الجمعية السعودية لعلوم العمران
The Saudi Umran Society
عضو الاتحاد الدولي للمعماريين

APPLICATION FOR SAUDI UMRAN SOCIETY MEMBERSHIP

Associate Form (Temporary)

Architect ☐ **Consultant** ☐

Attach Passport-sized Photo

Name _____
(As you wish it to appear on your certificate - please print)

Company Name _____

Address	Home	Practice
	_____	_____
	_____	_____
City/Town	_____	_____
Postcode	_____	_____
Telephone	_____	_____
Mobile	_____	_____
Email	_____	_____
Website		

I would like all postal correspondence to be sent to:
Home address ☐ Practice address ☐

I would like all email correspondence sent to:
Home/Personal email ☐ Practice email ☐

Date of Birth _____ Male/Female _____

I, the above named, being desirous of admission to Saudi Umran Society, do hereby apply for a place as a Member. If accepted, I hereby undertake to be bound by the Constitution and Byelaws of the Society and by its Resolution. I also undertake to abide by the Rules and Regulations of the Board within whose territory my office is situated. Particulars of my education and professional career are attached.

Signature _____ Date _____

All Membership subscriptions (excluding the VAT rate) are charged on a pro-rate basis

				US Dollars
Application and Registration Fee				5,950
Refundable fee if rejected				5,900

For Associate membership let the Architects Fill in different forms for each and submits together with the same amount.

I will send the sum of: Payment Amount $ ……..... Payment Date: _ _/ _ _ Signature: ……

Verification officer Location (Country) _____

Method of Payment: Please Note that your payment should be made through a Bank Transfer to the location of your Verification officer who resides outside Saudi Arabia. Also note verification Officer varies by Country.

Checklist -

1. **Scanned copy of Architectural certificate of qualification in language of origin (To be translated by the international verification officer)**
2. **Company profile**
3. **Curriculum Vitae (CV)**
4. **Payment slip of fee(s) made**
5. **International passport or any form of identification**

AFFIDAVIT

If any answer to any of the following questions is "yes," please attach a detailed explanatory statement:

1. Have you or any agent of your firm practiced, or solicited architectural work or represented yourself as an Architect in the State prior to having been licensed? ☐ Yes ☐ No
2. Have you been disciplined by any occupational licensing board? ☐ Yes ☐ No
3. Are you currently under investigation by any licensing boards? ☐ Yes ☐ No
4. Has your registration been denied or revoked in any jurisdiction? ☐ Yes ☐ No
5. Have you surrendered or allowed a registration to lapse in any jurisdiction ☐ Yes ☐ No
6. Have you signed any legal document that settles a dispute or charges against you brought by a Registration Board or a Court of Law? ☐ Yes ☐ No
7. Have you been found by a court or Registration Board to have violated the architectural registration laws or the professional/occupational laws of any jurisdiction? ☐ Yes ☐ No
8. Have you entered into a negotiated settlement with regard to professional or occupational registration laws? ☐ Yes ☐ No
9. Are there any felony/criminal charges now pending against you? ☐ Yes ☐ No

The applicant agrees as follows:

* I will not represent myself as an architect or offer to perform architectural services in Saudi Arabia until this application is approved and an architect's license has been granted by this board.

* No agent in my firm will offer to perform or contract to perform architectural services in Saudi Arabia until the application process is completed and an architect's license has been granted by this board.

* I acknowledge that making a false statement to the above questions may subject me to disciplinary action including, but not limited to, immediate revocation or suspension of my registration.

* The undersigned, being duly sworn, upon oath deposes and says that he/she is the person making the forgoing statements and that they are made in good faith and are true in every respect.

Official Use Only

Procedures		Tick	Yes/No		Date
Application Received	Registrar				
Original Documents Examined	Registrar				
Candidate Interviewed	Committee				
Recommended for Entry	Board				
Endorsed for Entry	Committee				
Candidate Notified	Registrar				

NOTIFICATION

- **Please be informed that the Certificate will be issued within 8 working days of your provision of all requirements on checklist.**

• Registration fees will only be refunded to unsuccessful applicants. •
Payable only by the Applicant and the refundable to the Applicant

CANDIDATE STATEMENT

Every candidate applying as a Member of the Saudi Umran Societyis required to supply Saudi Umran Society with the information requested below.

	DATES	DESCRIPTION
1 a. Date of commencement of professional education		
b. Particulars of professional education		
c. Degrees and/or Diplomas		
2 a. Particulars of career since qualifying		
b. Details of present post		
3 a. Indicate types of buildings with which you have had experience since commencing in practice		
5 a. Date passed Part III		
6 a. Your Countries Membership Number if applicable, i.e. if you are presently a member.		
7 a. Date of registration and membership number		

I declare that the preceding statement made by me this _____ day of _____ 20 ___ is a true account of my professional education and career.

Signature _____

Completed application should be submitted

to: Membership Board

Riyadh, State of Saudi Arabia

E-mail Us **registrar@umransociety.com**