Name of Applicant (please print)		
Date of Application		

#### INSTRUCTIONS FOR COMPLETING APPLICATION

- APPLICATION APPROVAL: Please allow four to eight weeks for processing your application from the date
  of receipt of the completed application and all required documentation. An incomplete application will be
  held for up to six to eight weeks and then returned or shredded.
- 2. **PROOF OF DATE OF BIRTH**: Proof of date of birth is required. Photocopies of birth certificate, passport or driver's licence are accepted.
- 3. **COMPLETION OF APPLICATION:** All Sections of the application are to be completed and should be <u>typed</u> or <u>printed</u> clearly and couriered to the SAA. An application received via email will not be accepted. Fees must be submitted with the application.
- 4. VERIFICATION OF ITEMS SUBMITTED: All documentation submitted will be verified.
- 5. **REGISTRATION/LICENCE HISTORY:** Indicate Registration/Licence status in all jurisdictions where a Registration/Licence is <u>currently</u> held or was <u>previously</u> held. Identify any Registration/Licence not currently in good standing and give the particulars. Include foreign memberships. Attach supplementary sheets if necessary.
- 6. **REGISTRATION TERM**: January 1 to December 31, annually. The member shall annually pay the fees of the association by the <u>1st day of February</u> or will be automatically <u>struck</u> from the register for non-payment of fees. Registration must be maintained through the expiration of the construction warranty period.
- 7. **CONFIRMATION OF REGISTRATION/LICENCE**: Please have your resident association complete and forward to the SAA a Confirmation of Registration/Licence. Processing of the Application for Registration will only proceed after receipt of the completed and certified form directly from the Licensing Authority where the applicant is currently registered/licenced.
- 8. **DECEMBER APPLICATIONS:** Applications received after November 30 will not be finalized in that calendar year (unless otherwise requested) and must include the appropriate fees for the following year. Applicants should contact the SAA after November 30 for fee information.
- 9. APPLICATION FOR SEAL: Please review the practice bulletin related to seal posted on the SAA website.
- 10. **DISPLAY OF CERTIFICTE**: SAA Registered Members shall keep his/her certificate prominently displayed in his/her place of business.
- 11. **CONTINUING EDUCATION:** The SAA has a <u>mandatory</u> Continuing Education program and detailed information can be found on the SAA's website (<u>www.saskarchitects.com</u>).
- 12. **FEES:** Full payment of fees must accompany this application, in Canadian Funds only. Please refer to the Application Fees document posted on the SAA website.

Please Note: Any former member must enclose any fees, levies and/or assessments that are in arrears prior to consideration of the application form.

#### **IMPORTANT**

Upon SAA Council approval, you will become a Registered Member of the Saskatchewan Association of Architects (SAA).

In order to <u>offer or provide architectural services</u> in Saskatchewan (as defined by *The Architects Act, 1996*) to the public, **an individual must be employed by a holder of a Licence to Practice with the SAA.** A Licence to Practice application should be submitted together with the application for Registered Member. If you are joining a firm holding a current Certificate of Practice, the firm is required to file a Change Form to add you to its Licence. If you are applying for registration and not associated with a Licence to Practice, then you must complete and submit the **Declaration: Non-Practicing Registered Architect** form included in this document. You will also be required to submit this declaration annually, by the 1<sup>st</sup> day of February, along with your membership renewal fees.

As defined in *The Architects Act, 1996 2 (q)*, "practice of architecture" or "architecture" means:

- (i) preparing or providing, for hire, gain or hope of reward a design to govern the construction of a building that has as its principal purpose human habitation or occupany; or
- (ii) examining a building that has as its principal purpose human habitation or occupancy to determine whether the construction is in general conformity with the design governing the construction of the building, and reporting on the construction of the building.

#### Protection of title

22(1) No person other than a member shall use the title "Registered Architect" or "Architect", the abbreviation "S.A.A.", or any word, title or designation, abbreviated or otherwise, to imply that the person is a member.

The <u>provision of architectural services</u>, which includes activities such as the preparation of drawings and completion of feasibility studies, <u>prior to the issuance of a Registration and Certificate of Practice</u> may be prejudicial to the granting of a Licence to Practice.

You are advised to notify the SAA <u>in writing in advance of</u> being considered for a commission in Saskatchewan. You must also promise to comply with the requirements for registration and licensing immediately upon obtaining the commission. This request/notification of SAA Council avoids the perception that you are trying to practise architecture without a Licence and Certificate of Practice in Saskatchewan.

