

## Application for Assessment

# **Experienced Interior Designer**

FOR OFFICE USE ONLY	Applicant Name:		
Application Approved: Yes No		AAA ID Number:	
Approved by:		Date:	



Association of	EXPERIENCED INTERIOR DESIGNER
Architects	Application for Assessmen
Architects and Licensed Interior Designers	pp.:

Legal Name of Applicant:	Date:	
(as it appears on the submitted government-issued photo identification)	-	

## APPLICATIONS WILL BE ACCEPTED FOR THIS EXPERIENCED INTERIOR DESIGNER PATHWAY FROM JUNE 30, 2020 TO JUNE 30, 2024.

An individual may apply for membership in the association via the Experienced Interior Designer Pathway, if they meet the following criteria. At the time of application, applicants must have:

- 1. CIDA-accredited interior design professional degree or in the process of obtaining the CIDA-accredited professional degree with degree completion no later than JUNE 30, 2024.
- 2. NCIDO certificate
- 3. Minimum of ten (10) years (18,500 hours) of practice experience in interior design with 940 hours within the last two (2) years in Alberta.
- 4. Minimum of three (3) years (5,500 hours) of employment under the direct supervision of a licensed interior designer or registered architect.

Failure to complete or include all documentation will result in processing delays.

$1 - \mu$	APPLICATION CHECKLIST
	Graduated from a CIDA Degree Program of Interior Design or in progress – attach copy of Degree if completed Send transcript directly to AAA from institution. <b>OR</b> If in process of CIDA professional degree, send proof of enrolment (final transcript will be required within four weeks of completion).
	NCIDQ Certification Attach copy or photo of certificate.
	Attach detailed Curriculum Vitae  • Education  • Work  • Years / hours of experience  • Employment and supervision under a licensed interior designer or registered architect
	Declaration of Work Experience from Employer(s) Employer(s) must be either a licensed interior designer or registered architect and they must complete the Work Experience Declaration form.
	Competency Self-Assessment Worksheet <b>AND</b> Project Sheet(s) Must be submitted along with this application.
	Assessment Fee – \$165.00 + GST (non-refundable)
	Registration Fee – \$190.00 + GST (credited to applicant's account until successful completion of oral review)

Fees must accompany application. Failure to do so will result in processing delays.

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2 – IDEI	NTIFICATIO	N							
Have you	ı been previo	usly registered w	ith the AAA?		Yes	☐ No	If ye	es, ID Number	:
Title:	Miss	☐ Ms.	☐ Mrs.		lr.		Other:		<u></u>
Name:		(Surname)			(First)		_	(	Middle)
Date of E	Birth:	(MM / DD / YYYY	)	Country of	Origin	:			
Residen	ce:								
Address:									
City:								Postal Code:	
Phone:		Mobile:			Email	Address:			
Employe	er /or Self-E	imployed:							
Address:								Doctol Codo	
City: Phone:		Fax:		_ Province:				Postal Code:	
		directed to the re							
Note. Al	man win be	unected to the re	siderice addi	ess.					
3 – CID	A DEGREE								
I HAVE	A DEGREE F	ROM A CIDA-A	CCREDITED	INSTITU	TION.	Yes	□No		
Institutio	n•						 /ear Gra	duated:	
I AM EN		COMPLETE A P	ROFESSIO	NAL DEGR	EE FK	OM A CIL	DA-ACC	KEDITED	☐ Yes ☐ No
Institutio	n:					Year of E	xpected	Graduation:	
						-	•		
4 – NCI	DQ								
The NCIDQ exam is the LID qualifying exam accepted by The Alberta Association of Architects. Please confirm the following:									
I AM NCIDQ CERTIFIED.									
NCIDQ C	ertification N	umber:				\	ear Gra	nted:	

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## 5 – DECLARATION OF WORK EXPERIENCE

To the Registrar of the Alberta Association of Architects:

Work experience required for the Experienced Interior Designer Pathway must be completed under the supervision of a licensed interior designer or registered architect. This declaration must be completed by the employer. A declaration of work experience is required from each employer for whom the applicant is declaring they have worked.

I declare that _	(Name of Applicant)	, of	(City / Province	, w	vas:
b. Supervise	I full time / part time as an interior design of the following of the following design of the followin	_	ed Architect.		
for the period of:	*0		, agual ta		haure in total
Date	to	Date	_; equal to _	Approx # hours	hours in total.
force and effect	emn declaration conscientious as if made under oath and b	y virtue of the <u>Cana</u>		e Act.	
Date	Name ( <sub>l</sub>	please print)		Signatu	re

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Signature

#### **6 – CONSENT DECLARATION BY APPLICANT**

In consideration of the services to be rendered by The Alberta Association of Architects, I hereby release, discharge and exonerate the AAA from any and all liability of every nature and kind arising out of the transmission of information concerning the application.

If my application is accepted, I DO SOLEMNLY DECLARE:

THAT, as a member of The Alberta Association of Architects, I will be governed and bound by the *Architects Act*, *General Regulation* and Bylaws made thereunder and will submit myself to every part thereof, and to any alterations thereof which may hereafter be made until I have ceased to be a member of the AAA;

THAT I will acquire detailed knowledge of other regulations and conditions pertaining to the practice of architecture in the Province of Alberta as may be required to perform my professional responsibilities;

THAT the facts set out in this application 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 and by virtue of the *Canada Evidence Act*.

the Alberta Association of Architects.

Name (please print)

I HEREBY MAKE APPLICATION for the assessment of the Experienced Interior Designer Pathway with

Date

**Application for Assessment** 

#### 7 - FEES

#### **FULL PAYMENT** in Canadian funds must accompany this application.

Payments include the following:

TOTAL	\$ 173.25	TOTAL	\$ 199.50
GST (5%)	8.25	GST (5%)	9.50
Assessment Fee:	\$ 165.00	Registration Fee:	\$ 190.00

The Alberta Association of Architects GST Registration Number: 10669 2601

### **Method of Payment:**

☐ Cheque / Money Order	□VISA	Name of Cardholder:	
(Made payable to The Alberta Association of Architects)	☐ MasterCard	Card Number: Expiry	
		Cardholder Signature:	

Send application via email or post, to:

Registration1@aaa.ab.ca (if first letter of last name falls within A-L) Registration2@aaa.ab.ca (if first letter of last name falls within M-Z)

or

The Alberta Association of Architects 10515 Saskatchewan Drive Edmonton, AB T6E 4S1

#### **NOTES:**

- The assessment fee will be processed upon receipt of application and is non-refundable. Applications will not be processed without registration fees.
- The registration fee, if paid by cheque or money order, will be credited to the applicant's account until successful
  completion of an oral review. If paid by credit card, payment will not be processed until successful completion of oral
  review.
- If emailing this application with credit card information, please note that it is at the applicant's discretion.
- Inquiries may be directed to registration@aaa.ab.ca or 780-432-0224.
- Failure to complete or include all documentation will result in processing delays.