

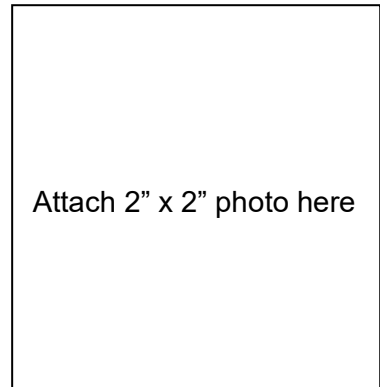
# FORMS FOR APPLICATION FOR REGISTRATION AS AN APEC ARCHITECT

## Home Economy: REPUBLIC OF THE PHILIPPINES (PH)

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The spaces provided in the application forms and the tables may not be adequate. Applicant may reproduce these forms and tables, or may obtain a copy of the CD containing these forms and tables from:

The Secretariat  
 United Architects of the Philippines  
 5F, No. 53 Scout Rallos, Diliman  
 Quezon City, Philippines



### 1. PERSONAL DETAILS (Please use BLOCK LETTERS)

Surname:

Given Name:

Middle Name:

Title:  Prof  Dr  Mr  Mrs  Ms  Others .....

Gender:  Male  Female

Civil Status:  Single  Married  Others.....

Home Address  
 .....  
 .....  
 .....

Business Address  
 .....  
 .....  
 .....

Postal Code: ..... Country .....

Postal Code: ..... Country .....

(Please tick if preferred contact address)

(Please tick if preferred contact address)

Tel No: (.....).....Fax No. (.....) .....

Tel No: (.....).....Fax No (.....).....

E-mail .....

E-mail .....

**2. EDUCATIONAL QUALIFICATIONS**

Academic Degrees	University or College	Year Graduated
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Baccalaureate:

.....	.....	.....
.....	.....	.....
.....	.....	.....
.....	.....	.....

Post-Baccalaureate:

.....	.....	.....
.....	.....	.....
.....	.....	.....
.....	.....	.....

*(Submit 3 photocopies each of the diploma certificates for the degrees obtained as enumerated above.)*

**3. POST BACCALAUREATE DIVERSIFIED TRAINING**

Please prepare a short statement of your post-baccalaureate diversified training as required before Licensure Examination, mentioning names of firms in which training was undertaken, and the assignments given as a trainee. (Optional requirement: Nominee may reinforce the hereunder statements with signature of Mentor or Principal of the architectural office or firm.)

Firm No.1

.....

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.....

(Optional) Signature of Mentor/Principal : \_\_\_\_\_

Name in Print of Mentor/Principal : \_\_\_\_\_

Firm No. 2

.....

.....

.....

.....

(Optional) Signature of Mentor/Principal : \_\_\_\_\_

Name in Print of Mentor/Principal : \_\_\_\_\_

Firm No. 3:

.....  
.....  
.....  
.....

(Optional) Signature of Mentor/Principal : \_\_\_\_\_

Name in Print of Mentor/Principal : \_\_\_\_\_

Firm No. 4:

.....  
.....  
.....  
.....

(Optional) Signature of Mentor/Principal : \_\_\_\_\_

Name in Print of Mentor/Principal : \_\_\_\_\_

Firm No. 5:

.....  
.....  
.....  
.....

(Optional) Signature of Mentor/Principal : \_\_\_\_\_

Name in Print of Mentor/Principal : \_\_\_\_\_

Firm No. 6:

.....  
.....  
.....  
.....

(Optional) Signature of Mentor/Principal : \_\_\_\_\_

Name in Print of Mentor/Principal : \_\_\_\_\_

**4. LICENSURE AND REGISTRATION**

***In the Philippines:***

PRC Registration Number : .....  
Registration Date : .....  
PRC Identification Card Validity : .....  
United Architects of the Philippines –  
IAPOA Number : .....

*(Submit 3 photocopies each of the following):*

- a. PRC Registration Certificate*
- b. Valid PRC Identification Card*
- c. IAPOA Certificate*

***In Other Countries:***

Country .....  
Registration No.....  
Validity .....

Country .....  
Registration No.....  
Validity .....

Country .....  
Registration No.....  
Validity .....

*(Please submit 3 photocopies each of the certificates, identification cards or other documents attesting to the above registration in a host country other than the Philippines.)*

## 5. PROFESSIONAL PRACTICE and EXPERIENCE

Applicants for APEC Architect registration shall complete the following record of relevant experiences in the Tables attached. The definition of some terms that will help the applicant sort out and organize his experiences are included below.

TABLE 1: PRACTICE DURING THE IMMEDIATE PAST THREE (3) YEARS FROM DATE OF APPLICATION, AS AN ARCHITECT WITH SOLE RESPONSIBILITY FOR BUILDINGS OF MODERATE COMPLEXITY.