## RECIPROCITY AGREEMENT for Architects Licensed in Canada

The following is a summary of the requirements as set out in the Reciprocity Agreement signed by the Canadian Architectural Licensing Authorities which took effect January 1, 2010.

#### Eligibility

- 1. The Canadian Architectural Licensing Authorities agree to license as an Architect, in their respective province or territory, any Architect holding such a licence in another province or territory, who meets the other conditions contained in this Agreement.
- 2. To qualify under this Agreement, the Architect must be in good standing in a Canadian province or territory.

#### **Conditions**

- 3. To obtain a licence as an Architect in another jurisdiction in Canada under the terms of this Agreement, the Architect must:
  - a) complete and submit the required Application for Licence for Architects Licensed in Canada
  - b) provide information regarding any record of disciplinary action, if applicable;
  - c) have sufficient knowledge of laws and regulations governing the profession of Architect in the host province or territory and complete the declaration;
  - d) pay the required fees;
  - e) conform, where applicable, with other requirements established by the laws of the province or territory to which an application is being made.



### A. IDENTIFICATION

1.	1. Name in Full: Surname					Midd	Middle Name(s)		
	Please check one	☐ Miss	☐ Mrs.	□ Ms.	☐ Mr.				
	Name as it should ap on the Certificate:	=							
2.	Residence Address:								
		Street				Apt. No	D.		
		City		Province/St	ate/Territory	Countr	y Postal/Zip Code		
3.	Place of Business:	Firm Name							
		Timitvamo							
		Street				Suite N	lo.		
		City		State		Country	Zip Code		
4.	(a) Address for Corre (The selected address v				siness [ ]				
5.	Residence Tel: (	)		Bus	siness Tel: (	)			
9.	E-mail:								
10.	Date of Birth:	Date of Birth: (Month/Day/Year) Please attach copyof proof.							
11.	School of Architecture	e:							
12.	2. Degree/Diploma Received Date Degree/Diploma Received								

B. LICENCE HISTORY (Use supplementary sheets if necessary.)								
1.	Jurisdiction in which first	:Licence/Registratio	nissued:					
Juri	sdiction	3		Licence/Member Date		Date	Licence/Membership issued	
2. Juri	List all juris dictions in which you <b>currently</b> hold a Licence/Registra     Juris diction					Licence/Membership issued		
3.	List all juris dictions in wh Licence/Registration in th		neld a Licence/Regist	ratio	n and provide the reaso	n you n	o longer hold a	
Jurisdiction Licence/Member Date Date Resig Number Licence/Membership Issued			Date Resigned/Cano	elled	Reason Resigned	/Cancelled		
4.	4. Have you ever been denied a Licence/Registration? Yes ☐ No ☐							
5.	(a) Has your Licence/Re	gistration ever been	suspended or revoked	d?			Yes □	No□
	(b) Has your Licence/Registration ever been cancelled?						Yes □	No□
6.	Have you resigned your membership in any organization of architects that licenses or authorizes the Yes ☐ No ☐ practice of architecture or allowed your Licence/Registration to lapse for any reason?					No□		
7.	Have you ever been convicted of an offence which may be relevant to your suitability to practice Yes ☐ No ☐ architecture?					No□		
8.	3. (a) Have you ever been found guilty of professional misconduct or incompetence?					Yes □	No□	
	and/or							
	(b) Is your conduct or competence presently the subject of proceedings?						Yes□	No□
9.	Was your conductor con	npetence under revi	ew at the time of your	resiç	gnation or cancellation?		Yes □	No□
10.	0. Have you been issued a Licence/Registration in any jurisdiction that is subject to any terms, Yes ☐ No ☐ conditions or limitations?							
If yo	If you have answered "yes" to questions 4. to 10., use a supplementary sheet to provide dates and details.							

#### C. DECLARATION

#### I DO SOLEMNY DECLARE:

THAT I am applying for a Registration under the Architects Act, 1996 of the Province of Saskatchewan;.

