

Application for Assessment of Professional Qualifications – Surveyor (ANZSCO 232212)

PERSONAL DETAILS				
1.	Your full name (as shown in your passport)			
	Family Name			
	Given Names			
2.	ave you been known by any other names (including name before marriage, aliases)?			
	No ☐ Yes ☐ If yes, give details			
3.	Sex Male ☐ Female ☐			
4.	Date of Birth			
CONTACT DETAILS				
5.	Address for correspondence			
	COUNTRY			
6.	Telephone Numbers			
	Home () Work ()			
7.	Email			
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PROFESSIONAL EXPERIENCE

8. Provide a typed summary of your professional experience as a surveyor.

Include the dates of each period of employment, the name of the employer, the location of the employment, your job title, and the nature of your employment including the tasks performed and the projects involved.

CONTRIBUTIONS TO THE PROFESSION AND CONTINUING PROFESSIONAL DEVELOPMENT (CPD)

9. Provide a typed summary of any contributions you have made to the surveying profession and the CPD you have undertaken during the past two years (refer to Annex C for further information).

Include documentary evidence of attendance at each CPD activity, the date of each activity, the name of the provider, the location and a description of the activity.

	EDUCATIONAL QUALIFICATIONS
10.	Give details of all tertiary level courses you have completed Include documentary evidence of each qualification. If you have more than two qualifications, attach a separate sheet giving the required details
	Qualification obtained
	Name and Address of Educational Institution
	COUNTRY
	Normal Entry Requirements for the course
	Normal length of full-time course (in years or semesters)
	Length of time you took to complete the course (state years or semesters)
	Date started (Month and Year) Date Finished (Month and Year)
	Full or Part-time? Full-time □ Part-time □
	Was a thesis or major research paper a requirement of the course? No \Box Yes \Box
	If Yes, title
	Approximate length (pages or words)
	Was a period of practical work experience a requirement of the course? No \Box Yes \Box
	If Yes, the length of time involved (in years, months, weeks or semester hours)
	Qualification obtained
	Name and Address of Educational Institution
	COUNTRY
	Normal Entry Requirements for the course
	Normal length of full-time course (in years or semesters)
	Length of time you took to complete the course (state years or semesters)
	Date started (Month and Year) Date Finished (Month and Year)
	Full or Part-time? Full-time □ Part-time □
	Was a thesis or major research paper a requirement of the course? No \Box Yes \Box
	If Yes, title
	Approximate length (pages or words)
	Was a period of practical work experience a requirement of the course? No \Box Yes \Box
	If Yes, the length of time involved (in years, months, weeks or semester hours)

		ISTRATION/ LICENSING DETAILS (if applicable) ude documentary evidence of each surveying registration/license qualification.
11.		Registration/License
	Nam	ne of qualification received
	Nam	ne of registration/licensing authority
	Cou	ntry Date
12.	Any	other Registration/License
	Nam	ne of qualification received
	Nam	ne of registration/licensing authority
	Cou	ntry Date
13.	Hav	e you ever been refused a licence or registration or had a licence or registration withdrawn?
	No [□ Yes □
	If Ye	es, give details
		your membership of any relevant professional societies and your category of membership. ude documentary evidence of each society membership.
	APP	LICANT'S DECLARATION
15.	(a)	I declare that the information supplied, and the documents enclosed, are true and correct. I understand that any information supplied that is inaccurate or misleading may lead the Geospatial Corto refer the issue to the relevant authorities.
	(b)	I have read the Geospatial Council of Australia's document titled "Professional Qualifications Assessment For Migration Policy – Surveyor (ANZSCO 232212)" and agree to my application being processed under those rules.
Signa	ature	e Date

PAYMENT INFORMATION

The application fee is AUD\$850. Payment must be received in Australian Dollars in full before an application will be considered. Our preferred payment method is Electronic Fund Transfer (EFT) [also known as a wire transfer]. The necessary bank information is:

Bank Name: Commonwealth Bank of Australia
Branch Address: 240 Queen St, Brisbane, Qld 4000
Account Name: The Geospatial Council of Australia

BSB: 064-000 Account No: 15974652

Swift Code: CTBAAU2S (transfer in AUD only)

Reference: Applicant's surname – Migration Assessment

Note: If paying by EFT, the following details need to be sent to finance@geospatialcouncil.org.au when your payment is made to ensure your payment can be received:

Sender/Payor's Name Sender/Payor's Address Sender/Payor's Date of Birth

The reason for the payment e.g. migration assessment for Applicant's Name

If you wish to pay via credit card or BPay, you can request an invoice which will outline the payment instructions for these methods by emailing finance@geospatialcouncil.org.au

CHECKLIST

You must include the following documents with your completed application form:

(Certified copies of the original documents plus English translations if necessary)

- A certified copy of your educational qualification papers (such as degrees, diplomas, certificates etc.)
- A **certified** copy of educational courses completed, showing subjects, credit hours, examination results and where applicable, details of practical education.
- **Certified copies** of Birth Certificate, Passport and at least one other official photo bearing document
- Advice to the Geospatial Council that an English Language Test report is being sent directly to the Geospatial Council from the testing authority, or advice to the Geospatial Council regarding the procedure to be used for online confirmation of your test results. Include a copy of your results with your application.
- At least two written references from employers, members of the profession or, if you are self-employed, from two professional colleagues – plus all referee contact details (reference letters must be on company letterhead with an original signature);
- A summary of your professional work experience.
- A tabular summary of your professional work experience.
- A summary of your contributions to the profession and evidence of your continuing professional development during the past two years.
- Documentary evidence of any professional society membership.
- Official certified copies, where applicable, of your original and current registration or licensing
- Change of Name
- Application Fee of AUD \$850.00 and the sender/payor's details via email.

NOTES:

When applying, **all** documentation **must** be EMAILED to <u>migration@geospatialcouncil.org.au</u> (the **only** exceptions to this are the sender/payor's details emailed to <u>finance@geospatialcouncil.org.au</u> and the English Language test report form for which different arrangements may apply depending on the testing authority).

If you have any questions regarding submitting your application email migration@geospatialcouncil.org.au All application packets must be complete for them to be considered.