TABLE 2: PRACTICE DURING THE IMMEDIATE PAST THREE (3) YEARS FROM THE DATE OF APPLICATION, AS AN ARCHITECT WORKING IN COLLABORATION WITH OTHER ARCHITECTS, IN CHARGE OF AND PROFESSIONALLY RESPONSIBLE FOR A SIGNIFICANT ASPECT, BE IT DESIGN, DOCUMENTATION AND/OR CONTRACT ADMINISTRATION, OF COMPLEX BUILDINGS.

TABLE 3: PRACTICE DURING THE IMMEDIATE PAST THREE (3) YEARS FROM DATE OF APPLICATION AS AN ARCHITECT WITH SOLE RESPONSIBILITY FOR COMPLEX BUILDINGS.

TABLE 4: GENERAL EXPERIENCE GAINED IN PROFESSIONAL PRACTICE AS AN ARCHITECT (A minimum additional four (4)-year experience is required. However, applicant may include experience beyond these four (4) years.)

### Definition of Terms:

1. Sole responsibility means that applicant is lead professional and is legally liable and professionally responsible for the whole project of moderate complexity.
2. In charge of and professionally responsible for a significant aspect of the project means that applicant is working under a liable architect, is collaborating with peers, and is in charge of only a part, but a significant part, of the complex project.
3. Buildings of moderate complexity, as defined in these documents, are those belonging to Groups 1, 2 and 4 of the Schedule of Minimum Basic Fee as stipulated in UAP Document 202 (Design Services) of the Standards of Professional Practice, Architects National Code:
  - a. *Group 1 – Structures of simplest utilization, character, which are without complication of design or detail and require a minimum of finish, structural, mechanical and electrical design. Types of facilities are as enumerated therein:*

<i>Armories</i>	<i>Parking Structures</i>
<i>Bakeries</i>	<i>Printing Plants</i>
<i>Farm Structures</i>	<i>Public Markets</i>
<i>Freight Facilities</i>	<i>Service Garages</i>
<i>Hangars</i>	<i>Simple Loft-type Structures</i>
<i>Industrial Buildings</i>	<i>Warehouses</i>
<i>Manufacturing/Industrial Plans</i>	
<i>Packaging and Processing Plants</i>	
  - b. *Group 2 – Structures of moderate complexity of design requiring a moderate amount of structural, mechanical and electrical design and research. Types of facilities are as enumerated therein*

<i>Art Galleries</i>	<i>Nursing Homes</i>
<i>Banks, Exchange and other</i>	<i>Office Buildings</i>
<i>Financial Institutions</i>	<i>Park, Playground and Open-Air</i>
<i>Bowling Alleys</i>	<i>Recreational Facilities</i>
<i>Churches and Religious Facilities</i>	<i>Police Stations</i>
<i>City Halls</i>	<i>Post Offices</i>

College Buildings	Private Clubs
Convents, Monasteries and Seminaries	Publishing Plants
Correctional and Detention Institutions	Race Tracks
Court Houses	Restaurants
Dormitories	Retail Stores
Exhibition Halls and Display Structures	Schools
Fire Stations	Shopping Centers
Laundries & Cleaning Facilities	Specialty Shops
Libraries	Supermarkets
Motels and Apartels	Welfare Buildings
Multi-storey Apartments	

c. Group 4 – Residences (Single detached or duplex), small apartment houses and town houses.

4. Complex Buildings, as defined in these documents are those belonging to Groups 3 and 5 of the Schedule of Minimum Basic Fee as stipulated in UAP Document 202 (Design Services) of the Standard of Professional Practice, Architects National Code:

a. Group 3 – Structures of exceptional character and complexity of design or requiring comparatively large amounts of structural, mechanical and electrical design and research. Types of facilities are as enumerated therein:

Aquariums	Laboratories
Atomic Facilities	Marinas
Auditoriums	Medical Office Facilities & Clinics
Airports	Mental Institutions
Breweries	Mortuaries
Cold Storage Facilities	Observatories
Communication Buildings	Public Health Centers
Convention Halls	Research Facilities
Gymnasiums	Stadiums
Hospitals and Medical Buildings	Theaters and Similar Facilities
Hotels	Veterinary Hospitals

b. Group 5 – Monumental buildings and other facilities requiring consummate design skill and much precise detailing. Types of facilities are as enumerated therein:

Exposition and Fair Buildings	Specialized Decorative Buildings
Mausoleums, Memorials, Monuments	Structures of similar nature or use
Museums.	

5. Buildings under Group 6: Repetitive Construction of Buildings, will follow the same classification as Groups 1, 2, 3, and 5 above.

