

THE INDIAN INSTITUTE OF ARCHITECTS

5th fl, Prospect Chambers Annexe, Dr. D.N. Road, Fort, Mumbai-400001, INDIA Tel: +91 22 22046972, Fax: +91 22 22832516, email: iiapublication@gmail.com

APPLICATION FOR ELECTION AS ASSOCIATE MEMBER OF IIA

(TO BE FILLED IN WITH BLOCK LETTERS ONLY)

To, The Jt. Hon. Secretary The Indian Institute of Architects 5th Floor, Prospect Chambers Annexe Dr. D.N. Road, Fort, Mumbai - 400 001.	Photo			
Dear Sir, I,	I undertake that I from time to time.			
□ ₹ 11,000/- (₹ 1,000/- being the Entrance Fee + ₹ 10,000/- being the Life Time Deposit.) In the ca	_			
of my membership, I nominate / authorize the IIA to transfer my Life Time deposit into the IIA Con	rpus fund.			
* Add GST @ 18% on the amount payable				
☐ cheque (Multicity cheque for outstation) ☐ D.D.no. dt.				
of ₹ drawn on				
	in			
favour of "The Indian Institute of Architects" payable at Mumbai. I agree that, if I am not elected as an As	ssociate			
Member, I shall get the money refunded after deduction of ₹ 300/- towards administration charges.				
Personal Information: Name (As appearing on my graduation certificate):				
First Name				
Middle Name				
Last Name				
(In case of change of my name I shall attach the necessary legal documents, as required by IIA.)				
Gender Male / Female Date of Birth:				
Contact Information:				
Telephone: Off. Mobile_1:				
Resi.				
Email_1:				
Res. Address				
State: Pin Code:				
Eligibility Qualification Name & Address of affiliating University				
☐ B. Arch or ☐ equivalent				
Course Duration: yrs				



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Year of Name &	Address of Insti	tute														
Joining																
Passing																
Other qualifications if any, with name & address of Institution / University and year of passing:- (Attach additional sheets if required)																
Work Experience, if any: Title of the firm (if practicing) Address of the office / Department / Organization in which the applicant works Registration & Membership Details:												Des	ignati	<u>on</u>		
Registration number of Council of Arc	hitecture:	C	A	/					/							
(I enclose attested copy of up-to-date CO																
My earlier IIA Membership No. (If a	any):	A	_													
N.B. : The information about Mobile No. and E letter, JIIA etc, will be sent on this address correspondence, communication done on the mol	Any change in mol	oile no. a	and en	nail	id's s	shall b	e co	mmur	nica	ted to I	IA, H					
Enclosures : I enclose self attested cop	ies of following	; <u>:</u>														
1. Graduation / Equivalent Qualification Certifica	nte	2.	Vali	id CC)A Re	egistrat	tion c	ertific	ate							
3.	4.															
5.		6.														
DECLARATION: Thereby declare that: (a) That I will be generally engaged in the profession of Architecture, and will not engage in any other vocation or profession which will jeopardize or prejudice the Architects' professional standing or interfere in the general practice of Architecture. (b) That I will not accept trade or other discounts, or give or accept any illicit or surreptitious commissions or emoluments, in connection with any work, the execution of which I may be engaged to superintend, or on which I may be employed under any person, or with any other professional business which may be entrusted to him. (c) That I have read the Constitution and Bye-Laws of the Institute and will be governed and bound thereby, and will submit myself to every part thereof and to any alteration which may hereafter be made, until I cease to be a member thereof. Place: Applicant's Signature												n r				
Endorsements: My application is duly e We are acquainted with Mr./Mrs./Miss													s belo	ow:		
from our personal knowledge of him/h																
1. Ar.	F Sign															
2. Ar.] A								Sig	n					
3. Ar.] A								Sig	n					
	FOR O	FFICE	EUS	E ()NI	Y										
Graduation Certificate Enclosed Passed from Affiliated College by Council Approval date: Membership No. if allotted: Remark of Council if rejected:	:□Yes IIA :□Yes	□ No	0	Ap CC No	oplic DA (p. of	cable Certi tota	ifica	nclos	ncl	osed: es rece	E eived]Ye l:	s 🗆			
Jt. Hon. Secy.	C.E.O						A	.0							Page	2 of 2