ROUTE T 1

ADMISSION TO ARCHITECTURAL TECHNICIAN MEMBERSHIP OF THE RIAI

RIAI

Certificate of Practical Experience*

This is to certify that _____ (Insert name of applicant)

since the date of obtaining his/her BSc Arch Tech/Dip Arch Tech, or other qualification in Architectural Technology

had continuous full-time experience* in my office from _____ to _____

and that under direction he/she was involved in the following areas of work:

- ☐ **Detail Design**
- ☐ **Production Drawings**
- ☐ **Specifications**
- ☐ **Contract Procedures**
- ☐ **Planning, Building, Fire, S&HW and other Statutory matters**
- ☐ **Site and Post Contract phases**
- ☐ **Surveys**

*If employment has been part-time please indicate here the number of hours per week _____

Job Title of Applicant _____

Name of Supervisor (Print) _____

Professional Qualifications of Supervisor _____

Name of Principal (Print) _____

Name of Practice _____

Address of Practice _____

_____

_____

Signature of Principal _____ **Date** _____

Please complete if applicable

This is to certify that _____'s English language ability is adequate for practice as an Architectural Technician.

***Note 1:** A separate Certificate must be submitted for each term of employment. Experience must have been gained under the supervision of a Member of the RIAI, Registered Architect or equivalent.

The Royal Institute of the Architects of Ireland
The Registration Body for Architects in Ireland

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REGULATING | ARCHITECTURE

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