6. On the other hand, buildings under Group 7: Housing Projects, will follow the same classification as Group 4 above.

## 6. CONTINUING PROFESSIONAL DEVELOPMENT

Applicants for APEC Architect registration shall complete the following groups of record of Continuing Professional Development, as applicable:

TABLE 5A: RECORD OF CONTINUING PROFESSIONAL DEVELOPMENT: SEMINARS AND CONVENTIONS  
AS PARTICIPANT

TABLE 5B: RECORD OF CONTINUING PROFESSIONAL DEVELOPMENT: SEMINARS AND CONVENTIONS  
AS RESOURCE SPEAKER / PAPER PRESENTER

TABLE 5C: RECORD OF CONTINUING PROFESSIONAL DEVELOPMENT: SEMINARS AND CONVENTIONS  
AS PANELIST / REACTOR

TABLE 5D: RECORD OF CONTINUING PROFESSIONAL DEVELOPMENT: SEMINARS AND CONVENTIONS  
AS FACILITATOR / MODERATOR

TABLE 6: RECORD OF CONTINUING PROFESSIONAL DEVELOPMENT: ACADEMIC PREPARATION

TABLE 7A: RECORD OF CONTINUING PROFESSIONAL DEVELOPMENT: SELF-DIRECTED LEARNING  
PACKAGE USING MODULES

TABLE 7B: RECORD OF CONTINUING PROFESSIONAL DEVELOPMENT: SELF-DIRECTED LEARNING  
PACKAGE USING TECHNICAL PAPERS/PROFESSIONAL JOURNAL ARTICLES

TABLE 8A: RECORD OF CONTINUING PROFESSIONAL DEVELOPMENT: AUTHORSHIP THRU  
RESEARCH WORKS

TABLE 8B: RECORD OF CONTINUING PROFESSIONAL DEVELOPMENT: AUTHORSHIP THRU  
A BOOK / MONOGRAM

TABLE 8C: RECORD OF CONTINUING PROFESSIONAL DEVELOPMENT: AUTHORSHIP AS EDITOR  
OF A BOOK

TABLE 8D: RECORD OF CONTINUING PROFESSIONAL DEVELOPMENT: AUTHORSHIP AS EDITOR  
OF A PROFESSIONAL JOURNAL

TABLE 8E: RECORD OF CONTINUING PROFESSIONAL DEVELOPMENT: AUTHORSHIP THRU  
PEER REVIEW

TABLE 9: RECORD OF CONTINUING PROFESSIONAL DEVELOPMENT: STUDY / OBSERVATION

## **7. RESEARCH AND DEVELOPMENT**

**(Related to architecture and building technologies)**

Applicants for APEC Architect registration shall complete the following tables to document their research and development accomplishments related to architecture and building technologies, as applicable:

TABLE 10: RECORD OF COPYRIGHTS

TABLE 11: RECORD OF PATENTS

## **8. SERVICE TO THE PROFESSION**

Applicants for APEC Architect registration shall complete the following tables to document their service to such institutions/organizations as the Board of Architecture, the Integrated and Accredited Professional Organization of Architects, and other professional organizations of architects.)

Please list positions held per term of office.

TABLE 12A: SERVICE TO THE PROFESSION: As member of the Board of Architecture, Professional Regulation Commission

TABLE 12B: SERVICE TO THE PROFESSION: As National Executive Officer of UAP-IAPOA and/or equivalent positions in other architectural professional organizations

TABLE 12C: SERVICE TO THE PROFESSION: As District Director/Executive Director of UAP-IAPOA and/or equivalent positions in other architectural professional organizations

TABLE 12D: SERVICE TO THE PROFESSION: As National Standing Committee Chair of the UAP-IAPOA And/or equivalent positions in other architectural professional organizations

TABLE 12E: SERVICE TO THE PROFESSION: As Chapter President of the UAP-IAPOA and/or equivalent Positions in other architectural professional organizations

TABLE 12F: SERVICE TO THE PROFESSION: As Office Bearer of international organizations of architects (UIA, ARCASIA, APEC ARCHITECT COUNCIL)

TABLE 12G: SERVICE TO THE PROFESSION: As Member of international organizations of architects (UIA, ARCASIA, APEC ARCHITECT COUNCIL)



**TABLE 1:** PRACTICE DURING THE IMMEDIATE PAST THREE (3) YEARS FROM DATE OF APPLICATION, AS AN ARCHITECT WITH SOLE RESPONSIBILITY FOR BUILDINGS OF MODERATE COMPLEXITY.

Please list projects in reverse date order, starting with the most recent period first.

