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 1st day of February or will be automatically struck from the register for non-payment of fees. Registration must be maintained through the expiration of the construction warranty period.
- 7. **PROOF OF EDUCATION & EXAMINATION:** Please submit a copy of your CACB Certificate and proof of successful examination with your application.
- 8. **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.
- 9. **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.
- 10. APPLICATION FOR SEAL: Please review the practice bulletin related to seal posted on the SAA website.
- 11. **DISPLAY OF CERTIFICATE**: SAA Registered Members shall keep his/her certificate prominently displayed in his/her place of business.
- 12. **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>).
- 13. **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.

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 1st 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.



A. IDENTIFICATION

1.	Name in Full:						
Surname		First Name	First Name		Middle Name(s)		
	Please check one	☐ Miss	☐ Mrs.	☐ Ms.	☐ Mr.		
	Name as it should appon the Certificate:						
2.	Residence Address:						
		Street				Apt. No	
		City		Province/S	tate/Territory	Country	Postal/Zip Code
3.	Place of Business:						
		Firm Name					
		Street				Suite No).
		City		State		Country	Zip Code
4.	(a) Address for Corre (The selected address w	spondence: ill be your Addre	Residence [ess of Record on the] or Bu Register.)	siness []		
5.	Residence Tel: ()		Bu	siness Tel: ()	
9.	E-mail:						
10.	Date of Birth:	th: (Month/Day/Year) Please attach copy of proof.					
11.	School of Architecture	:					
12.	Degree/Diploma Rece	ived		Date I	Degree/Diplom	a Received	

B. EDUCATION, EXPERIENCE and EXAMINATIONS

The Canadian Architectural Certification Board has certified my		Certificate Number:				
educational qualifications in architecture and that I have attained the educational standard for admission to the SAA.		Year Granted:				
I have work for at least the person or persons approduced 3720 hours of experience Internship in Architect Prexperience in Saskatche the date of this application.	oved by council and e that meets the req ogram, including 94 wan in the two year	have completed juirements of the 0 hours of s directly preceding	Yes	S No No		
I have successfully comp	leted the examination	on requirements of:	Jur	sdiction:		
<u>OR</u>			Dat	e of Completion:		_
4. I have achieved BEFA (B			Ce	tificate Number:		-
Certification through the Board (CACB). Please a		ural Certification	Yea	ar Granted:		_
 D. LICENCE HISTORY (Use supplementary sheets if necessary.) 1. Jurisdiction in which first Licence issued: Jurisdiction Licence Number Date Licence issued 						
List all jurisdictions in which you currently hold a Licence/Registration: Jurisdiction Licence/Member Number Date Licence/Membership issued						
 List all jurisdictions in which you previously held a Licence/Registration and provide the reason you no longer hold a Licence/Registration in those jurisdictions: 						
Jurisdiction	Licence/Member Number	Date Licence/Membership Issued)	Date Resigned/Cance	elled	Reason Resigned/Cancelled

4.	Have you ever been denied a Licence/Registration?	Yes □	No □
5.	(a) Has your Licence/Registration ever been suspended or revoked?	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 practice of architecture or allowed your Licence/Registration to lapse for any reason?	Yes □	No □
7.	Have you ever been convicted of an offence which may be relevant to your suitability to practice architecture?	Yes □	No 🗆
8.	(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 conduct or competence under review at the time of your resignation or cancellation?	Yes □	No □
10.	Have you been issued a Licence/Registration in any jurisdiction that is subject to any terms, conditions or limitations?	Yes □	No □

If you have answered "yes" to questions 4. to 10., use a supplementary sheet to provide <u>dates</u> and <u>details</u>.

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C. DECLARATION AND AGREEMENT

membership in t	pplication to the Council of the Saskatchewan Association he Association under <i>The Architects Act, 1996</i> as a REG askatchewan Association of Architects	
l	of	in the
Province of		ed to become a REGISTERED
MEMBER of the	Saskatchewan Association of Architects, do hereby deck	are covenant and agree with the
	Association of Architects and with all the members thereof	
	aid Association, in consideration of such election that:	, , , , , , , , , , , , , , , , , , , ,
emo on v	I not accept any trade or other discounts or give or accepoluments in connection with any works the execution of which I may be employed under any other person or with a be entrusted to me	hich I may be engaged to superintend or
ded	I abstain from seeking employment or soliciting clients by uction of fees and that I will not offer drawings or other se spensation	
gove	ve read <i>The Act</i> and the Bylaws of The Saskatchewan Aserned and bound by the said the Act and the Bylaws and the may hereafter be enacted, so long as I remain a member	by any alteration or amendments thereof
	I exercise my best endeavors to advance the interests an ociation of Architects	d objects of the said Saskatchewan
l, foregoing declar believing it to be Canada Evidend	ation are true and correct in every particular, AND I make true, and knowing that it is of the same force and effect a	nly declare, that the facts set out in the this solemn declaration conscientiously as if made under oath, by virtue of the
DECLARED this	the day of, 20	
In the city/town o	of	-
n the	Province/State of	notary stamp/seal
	Notary/Commissioner	
	Applicant's Signature	

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	_

carefuly complete the checklist to assist you in successfully completing the application. Incomplete sions will be returned.
I enclose a completed, signed and notarized application.
I enclose proof of date of birth: photocopy of driver's licence, birth certificate or passport.
I enclose a copy of my CACB Certificate.
I <u>enclose</u> proof of successful examination.
I enclose proof of completing the required logged CERB hours.
I <u>enclose</u> the Declaration: Non-Practiciting Architect, if I am not associated with a current SAA Licence to Practice holder.
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.

	stered SAA member must be properly credited to a firm holding a Licence redited to any other firm name is considered practicing without a licence, A Professional Conduct Committee.
I, holding a Licence to Practice in Sask	, declare that I am currently not employed by a firm atchewan. I understand that I am currently not eligible for a member seal.
Signature	_
	_

Date

PAYMENT REMITTANCE FORM

CREDIT ACCOUNT OF:						
NAME IN FULL:	(Surname)	(First Name)		(Initial)		
HOME ADDRESS:	(Street)	(City)	(Province)	(Postal Code)		
TELEPHONE	(Home)	(Business)				
EMAIL:						
REASON FOR PAYMENT:	_					
AMOUNT OF PAYMENT:						
PAYMENT INFORMATION:						
Cheque Uisa Mastercard						
NAME OF CARDHOLDER:						
ACCOUNT #:						
EXPIRY DATE:						
SIGNATURE OF CARDHOLDER:						

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.

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