



THE HONG KONG INSTITUTE OF
SURVEYORS

香港測量師學會

ASSESSMENT OF PROFESSIONAL COMPETENCE

BUILDING SURVEYING 2019

Form APC3/BS

**SELF ASSESSMENT REPORT
of Practical Training**

A Self Assessment Report covering 9 months of training must be attached to this Form for submission to the Counsellor immediately after the relevant period of training. If the submission is delayed, the training during the period of delay must be included in the same Self Assessment Report.

A copy of this Form together with the Self Assessment Report without the Log Book must be filed in immediately after the mentoring interview.

A copy of this Form without the relevant Self Assessment Report should be included with the Application for Final Assessment in due course.

(For Office Use)

SAR filed in on	Referred to BS DEC on	Remarks	Probationer No.

(For BS DEC Use)

Remarks	BS DEC Chairman	Date

This Version effective June 2024

Full Name in English Mr. * / Miss *		English Name	Candidate No. B / .
Name in Chinese	Postal Address		
E-mail Address		Contact Telephone No.	
Current Employer		Current Appointment	

**** CANDIDATE'S DECLARATION ****

- I attach herewith my Self Assessment Report for the relevant training period.
- I am receiving emphasized training in the main stream practice indicated below. The amount of training received as recorded in my Log Book is also indicated below.

Building Control	Project & Development	Maintenance & Rehabilitation	Core Competences	Number of Days
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	A1 Building Elements and Components	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	A2 Building Design and Construction	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	A3 Building Services	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	A4 Building Health	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	A5 Building Safety	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	A6 Building Efficiency and Sustainability	
<input type="checkbox"/>	<input type="checkbox"/>		B1 Building Development	
	<input type="checkbox"/>		B2 Building Project Management	
<input type="checkbox"/>		<input type="checkbox"/>	B3 Building Pathology	
		<input type="checkbox"/>	B4 Maintenance Management	
<input type="checkbox"/>	<input type="checkbox"/>		B5 Alterations and Additions	
		<input type="checkbox"/>	B6 Property Management	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	B7 Dispute Resolution	
			Total number of training days	

- I am now filing in the vetted SAR herewith without the Log Book.
- I declare that to the best of my knowledge the statements and information given on this form and in the attached Self Assessment Report is true and correct.
- I understand that any misrepresentation on this form or in the attached documentation will invalidate my pursuance of the Assessment of Professional Competence in Building Surveying.

This Self Assessment Report contains _____ words.	
This SAR is for the relevant period from _____ / _____ / _____ to _____ / _____ / _____ <i>date month year date month year</i>	
My last SAR was for the relevant period from _____ to _____ It was acknowledged by BS DEC on _____	
Date	Signature of Candidate

**** COUNSELLOR'S ENDORSEMENT ****

- I confirm that the above candidate is receiving practical training under my mentoring.
- I have vetted the candidate's Log Book and I am satisfied that the entries have been correctly analyzed.
- I have critically assessed the candidate's Self Assessment Report and I have the following comments on the breadth and depth of training the candidate has so far received.
- I have interviewed the candidate and I have provided advice to the candidate as recorded below.

**** MENTORING ADVICE ****

<p>Comments on the practical training so far undertaken</p> <p>Comments on the Self Assessment Report</p> <p>Advice given to candidate</p>			
Name of In-house * / External * Counsellor		Name in Chinese	
Mr. / Ms. *			
Position of In-house Counsellor *		Employer of External Counsellor *	
E-mail Address of Counsellor		Contact Telephone No.	
Signature of Counsellor		Date	

* Delete whichever is inapplicable.

**** CANDIDATE'S ACKNOWLEDGEMENT ****

The SAR was submitted to my counsellor on _____ together with the corresponding Log Book.	Signature of Candidate
	Date
The mentoring interview was conducted on _____ and I have been advised of the above comments.	