<b>Project Name and Location:</b>
<b>Project Date:</b> From:(m / y) To:(m / y)
<b>Name of Firm or Office:</b>
<b>Role of Applicant:</b> (Principal, Sole Practitioner, Others):
<b>Brief Description of Project:</b> (Size, site, concept, occupancy, technologies, etc.)
<b>Project Name and Location:</b>
<b>Project Date:</b> From:(m / y) To:(m / y)
<b>Name of Firm or Office:</b>
<b>Role of Applicant:</b> (Principal, Sole Practitioner, Others):
<b>Brief Description of Project:</b> (Size, site, concept, occupancy, technologies, etc.)

**TABLE 2:** PRACTICE DURING THE IMMEDIATE PAST THREE (3) YEARS FROM DATE OF APPLICATION, AS AN ARCHITECT IN COLLABORATION WITH OTHER ARCHITECTS, IN CHARGE OF AND PROFESSIONALLY RESPONSIBLE FOR A SIGNIFICANT ASPECT OF COMPLEX BUILDINGS. SIGNIFICANT INVOLVEMENT MAY BE IN ONE OR MORE OF THE FOLLOWING:

- 1) PRE-DESIGN, 2) DESIGN, 3) INTERIOR DESIGN, LANDSCAPE DESIGN, PHYSICAL PLANNING, 4) CONSTRUCTION, 5) POST-CONSTRUCTION, OR 6) PROJECT MANAGEMENT

Please list projects in reverse date order, starting with the most recent period first.

<b>Project Name and Location:</b>
<b>Project Date:</b> From: (m / y) To: (m / y)
<b>Name of Firm or Office:</b>
<b>Role and Responsibilities:</b> (Please describe briefly the role you played in the project and your responsibilities)
<b>Brief Description of Project:</b> (Size, site, concept, occupancy, technologies)
<hr/> <hr/>
<b>Project Name and Location:</b>
<b>Project Date:</b> From: (m / y) To: (m / y)
<b>Name of Firm or Office:</b>
<b>Role and Responsibilities:</b> (Please describe briefly the role you played in the project and your responsibilities)
<b>Brief Description of Project:</b> (Size, site, concept, occupancy, technologies)

**TABLE 3:** PRACTICE DURING THE IMMEDIATE PAST THREE (3) YEARS FROM DATE OF APPLICATION, AS AN ARCHITECT WITH SOLE RESPONSIBILITY FOR COMPLEX BUILDINGS.

Please list projects in reverse date order, starting with the most recent period first.

<b>Project Name and Location:</b>
<b>Project Date:</b> From:(m / y) To:(m / y)
<b>Name of Firm or Office:</b>
<b>Role of Applicant:</b> (Principal, Sole Practitioner, Others):
<b>Brief Description of Project:</b> (Size, site, concept, occupancy, technologies, etc.)
<b>Project Name and Location:</b>
<b>Project Date:</b> From:(m / y) To:(m / y)
<b>Name of Firm or Office:</b>
<b>Role of Applicant:</b> (Principal, Sole Practitioner, Others):
<b>Brief Description of Project:</b> (Size, site, concept, occupancy, technologies, etc.)

**TABLE 4: GENERAL EXPERIENCE GAINED IN PROFESSIONAL PRACTICE AS AN ARCHITECT (A MINIMUM ADDITIONAL FOUR (4) YEARS OF EXPERIENCE IS REQUIRED.)**

If applicant has been practicing for more than four (4) years precedent to the immediate past three (3) years described above, applicant may list down all other relevant projects experienced during these years of professional practice.

Applicants shall record professional experiences gained in any or all of the following scopes of service per project:

- A. Preliminary Studies
- B. Design
- C. Contract Documentation
- D. Construction Supervision / Project Administration

Please list projects in reverse date order, starting with the most recent period first.

<b>Project Name and Location:</b>			
<b>Project Date:</b> From: (m / y) To: (m / y)			
<b>Name of Firm or Office:</b>			
<b>Role of Applicant:</b> (Principal, Associate, Junior Associate, Job Captain, Project Coordinator, etc.)			
<b>Brief Description of Project:</b> (Please tick scope of service delivered or performed)			
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Preliminary Studies	Design	Contract Documentation	Construction Supervision/ Project Administration
<b>Project Name and Location:</b>			
<b>Project Date:</b> From: (m / y) To: (m / y)			
<b>Name of Firm or Office:</b>			
<b>Role of Applicant:</b> (Principal, Associate, Junior Associate, Job Captain, Project Coordinator, etc.)			
<b>Brief Description of Project:</b> (Please tick scope of service delivered or performed)			
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Preliminary Studies	Design	Contract Documentation	Construction Supervision/ Project Administration

**TABLE 5A:** RECORD OF CONTINUING PROFESSIONAL DEVELOPMENT: SEMINARS AND CONVENTIONS

**A. As Participant:**

List seminars/conventions/conferences attended.

Please list in reverse date order, starting with the most recent period first.