THAT I agree to comply with the Architects Act, the Regulation and Bylaws, all as amended;

THAT I understand that only a holder of a Licence to Practice is permitted to offer and/or provide to a member of the public, a service that is part of the practice of architecture;

THAT the facts set out in this Application for Registration are true and correct in every particular;

AND 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 authorizeapplying) to release and disclose to the jurisdiction to which I am making this information and documents that in any way relate to any past, current or per involving my conduct or competence.	
Signature of Applicant	
Date	

#### The Saskatchewan Association of Architects Letter of Undertaking

ATTENTION: REGISTRATION COMMITTEE

This will confirm that before practicing architecture in the Province of Saskatchewan, I will acquire knowledge of and abide by *The Architects Act, 1996*, Bylaws of the Saskatchewan Association of Architects, the Saskatchewan Builders' Lien Act, the National Building Code of Canada as amended by The Uniform Building and Accessibility Standards Act of Saskatchewan, Saskatchewan Human Rights Code and regulations under the Fire Prevention Acts, and other conditions pertaining to the practice of architecture in the Province of Saskatchewan.

Yours truly,	
Signature	
Name (please print)	
Date	

	carefully complete the checklist to assist you in successfully completing the application. Incomplet sions will be returned.
	I enclose proof of date of birth: photocopy of driver's licence, birth certificate or passport.
	I <u>enclose</u> the Declaration: Non-Practicing Architect, if I am not associated with a current SAA Licence to Practice holder.
	I <u>requested</u> my resident association to complete and forward to the SAA a Confirmation of Registration/Licence.
	I enclose payment. Fees must be paid in Canadian Funds only.

#### **DECLARATION: NON-PRACTICING REGISTERED ARCHITECTS**

In order to be able to use their seal, registered members of the Saskatchewan Association of Architects (SAA) are required to be employed by a firm who holds a valid Licence to Practice.

SAA Registered Members whose employer does not meet the requirements for licensure in Saskatchewan are required to sign a Non-Practicing Declaration.

	nber must be properly credited to a firm holding a Licence her firm name is considered practicing without a licence, conduct Committee.
l,holding a Licence to Practice in Saskatchewan. I und	, declare that I am currently not employed by a firm erstand that I am currently not eligible for a member seal.
Signature	

Date



# SASKATCHEWAN ASSOCIATION OF ARCHITECTS PRIMARY CONTINUING EDUCATION REPORTING JURISDICTION DECLARATION FORM

In order to ensure architects who are licensed in multiple jurisdictions in Canada do not record their Continuing Education (ConEd) activities on multiple transcripts (unless they prefer to do so), the SAA has developed this form to allow SAA members outside Saskatchewan the opportunity to record their ConEd activities on a transcript in a Province/Territory of their choice other than Saskatchewan or their home jurisdiction. Upon receipt of the completed declaration form, the SAA will communicate directly with the selected jurisdiction to ensure ConEd compliance.

Please complete this form and return it to the SAA.

## I wish to designate one of the following as my primary ConEd reporting jurisdiction:

Signature:	Date:
lame (please	print):
	that information falsely reported in another province/territory will be recorded as iance with the SAA's ConEd program which may lead to potential disciplinary action.
	that I must comply with the primary ConEd reporting jurisdiction's nts specified by the primary jurisdiction.
	my primary ConEd reporting jurisdiction to release to the SAA information vant to my compliance with their continuing education program.
of the prim	responsible for complying with the continuing education requirements ary ConEd reporting jurisdiction.
	stered/licensed member of the primary ConEd reporting jurisdiction noted above. on/Licence #
confirm to	the SAA that:
	Saskatchewan Association of Architects (SAA)
	Ordre des architects du Québec (OAQ)
	Nova Scotia Association of Architects (NSAA)     Ontario Association of Architects (OAA)
	☐ Northwest Territories Association of Architects (NWTAA)
	Newfoundland and Labrador Association of Architects (NLAA)
	☐ Architectural Institute of British Columbia (AIBC) ☐ Manitoba Association of Architects (MAA)
	Architects' Association of Prince Edward Island (AAPEI)
	☐ Architects' Association of New Brunswick (AANB)
	☐ Alberta Association of Architects (AAA)

## PAYMENT REMITTANCE FORM

CREDIT ACCOUNT OF:				
NAME IN FULL:	(Surname)	(First Name)		(Initial)
HOME ADDRESS:	(Street)	(City)	(Province)	(Postal Code)
TELEPHONE	(Home)	(Business)		
EMAIL:	(Holle)	(busiliess)		
REASON FOR PAYMENT:				
AMOUNT OF PAYMEN	NT: 			
PAYMENT INFORMAT	TION:			
Cheque □ Visa □	Mastercard			
NAME OF CARDHOLD	ER:			
ACCOUNT #:				
EXPIRY DATE:				
SIGNATURE OF CARD	HOLDER:			

Personal information contained on this form is collected under the Freedom of Information and Protection of Privacy Act and will be used only for the purpose of responding to your request.