

# **PART-I**

## **APPLICATION FORM FOR PART-I EXAMINATION**

Registration No.:   
(To be filled by the student)

Roll No.:   
(To be filled by Exam. Deptt.)

### **THE INDIAN INSTITUTE OF ARCHITECTS**

Exam. Dept., Plot No. 105, Sector-15, C.B.D. Belapur (East), Navi-Mumbai-400 614.  
Tel. No. 27563901/27561805., E.mail : [iaexam@gmail.com](mailto:iaexam@gmail.com) web site: [www.indianinstituteofarchitects.com](http://www.indianinstituteofarchitects.com)

The Controller of Examinations,  
The Indian Institute of Architects.

Paste here your own  
photographs and get  
attested by Architect  
Employer

(send two additional photographs)

Sir/Madam,

**I request permission to appear at the Part-I Examination under Scheme of Examination of 2014 of the Indian Institute of Architects to be held at (1).....(2) .....during June/Dec.,.....20**  
(Please give two options of Exam. Centre)

**I give below the required particulars and enclose Examination fee of Rs. ..../- by way of Bank D.D. issued in favour of IIA payable at Mumbai, bearing No..... Dated .....Bank .....**  
(Exam., Fee is Rs, 7500/-. If re-appearing not more than 2 subjects then Rs. 3750/-)

1) Name of the Candidate in full Mr/Mrs/ Miss.....  
(first name) (middle name) (surname)

2) Father's Name /Husband's Name.....

3) present address .....

E.mail ..... Mobile No .....

4) Permanent address .....

5) Year and date of Birth of candidate ...../...../.....  
( date ) (month) (year)

6) Have you appeared for any I.I.A. Part-I Exam in past ? If yes , attach photo copy of latest mark-sheet.

7) Details of practical Experience with Registered Architects and who is the Member of the IIA, in good standing and having a minimum five years professional experience.

Name of Architect Employer	Address of the Architect Employer	
(Present )		Since
		From .....
(Previous)		From .....To.....
		From .....To.....

I hereby declare that the statements made in the application are true and correct to the best of my knowledge and belief and I agree to abide by the rules prescribed by the Indian Institute of Architects, time to time.

Yours faithfully,

Place .....

Date : .....

Signature of applicant

Encls.. i) A passport size photograph must be affixed in the space provided duly attested by the Employer Architect.

Two more copies of stamped size photographs to be sent with this application for affixing on the Attendance Roll.

ii) Attach photo copy of passing marksheet of APTITUDE TESTOR Part-I in case of repeater.

iii) Attach Copy of IIA Membership Certificate and latest copy of COA Registration of the Employer Architect.

**EXPERIENCE CERTIFICATE IN ARCHITECTURAL WORK TO BE GIVEN BY PRESENT EMPLOYER ARCHITECT :**

Mr./ Ms..... is presently working in my/our organization since .....

as ..... and all the relevant records of his/her employment are maintained by us.

(Job designation)

Necessary facilities for study and for appearance at the I.I.A. Exam., will be offered to him/her, until he/she is in our employment,

Seal of the  
Office and  
address

Date :- .....

Signature and Name of the employer Architect  
IIA Membership No. ....

Place :-.....

**Note: 1) It is mandatory that every candidate has to work with Regd. Architect and who is Member of IIA till completing the IIA course of Exam and every time the student has to submit fresh Certificate of experience from Architect employer on appearing examinations or on demand by IIA.**

**8) A Student shall be debarred from appearing one or subsequent examinations or his/her studentship will be cancelled permanently at any stage if it is revealed that:-**

(i) *He/She has willfully supplied or caused to supply incorrect or fraudulent information for gaining Studentship / appearing for examination.*

**OR**

(ii) *He/She has used unfair means at an examination or in the preparation and submission of Design Project/ Portfolio/ Architectural Dissertation Work/ Appraisal Project/ Testimonies etc.*

**OR**

(iii) *He/She ceases to acquire Practical experience during his/her Studentship.*

**(FOR OFFICE USE ONLY)**

**Registration No.  
Application Accepted/Not Accepted**

Checked by .....

**CONTROLLER OF EXAMINATION, IIA**

Date :- .....