<b>Seminar / Convention / Conference:</b>
<b>Title or Theme of Seminar / Convention / Conference:</b>
<b>Date/Venue:</b>
<b>Number of Contact Hours:</b>
<b>Name of Speakers/Resource Persons:</b>
<b>Brief Description of Contents of Seminar/Convention/Conference:</b> (In approximately 100 words)
<b>Supporting Documents:</b> Submit Certificate of Attendance, Registration Receipt or any proof of attendance.
<b>Seminar / Convention / Conference:</b>
<b>Title or Theme of Seminar / Convention / Conference:</b>
<b>Date/Venue:</b>
<b>Number of Contact Hours:</b>
<b>Name of Speakers/Resource Persons:</b>
<b>Brief Description of Contents of Seminar/Convention/Conference:</b> (In approximately 100 words)
<b>Supporting Documents:</b> Submit Certificate of Attendance, Registration Receipt or any proof of attendance.

**TABLE 5B: RECORD OF CONTINUING PROFESSIONAL DEVELOPMENT: SEMINARS AND CONVENTIONS**

B. As Resource Speaker / Paper Presenter:

List Lectures delivered or Papers Presented.

Please list in reverse date order, starting with the most recent period first.

<b>Title of Lecture or Paper:</b>
<b>Forum Where Delivered/Presented:</b> (Seminar, Convention, Conference)
<b>Date/Venue:</b>
<b>Number of Contact Hours:</b>
<b>Type of Attendees:</b> (Architects, Engineers, Other Professionals)
<b>Abstract of Lecture or Paper:</b> (in approximately 100 words):
<b>Supporting Documents:</b> Submit photocopy of Certificate/Plaque of Appreciation, or Program, or Invitation.
<b>Title of Lecture or Paper:</b>
<b>Forum Where Delivered/Presented:</b> (Seminar, Convention, Conference)
<b>Date/Venue:</b>
<b>Number of Contact Hours:</b>
<b>Type of Attendees:</b> (Architects, Engineers, Other Professionals)
<b>Abstract of Lecture or Paper:</b> (in approximately 100 words):
<b>Supporting Documents:</b> Submit photocopy of Certificate/Plaque of Appreciation, or Program, or Invitation.

**TABLE 5C: RECORD OF CONTINUING PROFESSIONAL DEVELOPMENT: SEMINARS AND CONVENTIONS**

**C. As Panelist / Reactor:**

List Lectures / Seminars in which applicant has performed this role.

Please list in reverse date order, starting with the most recent period first.)

<b>Title and Author of Lecture or Paper:</b>
<b>Forum Where Delivered/Presented:</b> (Seminar, Convention, Conference)
<b>Date/Venue:</b>
<b>Number of Contact Hours:</b>
<b>Type of Attendees:</b> (Architects, Engineers, Other Professionals)
<b>Summary of Comments/Reaction to Paper:</b> (in approximately 100 words):
<b>Supporting Documents:</b> Submit certification from proponent organization, or Invitation, or Program.
<b>Title and Author of Lecture or Paper:</b>
<b>Forum Where Delivered/Presented:</b> (Seminar, Convention, Conference)
<b>Date/Venue:</b>
<b>Number of Contact Hours:</b>
<b>Type of Attendees:</b> (Architects, Engineers, Other Professionals)
<b>Summary of Comments/Reaction to Paper:</b> (in approximately 100 words):
<b>Supporting Documents:</b> Submit certification from proponent organization, or Invitation, or Program.

**TABLE 5D: RECORD OF CONTINUING PROFESSIONAL DEVELOPMENT: SEMINARS AND CONVENTIONS**

**D. As Facilitator / Moderator:**

List Seminars, Lecture or Paper Presentation in which applicant has performed this role

Please list in reverse date order, starting with the most recent period first.

<b>Title of Seminar / Lecture / Paper Presentation and Name of Resource Person / Lecturer / Presenter:</b>
<b>Forum Where Delivered/Presented:</b> (Name of Seminar / Convention / Conference)
<b>Date/Venue:</b>
<b>Number of Contact Hours:</b>
<b>Type of Attendees:</b> (Architects, Engineers, Other Professionals)
<b>Brief Description of Discussion Facilitated or Moderated:</b> (in approximately 100 words):
<b>Supporting Documents:</b> Submit certification from proponent organization, or Program.
<b>Title of Seminar / Lecture / Paper Presentation and Name of Resource Person / Lecturer / Presenter:</b>
<b>Forum Where Delivered/Presented:</b> (Name of Seminar / Convention / Conference)
<b>Date/Venue:</b>
<b>Number of Contact Hours:</b>
<b>Type of Attendees:</b> (Architects, Engineers, Other Professionals)
<b>Brief Description of Discussion Facilitated or Moderated:</b> (in approximately 100 words):
<b>Supporting Documents:</b> Submit certification from proponent organization, or Program.



