

ASSESSMENT OF PROFESSIONAL COMPETENCE BUILDING SURVEYING 2019

Form APC1/BS

APPLICATION

to enter the Assessment of Professional Competence

This application should be submitted within one month of commencement of employment.

Otherwise the date of receipt of this application will be taken as the date of commencement of training.

(For Office Use)

Form received on	Fee \$1,350 received on	Admitted Probationer on	Membership No.	
Application for Probationer received on		Referred to BS DEC on		

(For BS DEC Use)

□ cognate degree □ topped-up cognate		□ 2 years	APC to commence on	Candidate	No.	
□ relevant non-cognate degree		□ 3 years		В	1	
□ other degree	□ 1 year engagement	□ 3 years				
Remarks □ diploma and transcript attached			BS DEC Chairman	Date		

This Version effective June 2024

Full Name in English	English Name						
Mr.* / Miss *							
Name in Chinese	Date of Birth						
	/ / / day month year	Affix					
Postal Address	day month year	A recent photo					
E-mail Address	Contact Telephone No.	1					
* * CANDIDATE	S DECLARATION * *						
☐ I am a Probationer * / applying to be a Prob	ationer * of the Hong Kong I	nstitute of Surveyors.					
☐ I am applying to enter the Assessment of P	rofessional Competence in E	Building Surveying.					
☐ I enclose the entry fee of \$1,350 payable to	·						
		•					
☐ I set out below full details of my tertiary aca	demic training after seconda	iry school.					
Sub-degree or Diploma at Level 4		Te Te					
Title of Award in full	Academic Institution	From To					
0. 1 14 1 5 11 11 12 12 13		1 1					
Study Mode: Full time / Part time *		month year month year					
Graduate Degree at Level 5 Title of Award in full	Academic Institution	From To					
Study Mode: Full time / Part time *		month year month year					
	eds and the corresponding tr						
·		•					
	☐ I have been engaged in building surveying practices for not less than one year and details of my past engagements are attached. (for candidates not holding a degree in surveying or equivalent)						
☐ I am currently in full time employment that enables me to acquire the necessary training in building							
surveying.							
☐ I have read the relevant Rules and Guide and I will abide by the requirements.							
☐ I declare that to the best of my knowledge all statements and information given on this form and the attachments are true and correct.							
☐ I understand that any misrepresentation on this form or attachments will render this application null and void.							
Date of Application	Signature of Candidate						
* Delete whichever is inapplicable.							

**TRAINING PARTICULARS **

My current employment details are:

Employing Organization	Relevant section in which employed (if applicable)
Office Address	
Job Title of Appointment	Date of Appointment / / day month year
Job Description	Office Telephone No.

There would be opportunities for me to acquire the following core competences marked "X" in the boxes below:

A1 – Building Elements and Components	A2 - Building Design and Construction
A3 – Building Services	A4 – Building Health
A5 – Building Safety	A6 – Building Efficiency and Sustainability
B1 – Building Development	B2 – Building Project Management
B3 – Building Pathology	B4 – Building Maintenance Management
B5 – Building Alterations and Additions	B6 – Building Property Management
B7 – Building Disputes Resolution	

The Professional Building Surveyor invited to monitor my training is

Name in Chinese	FHKIS / MHKIS		
Mem No.			
	Elected in		
Employer of External Co	unsellor *		
I have read the Guidance Notes for Counsellors and			
I am willing to act as the Counsellor of this candidate			
Contact Telephone No.	Date		
	Employer of External Cooperations and this candidate		

* * EMPLOYER'S ENDORSEMENT * *

I certify that the candidate is employed as stated above.

Name and Position of Signatory	Signature and Date	Office Chop

^{*} Delete whichever is inapplicable.

* * Engagement in Building Surveying Practices in the Past 12 Months * * (For candidates with an academic qualification other than a surveying or relevant degree)

From (date)	To (date)	Employer	Specific Jobs and Personal Tasks		
	* * End	orsement by Releva	nt Employer / Supervisor *	*	
<u> </u>					
		ngagement in building su y employment / supervisio	rveying practices fromon.	_ to	
Employer		Capacity of Signatory	Signature	Date	
			<u> </u>	<u> </u>	
I certify that the stated engagement in building surveying practices from to to was conducted under my employment / supervision.					
Employer		Capacity of Signatory	Signature	Date	
		L	1	<u> </u>	
I certify that the stated engagement in building surveying practices from to to was conducted under my employment / supervision.					
Employer		Capacity of Signatory	Signature	Date	