith or J. Person Smith)



**8. MANDATORY CONTINUING EDUCATION**

All registered architects of the Northwest Territories Association of Architects must comply with the Mandatory Continuing Education requirement of 70 hours per two-year reporting period, starting July 1<sup>st</sup> of every even-numbered year.

For more information, please refer to NWTAA’s Practice Bulletin 3.

**9. REQUIRED DOCUMENTATION**

I have enclosed the following with this application:

IAP	CALA	NCARB	BEFA	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Payment of application fee
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Payment of annual registration fee (contact NWTAA for pro-rated fee information)
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	A completed <i>Complaint Declaration</i> form
<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	Copy of CACB Certificate / BEFA certification
<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	Copies of all degrees & equivalent certificates noted in Part 3
<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	Copy of current resume/curriculum vitae
			<input type="checkbox"/>	Proof of Canadian citizenship, certificate of permanent residency, OR copy of valid work visa
				<b>AND</b>
	<input type="checkbox"/>	<input type="checkbox"/>		I have requested a Certificate of Licence/Registration from my home jurisdiction

**10. DECLARATION**

I do solemnly declare that

- I am applying for a licence under the Architects Act of the Northwest Territories,
- I agree to comply with the Architects Act, the Regulation and Bylaws, all as amended,
- I understand that only a holder of a Certificate of Practice is permitted to offer and/or provide to a member of the public a service that is part of the practice of architecture, and
- the facts set out in this application for licence are true and correct in every particular.

I make this solemn declaration conscientiously believing it to be true and knowing that it is of the same force and effect as if made under oath.

In addition, I hereby consent and authorize \_\_\_\_\_ [NAME OF REGULATOR OF HOME JURISDICTION] to release and disclose, to the jurisdiction to which I am making this application for licence, all information and documents that in any way relate to any past, current or pending investigations or proceedings involving my conduct or competence.

**I WILL NOTIFY THE NWTAA IMMEDIATELY**, in writing, of any changes that occur to the information I have supplied on this application.

**IF SIGNED WITHIN CANADA**

Dated at \_\_\_\_\_ on the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

\_\_\_\_\_  
SIGNATURE

**IF SIGNED OUTSIDE OF CANADA**

**DECLARED BEFORE ME** at \_\_\_\_\_ )  
 \_\_\_\_\_ )  
 \_\_\_\_\_ )  
 \_\_\_\_\_ )  
 this \_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_. )  
 \_\_\_\_\_ )  
 \_\_\_\_\_ )  
 \_\_\_\_\_ )  
 COMMISSIONER FOR OATHS OR NOTARY PUBLIC )

\_\_\_\_\_  
SIGNATURE OF APPLICANT

**MUST BE EXECUTED UNDER SEAL**