

FORM 2
(reg. 3(5))

APPLICATION FOR REGISTRATION AS A CANDIDATE QUANTITY SURVEYOR

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

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

☐ 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 and 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: _____

Item	Particulars	(Please tick)
1	Application shall be accompanied by an application fee payable directly to the Quantity Surveyors' Registration Council bank account.	
2	Copy of educational certificates	
3	Copy of academic transcripts showing subjects taken	
4	Copy of Botswana identity document / residence permit	
5	Copy of registration certificate (s) with other regulatory body (ies)	
6	Copy of membership certificate(s) of professional institution(s)/bodies	
7	Summary of post graduate experience	
8	Security Clearance	

A1.1: PERSONAL DETAILS

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

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

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

A1.2: CURRENT EMPLOYMENT DETAILS

11: NAME OF	12: DESIGNATION AND JOB DESCRIPTION	13: CONTACT DETAILS	
		Tel:	
		Fax:	
		Website (if any)	

1.3: ACADEMIC HISTORY

(NOTE: Attach certified copies of certificates)

14: ACADEMIC QUALIFICATION(S)				
Level of Qualification (e.g. Degree, Diploma, 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	*Competence Elements Acquired (Refer to Appendix A)	Name and Address of Employer	Contact details of employer (telephone, fax, email)
From	To				