**TABLE 6:** RECORD OF CONTINUING PROFESSIONAL DEVELOPMENT: ACADEMIC PREPARATION. Degrees obtained thru Residential Mode (taken within the university campus) or Distance Mode (taken thru distance learning modules with student not in campus), are acceptable.

Please list in reverse date order, starting with the most recent period first.

<b>Master's Degree:</b> (Please submit copy of diploma and transcript of records)	
1. Degree	: .....
2. Mode	: .....
3. University/School	: .....
4. Year Graduated	: .....
<b>Master's Degree:</b> (Please submit copy of diploma and transcript of records)	
1. Degree	: .....
2. Mode	: .....
3. University/School	: .....
4. Year Graduated	: .....
<b>Master's Degree:</b> (Please submit copy of diploma and transcript of records)	
1. Degree	: .....
2. Mode	: .....
3. University/School	: .....
4. Year Graduated	: .....
<b>Doctoral Degree:</b> (Please submit copy of diploma and transcript of records)	
1. Degree	: .....
2. Mode	: .....
3. University/School	: .....
4. Year Graduated	: .....
<b>Doctoral Degree:</b> (Please submit copy of diploma and transcript of records)	
1. Degree	: .....
2. Mode	: .....
3. University/School	: .....
4. Year Graduated	: .....

**TABLE 7A: RECORD OF CONTINUING PROFESSIONAL DEVELOPMENT: SELF-DIRECTED LEARNING PACKAGE.**

A. Module is a self-directed learning package which uses course manuals or accredited learning modules, which include self-instructional materials or programs which may be in the form of printed manuals, audio and video cassette tapes, films, computer-assisted learning, study kits, learning aids.

List Modules completed.

Please list in reverse date order, starting with the most recent period first.)

<b>Title of Module:</b>
<b>Author / Writer:</b>
<b>Description of Content:</b> (approximately 100 words)
<b>Evaluation:</b> Applicant will submit a copy of the test questionnaire or evaluation questionnaire, duly accomplished by the applicant. Copy of the result of the evaluation will also be submitted.
<b>Title of Module:</b>
<b>Author / Writer:</b>
<b>Description of Content:</b> (approximately 100 words)
<b>Evaluation:</b> Applicant will submit a copy of the test questionnaire or evaluation questionnaire, duly accomplished by the applicant. Copy of the result of the evaluation will also be submitted.

**TABLE 7B: RECORD OF CONTINUING PROFESSIONAL DEVELOPMENT: SELF-DIRECTED LEARNING PACKAGE.**

B. Technical Paper / Professional Journal Article is a self-directed learning package which uses a technical paper or an article written by others published in a professional journal as a learning material. Writers or authors of these papers or articles are requested to formulate questionnaires which are given to readers to answer. The answers are returned to the authors or to the editors of the journal for evaluation and are given points for continuing professional development.

List technical papers and professional journal articles read under this learning package.  
Please list in reverse date order, starting with the most recent period first.

<b>Title of Paper or Article:</b>
<b>Author / Writer:</b>
<b>Description of Content:</b> (approximately 100 words)
<b>Evaluation:</b> Applicant will submit a copy of the test questionnaire or evaluation questionnaire, duly accomplished by the applicant. Copy of the result of the evaluation and continuing professional development points given will also be submitted.
<b>Title of Paper or Article:</b>
<b>Author / Writer:</b>
<b>Description of Content:</b> (approximately 100 words)
<b>Evaluation:</b> Applicant will submit a copy of the test questionnaire or evaluation questionnaire, duly accomplished by the applicant. Copy of the result of the evaluation will also be submitted.

**TABLE 8A:** RECORD OF CONTINUING PROFESSIONAL DEVELOPMENT: AUTHORSHIP

A. Research Work

List research works undertaken.

Please list in reverse date order, starting with the most recent period first.

<b>Title of Research Work:</b>
<b>Inclusive Dates of Research Work:</b>
<b>Source of Funding:</b> (Grant, professorial chair, etc.)
<b>Journal in which research work was published:</b> (State whether refereed or not)
<b>Forum in which research work was presented:</b>
<b>Brief Description of Research Work:</b> (in approximately 100 words)
<b>Title of Research Work:</b>
<b>Inclusive Dates of Research Work:</b>
<b>Source of Funding:</b> (Grant, professorial chair, etc.)
<b>Journal in which research work was published:</b> (State whether refereed or not)
<b>Forum in which research work was presented:</b>
<b>Brief Description of Research Work:</b> (in approximately 100 words)

**TABLE 8B:** RECORD OF CONTINUING PROFESSIONAL DEVELOPMENT: AUTHORSHIP

B. Book / Monogram

List books / monograms written.

