

FORM 1
(reg. 3 (4))

**APPLICATION FOR REGISTRATION AS A PROFESSIONAL QUANTITY
SURVEYOR**

I hereby apply to have my name placed in the Register of the Quantity Surveyors' Registration Council as a Professional Quantity Surveyor

I enclose copies of my educational qualifications and details of my experiences

I enclose my Report on Post-Graduate Quantity Surveying Experience.

I have not been convicted of any criminal offence in a court of law and/or knowingly been investigated in connection with a criminal offence in any country.

I have been convicted of a criminal offence in a court of law and/or knowingly been investigated in connection with a criminal offence in any country. The particulars of such offence are as follows:

I hereby declare that if I am registered, I shall perform my duties and discharge my responsibilities in compliance with:

- 1) The Quantity Surveyors' Registration Act and Registration Regulations; and
- 2) Code of Ethics & Professional Conduct Standards for Quantity Surveyors

I hereby authorize the Quantity Surveyors' Registration Council to seek verification on the information submitted in any manner and by any means as it deems appropriate.

Name: _____ Date: _____

Signature: _____

1. DOCUMENTS TO BE SUBMITTED

Item	Particulars	(Please tick)
1	Application shall be accompanied with an application fee payable directly to the Quantity Surveyors' Registration Council bank account	
2	Copy of educational certificates	
3	Copy of Botswana identity document / residence permit	
4	Summary of post graduate professional experience	
5	Report on post-graduate quantity surveying experience	
6	Copy of professional registration certificate with other regulatory body(ies)	
7	Copy of membership certificate(s) of professional institution(s)/bodies	
8	Two personal references confirming good conduct and character	
9	Security clearance	

A1.1: PERSONAL DETAILS

1: TITLE	2: FIRST AND MIDDLE NAMES	3: SURNAME	4: GENDER			
				M		F

5: NATIONALITY	6: ID NO. (for Botswana Citizens)	7: PASSPORT DETAILS (Non Botswana Citizens)	
		Country:	
		No.	
		Expiry Date:	

8: POSTAL ADDRESS	9: PHYSICAL ADDRESS	10: CONTACT DETAILS	
		Tel:	
		Fax:	
		Mobile:	
		email:	

A1.2: CURRENT EMPLOYMENT DETAILS

11: NAME OF ORGANISATION	12: DESIGNATION	13: CONTACT DETAILS	
		Tel:	
		Fax:	
		Website (if any)	
		Postal Address:	

A1.3: ACADEMIC HISTORY

(NOTE: Attach certified copies of certificates. Copies of certified copies are not acceptable)

14: ACADEMIC QUALIFICATION(S)				
Level of Qualification (e.g. Certificate, Diploma, Degree, etc.)	Course of Study	Years of Attendance		Awarding Institution
		From	To	

A1.4: MEMBERSHIP OF QUANTITY SURVEYING INSTITUTIONS/PROFESSIONAL BODIES/ PROFESSIONAL REGISTRATION WITH OTHER QUANTITY SURVEYING COUNCILS

15: MEMBERSHIPS				
Name of Institution/Registration Body	Country	Class of Membership or Registration	Membership/Registration No.	Expiry date (if any)

A1.5 SUMMARY OF POST-GRADUATE QUANTITY SURVEYING WORK EXPERIENCE

***Please indicate as not applicable if you have no work experience**

Date of Employment		Title and Cost of project/ position held/ degree of responsibility	Name and Address of Employer	Contact details of employer (telephone, fax and e-mail)
From	To			

1. Statement on Post-Graduate Quantity Surveying Experience

- (a) The applicant is required to submit short statements of not more than 4,000 words covering each competency as indicated in the Registration Policy, (word count of the report should be indicated). The applicant is required to demonstrate in detail the competencies and his or her involvement in not more than four projects that he or she regards as the highlight of his or her professional experience in Quantity Surveying.
- (b) For each competency, the applicant shall describe his involvement in the management, contractual, financial control and other areas that he or she was involved in. He or she shall describe his or her personal contribution and responsibilities.
- (c) In preparing his or her report, he shall refer to the Checklist for Professional Assessment Competence Element / Performance Indicators and demonstrate how he or she has achieved all of the elements of competence in the Checklist.

2. Certificate of Good Character and reputation

For the purpose of Section 28(1) (b) (ii) of the Quantity Surveyors' Registration Act, two certificates of good conduct and character of the applicant shall be given by two responsible persons who are not immediately related to the applicant, but who have known the applicant for two years or more and have had opportunities of judging his or her conduct and character.

I _____ (name)
as _____ (designation)
of _____ (organisation and Address)

certifies that I have, in a professional manner, known _____ (name of applicant)

To _____ From _____
(mm/yyyy) (mm/yyyy)

I had the opportunities of judging his/her character, this is to say;

I believe him/her to be a person of good conduct and a fit and proper person to be registered as a professional Quantity Surveyor in Botswana.

Dated this _____ day of _____ 20 _____

Signature: _____

3. PAYMENTS

***Please refer to the fee schedule**

- (1) The accepted method of payment is direct deposits into the QSRC bank account
- (a) No cash will be accepted at QSRC Offices. Cheques sent to QSRC by post will also not be accepted. QSRC will take no responsibility for cheques lost in the post or intercepted and fraudulently banked in another party's bank account.
 - (b) When payments are made at the Bank, an applicant must quote their Omang Number (Citizens) or Passport Number (Non-Citizens) or full names.

QSRC Banking Details:

ACCOUNT NAME: Quantity Surveyors' Registration Council

BANK NAME: ABSA Bank of Botswana

BRANCH NAME: Government Enclave

BRANCH CODE: 290267

BRANCH NUMBER: 002

ACCOUNT NUMBER: 1033944

ACCOUNT TYPE: Corporate Current