



THE HONG KONG INSTITUTE OF  
**SURVEYORS**

香港測量師學會

**ASSESSMENT OF PROFESSIONAL COMPETENCE**

**BUILDING SURVEYING 2019**

**Form APC5R/BS**

**RE-APPLICATION**

**for Final Assessment of Practical Training**

This application must be received within 24 months of the previous attempt.

Supplementary documentations should only cover the extended training and learning acquired after the last professional interview

(For Office Use)

Form received on	Fee \$900 received on	Probationer No.
Documents received Self Assessment Reports Summary of Experience Synopsis of Structured Learning	YES / NO YES / NO YES / NO	Refer to BS DEC on

(For BS DEC Use)

Application in order	Application premature	
Remarks	BS DEC Chairman	Date

Candidate No.                      B                      /		Affix  A recent photo
Full Name in English Mr.*/ Miss *	English Name	
Name in Chinese	Postal Address	
E-mail Address	Contact Telephone No	

**\*\* CANDIDATE'S DECLARATION \*\***

<input type="checkbox"/> I passed the Practical Task in _____		
<input type="checkbox"/> I was last interviewed on _____ and was deferred for extended training.		
<input type="checkbox"/> I hereby apply again for <b>Final Assessment</b> in the following main stream practice		
<input type="checkbox"/> Building Control	<input type="checkbox"/> Project & Development	<input type="checkbox"/> Maintenance & Rehabilitation
<input type="checkbox"/> I enclose a cheque for \$900 payable to <b>The Hong Kong Institute of Surveyors</b>		
<input type="checkbox"/> I have completed _____ months of practical training since _____.		
Employer	Training period	Counsellor
<input type="checkbox"/> I attach herewith the following supporting documents:		
<input type="checkbox"/> Copy of <b>Form APC3/BS</b> covering the Supplementary SAR from _____ to _____		
<input type="checkbox"/> <b>Supplementary Summary of Experience</b> covering _____ months of extended training		
<input type="checkbox"/> <b>Supplementary Synopsis of Structured Learning</b> covering _____ hours of added learning		
Date of this Application	Signature of Candidate	

**\*\* COUNSELLOR'S ENDORSEMENT \*\***

<input type="checkbox"/> I confirm that the above candidate is currently receiving practical training under my mentoring.		
<input type="checkbox"/> I consider that the candidate is ready to be re-assessed for the professional qualification*.		
Name of In-house * / External * Counsellor Mr. / Ms *		Name in Chinese
Position of In-house Counsellor *	Employer of External Counsellor *	Signature of Counsellor
E-mail Address of Counsellor		Contact Telephone No.

\* Delete whichever is inapplicable.