



ARCHITECTURAL INSTITUTE OF BRITISH COLUMBIA

ARCHITECTURE CENTRE
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E-MAIL aibc@aibc.ca
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Dear Architect,

Re: Architect Reference requested

The Architectural Institute of British Columbia has received an Application for Membership from the applicant whose name appears on the reverse side of this letter. The requested reference is a prerequisite to AIBC registration.

One of the means of presenting acceptable credentials for registration is by obtaining evaluation of the applicant's professional competence from architects who know and are familiar with the applicant's work.

Please fill out that part of the form below the heavy line with sincere and conscientious consideration of the need for objective appraisal of the applicant's ability and/or potential to practice architecture. The applicant has been instructed to supply the information above the heavy line.

Please complete, return the form (original) and retain a copy for your records.

Your early response to this request will aid greatly in expediting the processing of this application. Thank you for your cooperation.

Yours truly,

Jerome Marburg LL.B. MBA
Director of Registration and Licensing
General Counsel

APPLICANT: PLEASE COMPLETE THE FIRST 8 QUESTIONS AND SEND TO REFERENCE FOR COMPLETION OF LETTERED (A-L) ITEMS.

ARCHITECT'S REFERENCE

Please type or print

1. APPLICANT'S NAME: _____

2. NAME & CURRENT ADDRESS OF REFERENCE: _____

3. HAVE YOU AND THE REFERENCE SOURCE ATTENDED ARCHITECTURAL SCHOOL TOGETHER? Yes No

IF YES, GIVE DATES: _____ NAME OF SCHOOL: _____

4. HAVE YOU BEEN EMPLOYED IN THE SAME FIRM? Yes No

IF YES, PLEASE SUPPLY THE FOLLOWING INFORMATION:

	5. First employment	6. Subsequent Employment
Dates: From – To		
Name of Firm or Employer		
City, Province, State		
Applicant's Position		
Reference's Position		

7. IF ANSWERS TO ITEMS 3 AND 4 ABOVE ARE "NO", HOW IS THE REFERENCE KNOWN TO YOU? _____

8. SIGNED: _____ 9. DATE: _____

A. IS THE ABOVE INFORMATION CORRECT AS STATED? Yes No

(If no, please explain.) _____

B. TO THE BEST OF YOUR KNOWLEDGE HAS THE APPLICANT EVER PRACTISED ARCHITECTURE AS A PRINCIPAL?

Yes No

IF YES, FOR APPROXIMATELY HOW LONG? _____

FIRM NAME, LOCATION AND OTHER INFORMATION: _____

C. Please indicate to your knowledge, the applicant's ability to practise architecture by placing "x" in the appropriate spaces below. If "unsatisfactory" box is checked for "technical competence" or "professional conduct", please submit a letter of explanation with this form.

WE ASK YOU, AS THE REFERENCE ARCHITECT, TO SUPPLY THE FOLLOWING INFORMATION:

	EXCELLENT	SATISFACTORY	MARGINAL	UNSATISFACTORY	NOT QUALIFIED TO ANSWER
D. TECHNICAL COMPETENCE					
E. PROFESSIONAL CONDUCT					

F. NAME: _____

G. JURISDICTION OF FIRST ARCHITECTURAL REGISTRATION: _____

H. YEAR OF REGISTRATION: _____

I. NAME OF CURRENT FIRM: _____

J. POSITION IN CURRENT FIRM: _____

K. SIGNATURE: _____

L. DATE: _____

NOTE: PLEASE COMPLETE EACH NUMBERED OR LETTERED ITEM. INCOMPLETE FORMS WILL BE RETURNED. THANK YOU FOR YOUR ASSISTANCE IN THIS MATTER.