

APPLICATION FOR REGISTRATION AS A SURVEYING GRADUATE

Form 02A

PrivacyStatement—Under Section 68 of the Surveyors Act 2003 (the Act), the Board maintains a Register of Surveyors which is accessible by the public. Personal information is collected for the purpose of assisting the Board to carry out the duties defined in the Act. The Act requires the public part of the register to be published. A registrant's name and type of registration will be published on the Board website. Other contact information will only be disclosed to third parties with the written consent of the registrant.

PLEASE PRINT ALL INFORMATION AND RETURN FORM TO:

Surveyors Board of Queensland

admin@sbq.com.au

PO BOX 656 SPRING HILL QLD 4004 07 3839 7744

Title:		Preferred Name:		
First N	ame:			
Middle	e Name/s:			
Last Na	ame:			
Residential address:				
Postal address				
(if different from above): Email:				
		NA - I-:I -		
Contact number:		Mobile Work		
Date of birth:		WOIN		
Languages spoken:		(other than English)		
University degree:		(other than English)		
University attended:				
			Commission data.	
	e started:		Completion date:	
Name of employer:				
Employ	yment start date:			
In support of my application, I enclose <u>ALL</u> the following documentary evidence: Evidence of tertiary qualifications per the Competency Assessment Policy Current resume Two (2) recent (completed in the last 12 months) signed reference letters regarding your reputation and character from people who have known you for more than two (2) years; must NOT be a relative Application Fee and Registration Fee (refer to SBQ Schedule of Fees) THE REGISTER (s68 (5)): Do you consent to your contact information, as advised above, being accessible within the publicly available part of a Register of Surveyors? Yes No Do you know of any matter related to your character, honesty, and integrity which would affect your application? Yes (please provide additional information in a separate document) No I hereby apply for registration as a Surveying Graduate. I solemnly and sincerely declare that the above information is true and correct. I make the solemn declaration conscientiously believe the same to be true.				
Fees can 1. 2.	be paid by: Credit Card (Masterd over the phone and the phone and the phone are the p	o confirm the amount pay	contact the Board office (07 383 rable	Date 9 7744) to provide your details d to confirm the amount payable
OFFICE USE ONLY				
FEE:		DATE:	RECE	IPT NO: