

ARCHITECTS AND QUANTITY SURVEYORS REGISTRATION BOARD



Pamba Road -TETEX House  
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| Issuing Officer & date | Processing Officer & date | Form Number |
|------------------------|---------------------------|-------------|
|                        |                           |             |

FOR OFFICIAL USE

**APPLICATION FOR REGISTRATION AS A CONSTRUCTION MANAGER (LOCAL)**

Date Received \_\_\_\_\_

Dated \_\_\_\_\_

[By-law 4]

**1 PERSONAL INFORMATION**

|                      |                     |                         |
|----------------------|---------------------|-------------------------|
| Family Name: _____   | First Name: _____   | Other Names: _____      |
| Place of Birth _____ | Date of Birth _____ | Other Particulars _____ |
| Country, _____       | Year, _____         | Nationality, _____      |
| City, _____          | Month, _____        | Sex, Male / _____       |
| District, _____      | Day, _____          | Female _____            |
| _____                | _____               | Marital _____           |
| _____                | _____               | status _____            |

**2 Current Postal Address** \_\_\_\_\_  
Telephone No(s): \_\_\_\_\_ Mobile \_\_\_\_\_ Fax \_\_\_\_\_ e-mail \_\_\_\_\_

**3 Physical Address** :(Location of Registered Office)  
House No. \_\_\_\_\_ Block No \_\_\_\_\_ Street Na \_\_\_\_\_ Town/City: \_\_\_\_\_

**This application Form contains thirteen sections and each must be duly filled before the Board processes it.**

**4 Academic qualifications** (Attach certified copies of Academic certificates, current signed c.v and two passport photos)

| Name of Institution and Place of Study | Course of Study | Year of From | Attendance To | Qualifications obtained (Degree/Diploma etc.) |
|--|-----------------|--------------|---------------|---|
|  |                 |              |               |   |
|  |                 |              |               |   |
|  |                 |              |               |   |

5 Have attempted **The Board's Examination** Y/N and or an **Oral Interview** Y/N

**6 Referees:**(Referees must be Construction Manager registered with the Board in Tanzania)

| Referees   | Address (Postal, Mob. No & e-mail) | Association/Relationship with the applicant |
|------------|------------------------------------|---|
| (i).Name   |                                    |   |
| Signature  |                                    |   |
| (ii).Name  |                                    |   |
| Signature  |                                    |   |
| (iii).Name |                                    |   |
| Signature  |                                    |   |

7 Have you been **registered with any other similar Board in the past?** Yes/No.

If Yes, Which Board? \_\_\_\_\_, in which country? \_\_\_\_\_ and when? \_\_\_\_\_.( Attach Certified Professional Certificate).

Have you been de-registered there? Y/N if Yes When? \_\_\_\_\_

8 Have you been **de-registered with our Board in the past?** Yes/No.

If Yes, **Why** were you de-registered? \_\_\_\_\_

9. Are you registered by Tanzania Institute of Quantity Surveyors? Yes/No.

If Yes what is your Registration No \_\_\_\_\_

10 The prescribed fee for registration (application, registration, annual subscription and certificate of registration fees) shall be paid at the time of application.

*The Architects and Quantity Surveyors (Registration) Act*

GN. No. 377

Registration fee of TShs/US\$ \_\_\_\_\_ and in words, \_\_\_\_\_ is enclosed in cash / vide  
Cheque no. \_\_\_\_\_ of \_\_\_\_\_ Bank Branch

**11 Next of Kin**

Indicate next of kin to be contacted by the Board when need arise:

Name \_\_\_\_\_ address: \_\_\_\_\_ Mob. No \_\_\_\_\_

E mail \_\_\_\_\_ Relationship \_\_\_\_\_

**12. Past experience in the field as a Construction Manager or a Construction Manager Trainee**

Summary of professional experience (to be continued in photocopied sheet of the following page in case of need)

|   |   |
|---|---|
| period (Month and Year):<br>From _____ To<br>_____                    | Name the project. Indicate the activity / work area, which you personally performed, and achievement. |
| Name and Address of the project employer:                             |   |
|   |   |
| Name and Registration number of the Supervising Construction Manager. |   |
|   |   |
|   |   |

|  |   |
|--|---|
| period (Month and Year):<br>From _____ To<br>_____                   | Name the project. Indicate the activity / work area, which you personally performed, and achievement. |
| Name and Address of the project employer:                            |   |
|  |   |
| Name and registration number of the Supervising Construction Manager |   |
|  |   |
|  |   |

|  |   |
|--|---|
| period (Month and Year):<br>From _____ To<br>_____                   | Name the project. Indicate the activity / work area, which you personally performed, and achievement. |
| Name and Address of employer:  |   |
|  |   |
| Name and registration number of the Supervising Construction Manager |   |
|  |   |
|  |   |

|  |   |
|--|---|
| period (Month and Year):<br>From _____ To<br>_____                   | Name the project. Indicate the activity / work area, which you personally performed, and achievement. |
| Name and Address of employer:  |   |
|  |   |
| Name and registration number of the Supervising Construction Manager |   |
|  |   |
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|  |   |
|--|---|
| period (Month and Year):<br>From _____ To<br>_____                     | Name the project. Indicate the activity / work area, which you personally performed, and achievement. |
| Name and Address of employer:  |   |
|  |   |
| Name and registration number of the Supervising Construction Manager.. |   |
|  |   |
|  |   |

|  |   |
|--|---|
| period (Month and Year):<br>From _____ To<br>_____                     | Name the project. Indicate the activity / work area, which you personally performed, and achievement. |
| Name and Address of employer:  |   |
|  |   |
| Name and registration number of the Supervising Construction Manager.. |   |
|  |   |
|  |   |

13 **Declaration**

I hereby apply to be entered into the register of Construction Managers and undertake to abide by all provisions of the Architects and Quantity Surveyors (Registration) Act, No. 4 of 2010 and any regulations and By-laws made there under including Code of Ethics.

I Certify that, to the best of my knowledge, the information contained herein is true and correct.

Signature of the Applicant \_\_\_\_\_ Date: \_\_\_\_\_