ROUTE T 1

ADMISSION TO ARCHITECTURAL TECHNICIAN MEMBERSHIP OF THE RIAI

RIAI

Verification of Qualification in Architectural Technology

To be Certified by Educational Institution

I hereby certify that _____ (Full name of applicant)

has passed the Final Examination of the Architectural Technology Course at _____
(Name of school/department, faculty and educational institution*)

_____

on ____/____/____ (Date) and has been awarded the qualification of _____
(Title of qualification)

_____

I also certify that either on its own, or in conjunction with another qualification held by this applicant, this award reflects at least a minimum of three years study in Architectural Technology.

If the qualification has been accredited by an independent professional or accrediting body/authority please state the name of that body _____

Signed

Head of School/Institution: (Signature) _____

Head of School/Institution: (Name and title in BLOCK CAPITALS) _____

_____

Date _____

OFFICIAL STAMP OF EDUCATIONAL INSTITUTION, PROFESSIONAL OR REGULATORY BODY

This Form must be completed by the educational institution which conferred the applicant's qualification in Architectural Technology and must be sent by that institution direct to:

ADMISSIONS
RIAI
8 MERRION SQUARE
DUBLIN 2
IRELAND

*Educational Institution means a College, University, Institute of Technology or other Third Level Educational Institution.