**MEMBERSHIP APPLICATION FORM** (for Individuals)

*Please print and use Black Indelible Ink in filling out this application*

<table>
<thead>
<tr>
<th>Title (Dr/ Mrs / Mr / Other) :</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Surname:</td>
<td></td>
</tr>
<tr>
<td>Other Names:</td>
<td></td>
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<tr>
<td>Postal Address:</td>
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<tr>
<td>Residential Address:</td>
<td></td>
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<tr>
<td>Date of Birth:</td>
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<tr>
<td>Nationality:</td>
<td></td>
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<tr>
<td>ID / Passport No:</td>
<td></td>
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<tr>
<td>Gender:</td>
<td></td>
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<tr>
<td>Name and Address of employer:</td>
<td></td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>Position:</th>
<th>Date of First Employment:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Work Tel. No:</td>
<td>Fax No:</td>
</tr>
<tr>
<td>Mobile No:</td>
<td></td>
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<tr>
<td>Email Address:</td>
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</tbody>
</table>

Unless otherwise requested - correspondence from AAB will be sent to Postal Addresses.

**Type of Membership Applied for:** - *(please tick relevant box - see annexure)*

- Full Member (Architect) [ ]
- Associate Member (Candidate Architect) [ ]
- Architectural Technologist Member [ ]
- Architectural Draftsperson Member [ ]
- Candidate Architectural Technologist [ ]
- Candidate Architectural Draftsperson [ ]
- Student Member [ ]

(Application Ver. 02/2018)
MEMBERSHIP APPLICATION FORM (for individuals continued)

University / College attended (please provide dates):

Title of Course attended:

Academic Qualifications (degrees or diplomas - please provide dates):

Professional Qualifications: (Membership of Institute / Registration - provide dates):

Practical Experience:

Previous Employers:

Name / Address / Dates:

What Periods Have You Worked Professionally in Botswana (State Dates):

The Committee may, if necessary, seek further information to determine the admissibility of the practical experience stated.

Are you a shareholder or director or a partner in a practice operating as a limited liability, partnership, sole proprietorship or closed close corporation or other?

YES  NO
MEMBERSHIP APPLICATION FORM (for individuals continued)

This Application is Proposed by:

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

Signed:……………………………Date:……………………….AAB Membership No………………….

This Application is Seconded by:

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

Signed:……………………………Date:……………………….AAB Membership No………………….

DECLARATION:
I declare that I have read the Constitution of the Architect’s Association of Botswana. I undertake to be bound by it and by any Regulations issued by the Association in accordance with the said Constitution.

Enclosed are:
A: Remittance  F: Certified Proof of Identity
B: Associate – Letter from Employer  G: Certified copies of Qualifications
C: Candidate Technologist – Letter from Employer  H: Students – Details of Course
D: Candidate Draftsperson – Letter from Employer  I: Proof of ARC or similar Registration
E: Proof of Residence in Botswana (Utility Bill or other proof)

Signed: .........................................................Date:.................................
Applicant

Sworn Before Me at:.......................................on...........................................

Commissioner of Oaths.................................................................
Signature and Stamp
ARCHITECTS ASSOCIATION OF BOTSWANA

MEMBERSHIP APPLICATION FORM

FOR OFFICIAL USE:

Date Received ........................................ Remittance Date ........................................
Sub-Com Decision ........................................ Reg. No: ........................................
ExCo Ratification ........................................ Date of Registration: ........................................
Applicant Informed ........................................
Remarks: .................................................................................................................................

NOTES ON APPLICATION FOR MEMBERSHIP: (Rev 2018)

1. Please complete the Application Form in full.
2. Ordinarily, proposer and seconder should be full members of the Association.
3. Remittance must accompany the Application Form:
4. Cheques should be made payable to A.A.B.
5. Proof of payment to be submitted in cases where payment are made through electronic funds transfers.

<table>
<thead>
<tr>
<th>Category of Membership</th>
<th>Joining Fee</th>
<th>Annual Subscription</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Full Member</td>
<td>P200</td>
<td>P500</td>
<td>P700</td>
</tr>
<tr>
<td>Associate Member</td>
<td>P200</td>
<td>P400</td>
<td>P600</td>
</tr>
<tr>
<td>Architectural Technologist</td>
<td>P100</td>
<td>P300</td>
<td>P500</td>
</tr>
<tr>
<td>Architectural Draftsperson</td>
<td>P100</td>
<td>P300</td>
<td>P400</td>
</tr>
<tr>
<td>Student Member</td>
<td>P30</td>
<td>P70</td>
<td>P100</td>
</tr>
<tr>
<td>Candidate Architectural Technologist</td>
<td>P100</td>
<td>P200</td>
<td>P300</td>
</tr>
<tr>
<td>Candidate Architectural Draftsperson</td>
<td>P50</td>
<td>P70</td>
<td>P120</td>
</tr>
</tbody>
</table>

6. Certified copies of your Degree(s)/Diploma(s)/Institute(s) Membership must be attached with this application.
7. Qualifications not printed in either English or Setswana must be accompanied by a certified translation. A copy of a statement (preferably from the Ministry of Education or the Architects Registration body in the country of obtaining such qualification) setting out the rights derived from such a qualification and whether its holder qualifies for registration, would be advantageous.
8. Applicants for full Membership should:
   • be in possession of a professional degree in architecture, following full time study of a minimum of 5 Years
ARCHITECTS ASSOCIATION OF BOTSWANA

MEMBERSHIP APPLICATION FORM

- be registered with the Architects Registration Council of Botswana or similar registration bodies.

9. Applicants for Associate Membership should:
   - be in possession of a professional degree in architecture, following full time study of a minimum of 5 Years
   - be eligible with Architects Registration Council after the prescribed period. An Associate Member may apply for full membership upon his / her registration with the Architects’ Registration Council of similar recognized regulatory body.

10. Applicants for Architectural Technologist Membership should:
    - be in possession of a degree or diploma in architecture, architectural or construction technology following full time study of a minimum of 3 (Three) Years
    - be registered with Architects Registration Council.

11. Applicants for Architectural Draftsperson Membership should:
    - be in possession of a certificate in architectural or building technology and draftsmanship following full time study of a minimum of 2 (Two) Years
    - be registered with Architects Registration Council.

12. Applications for “Associate”, candidate “technologists” and candidate “draftspersons” membership should enclose a letter from their employer confirming that they are in full time or part time employment.

13. Applications for student membership should enclose details on the course they are studying: start date, likely completion date, the name of the course and the name the institute/university.