

Note: This declaration is for practicing members who have been granted an exemption from the AIBS Professional Standards Scheme.

The Australian Institute of Building Surveyors (AIBS) has established a Professional Standards Scheme (Scheme) that limits the liability of Practicing Members of AIBS, provided they comply with the requirements of the Scheme.

Unless granted an exemption by AIBS, all Practicing Members of AIBS will be included in the Scheme and will be required to comply with the Scheme requirements.

All AIBS Practicing Members are required to make this declaration annually.

If this declaration is received by the AIBS office on a non-business day, membership of the Scheme will be effective as of the next business day.

Member Information:

Please provide the personal information requested below then proceed to the declaration.

Full Name: _____

Date of Birth: _____

Address: _____

Postal Address: _____

Email: _____

Phone: _____

Gender: Male Female Prefer not to say

Employment Type:

Please specify if you are:

A **Government employee** (Local/State/Federal)

Employed solely in **Academia**

Other (please specify): _____

Declaration:

I, _____, confirm and declare that:

1. I have sought and have been granted an exemption from compliance with the Scheme.
2. I have read and understand the requirements of membership (as per **AIBS membership policy 01 January 2021**) and agree to comply with all obligations and requirements of membership whilst I am a member.
3. I have read and understand the requirements of the **AIBS Accreditation Scheme** and will comply with those requirements whilst I am a member, including ensuring I comply with the requirements of the **AIBS Audit Program**.
4. The declaration I have made in any accreditation and membership application concerning the disclosure of any disciplinary action or determinations by regulators or a tribunal or a court is complete and accurate and not misleading.
5. I have read and understand the requirements of the Scheme however I note that because I am not covered by the Scheme due to being exempted from the Scheme by AIBS I will not hold myself out or allow myself to be held out to anyone as being covered by the Scheme.
6. I will provide any other information as requested by AIBS as required in accordance with AIBS reporting requirements to Professional Standards Councils.

APPLICANT SIGNATURE:

DATE:

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OFFICE USE ONLY

	Date	Actioned By
Declaration received		
Declaration saved and added to tracking sheet		