

## THE NIGERIAN INSTITUTE OF ARCHITECTS PROFESSIONAL PRACTICE EXAMINATION FORM

(To be completed by the supervising Architect endorsing a candidate's logbook)

## **SECTION A**

1.	Name of Supervising Architect
2.	Qualifications:
3.	NIA Membership No:
4.	ARCON Full Registration No:
5.	Place of work of Supervising Architect (Name and Address of Partnership, Company, Ministry or Parastatal)
	Tel:
6.	Residential Address of Supervising Architect:
	GSM/Tel:
SECTION B	
7.	Name of Candidate:
8.	Qualification of Candidate:
9.	Place of Work of Candidate:
10.	Residential Address of Candidate:
11.	If items 5 & 9 are different state why:

12.	Duration of Supervision:
13.	What type of relationship existed between you and the Candidate
	(a) Employer/ Employer or (b) Junior/Senior employee
	If neither, state the exact relationship:
14.	If your relationship was other than 13 (a) or (b),
	(i) State your involvement with the candidate's work throughout the duration of supervision
	(You may use a separate sheet to detail out)
	(ii) State how you supervised stage 1 of the candidate's projects
	(iii) State how you supervised stage II of the candidate's projects
	(iv) State how you supervised stage III of the candidate's projects

Supervisor's signature and date with ARCON Stamp