Please list in reverse date order, starting with the most recent period first.

<b>Title of Book / Monogram:</b>
<b>Co-Authors, if any:</b>
<b>Publisher:</b>
<b>Copyright:</b> Submit proof of copyright
<b>Brief Summary of Book:</b> (in approximately 100 words):

<b>Title of Book / Monogram:</b>
<b>Co-Authors, if any:</b>
<b>Publisher:</b>
<b>Copyright:</b> Submit proof of copyright
<b>Brief Summary of Book:</b> (in approximately 100 words):



**TABLE 8D: RECORD OF CONTINUING PROFESSIONAL DEVELOPMENT: AUTHORSHIP**

**D. Editor of Book:**

List books edited.

Please list in reverse date order, starting with the most recent period first.

<b>Title of Book:</b>
<b>Co-authors, co-writers:</b>
<b>Publisher:</b>
<b>Copyright:</b> (Submit proof of copyright)
<b>Brief Summary of Contents of Book:</b> (in approximately 100 words)
<hr/> <hr/>
<b>Title of Book:</b>
<b>Co-authors, co-writers:</b>
<b>Publisher:</b>
<b>Copyright:</b> (Submit proof of copyright)
<b>Brief Summary of Contents of Book:</b> (in approximately 100 words)

**TABLE 8E: RECORD OF CONTINUING PROFESSIONAL DEVELOPMENT: AUTHORSHIP**

E. Editor of Professional Journal:

List professional journals edited.

Please list in reverse date order, starting with the most recent period first.

<b>Name of Journal:</b>
<b>Date of First Issue:</b>
<b>Frequency of Publication:</b>
<b>Readership:</b>
Submit a copy of the latest published Journal
<b>Name of Journal:</b>
<b>Date of First Issue:</b>
<b>Frequency of Publication:</b>
<b>Readership:</b>
Submit a copy of the latest published Journal
<b>Name of Journal:</b>
<b>Date of First Issue:</b>
<b>Frequency of Publication:</b>
<b>Readership:</b>
Submit a copy of the latest published Journal
<b>Name of Journal:</b>
<b>Date of First Issue:</b>
<b>Frequency of Publication:</b>
<b>Readership:</b>
Submit a copy of the latest published Journal





**TABLE 9:** RECORD OF CONTINUING PROFESSIONAL DEVELOPMENT: STUDY / OBSERVATION

List all study / observation tours.

Please list in reverse date order, starting with the most recent period first.

<b>Date:</b>
<b>City / Country:</b>
<b>Specific Places Visited:</b>
<b>Subject of Inquiry or Interest:</b>
<b>Proof of Visit:</b> Submit Official Itinerary, or Annotated Pictures or any proof of study / observation undertaken
<b>Date:</b>
<b>City / Country:</b>
<b>Specific Places Visited:</b>
<b>Subject of Inquiry or Interest:</b>
<b>Proof of Visit:</b> Submit Official Itinerary, or Annotated Pictures or any proof of study / observation undertaken
<b>Date:</b>
<b>City / Country:</b>
<b>Specific Places Visited:</b>
<b>Subject of Inquiry or Interest:</b>
<b>Proof of Visit:</b> Submit Official Itinerary, or Annotated Pictures or any proof of study / observation undertaken
<b>Date:</b>
<b>City / Country:</b>
<b>Specific Places Visited:</b>
<b>Subject of Inquiry or Interest:</b>
<b>Proof of Visit:</b> Submit Official Itinerary, or Annotated Pictures or any proof of study / observation undertaken

**TABLE 10: RESEARCH AND DEVELOPMENT UNDERTAKEN: COPYRIGHTS OBTAINED**

List all copyrights obtained in research and development work related to architecture and building technologies.

Please list in reverse date order, starting with the most recent period first.

<b>Copyright No.</b>
<b>Title:</b>
<b>Description:</b>
<b>Copyright No.</b>
<b>Title:</b>
<b>Description:</b>
<b>Copyright No.</b>
<b>Title:</b>
<b>Description:</b>
<b>Copyright No.</b>
<b>Title:</b>
<b>Description:</b>

**TABLE 11: RESEARCH AND DEVELOPMENT UNDERTAKEN: PATENTS UBTAINED**

List all copyrights obtained in research and development work related to architecture and building technologies.

Please list in reverse date order, starting with the most recent period first.

<b>Patent No.</b>
<b>Title:</b>
<b>Description:</b>
<b>Patent No.</b>
<b>Title:</b>
<b>Description:</b>
<b>Patent No.</b>
<b>Title:</b>
<b>Description:</b>
<b>Patent No.</b>
<b>Title:</b>
<b>Description:</b>

**SERVICE TO THE PROFESSION**

Applicants for APEC Architect registration shall complete the following tables to document their service to such institutions/organizations as the Board of Architecture, the Integrated and Accredited Professional Organization of Architects, and other professional organizations of architects.)

Please list in reverse date order, starting with the most recent period first.

**TABLE 12A: SERVICE TO THE PROFESSION:**

As Member of the Board of Architecture, Professional Regulation Commission

Inclusive Dates	Position / Designation
From: To :	
From: To :	
From: To :	
From: To :	

**TABLE 12B: SERVICE TO THE PROFESSION:**

As National Executive Office of UAP-IAPOA and/or equivalent positions in other architectural professional organizations

Inclusive Dates	Position / Designation
From: To :	
From: To :	
From: To :	
From: To :	

**TABLE 12C: SERVICE TO THE PROFESSION**

As District Director / Executive Director of UAP-IAPOA and/or equivalent positions in other architectural professional organizations

Inclusive Dates	Position / Designation
From: To :	
From: To :	
From: To :	
From: To :	

**TABLE 12D: SERVICE TO THE PROFESSION**

As National Standing Committee Chair of the UAP-IAPOA and/or equivalent positions in other architectural professional organizations

Inclusive Dates	Position / Designation
From: To :	
From: To :	
From: To :	
From: To :	

**TABLE 12E: SERVICE TO THE PROFESSION**

As Chapter President of the UAP-IAPOA and/or equivalent positions in other architectural professional organizations

Inclusive Dates	Position / Designation
From: To :	
From: To :	
From: To :	
From: To :	

**TABLE 12F: SERVICE TO THE PROFESSION:**

As Office Bearer of international organizations of architects (UIA, ARCASIA, APEC ARCHITECT COUNCIL)

Inclusive Dates	Position / Designation
From: To :	
From: To :	
From: To :	
From: To :	

**TABLE 12G: SERVICE TO THE PROFESSION**

As Member of international organizations of architects (UIA, ARCASIA, APEC ARCHITECT COUNCIL)

Inclusive Dates	Position / Designation
From: To :	
From: To :	
From: To :	
From: To :	

Date:

**The Monitoring Committee Philippine Section**

APEC Architect Register  
5F, No. 53 Scout Rallos  
Diliman, Quezon City  
Philippines

Gentlemen/Ladies,

I have the honor to apply for assessment for registration as an APEC Architect. Enclosed please find the following:

1. 3-copies of 2" x 2" photographs
2. Duly accomplished Forms for Application for Registration as an APEC Architect
3. Photocopies of documents and other submittals required in the Forms for Application
4. Detailed Curriculum Vitae indicating my employment history, experiences, awards and achievements, involvement in the UAP-IAPOA, and civic involvement
5. Certified True Copy of my IAPOA Certificate
6. Certification of Authenticity of Information and Documents
7. NBI Clearance

I understand that I will pay the following non-refundable fees:

US\$50.00 for application fee

US\$200.00 for processing, should my application is  
endorsed by the Monitoring Committee Philippine Section  
to the Central Council

and the amount of US\$250.00 as registration fee, should the Central Council accepts and approves my application for registration as APEC Architect.

I hope you find this Binder of information and data on myself in order.

Very truly yours,

---

Applicant's Signature and Printed Name

## CERTIFICATION OF AUTHENTICITY OF INFORMATION AND DOCUMENTS

This is to certify that all the information contained in this Application for Registration as an APEC Architect and all documents I am submitting as required in this Application are true, correct and authentic to the best of my knowledge. If they are found and proven otherwise, I fully understand that I will lose my opportunity to be assessed and to be registered as an APEC Architect.

Done this \_\_\_ day of \_\_\_\_\_, in the year \_\_\_\_\_, in the City/Municipality of \_\_\_\_\_, Province of \_\_\_\_\_.

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

Printed Name of Applicant: \_\_\_\_\_

Date: \_\_\_\_\_

## ACKNOWLEDGEMENT

REPUBLIC OF THE PHILIPPINES)  
CITY OF \_\_\_\_\_) S.S.

BEFORE ME, a Notary Public, for and in the City of \_\_\_\_\_, Philippines, personally appeared \_\_\_\_\_, with Community Tax Certificate No. \_\_\_\_\_ issued on \_\_\_\_\_ at \_\_\_\_\_, known to me and to me known to be the same person who executed the foregoing application forms and certifications and who acknowledged to me that the same is his/her free and voluntary act and deed.

This instrument consists of \_\_\_\_\_ pages, including this page whereon the acknowledgement appears.

WITNESS MY HAND AND SEAL this \_\_\_\_\_ day of \_\_\_\_\_, in the year \_\_\_\_\_ in the City/Municipality of \_\_\_\_\_.

Notary Public

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