

For Office Use Only

SUBMISSION OF TRAINING RECORDS

Note: Personal data collected in this form will be used for registration, administration, future correspondences and record keeping purposes relating to the Assessment of Professional Competence of the Hong Kong Institute of Surveyors.

The completed application form should be returned to the Education Department, the Hong Kong Institute of Surveyors, Room 1205, 12th Floor, Wing On Centre, 111 Connaught Road Central, Hong Kong.

* Please delete as appropriate.

Part A: To be completed by the Candidate

Title: Mr. / Mrs. / Ms. / Miss*	Name in Full (Surname first):	Chinese Name:																																												
HKIS Membership: Probationer / Associate Member*	Membership No.:	Contact Telephone No.:																																												
Postal Address in BLOCK LETTERS:																																														
<p>Training period under submission: From _____ to _____</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 35%;">Training Areas</th> <th style="width: 15%;">Last Balance (months)</th> <th style="width: 15%;">This Submission (months)</th> <th style="width: 35%;">Total</th> </tr> </thead> <tbody> <tr><td>Cadastral Surveying</td><td></td><td></td><td></td></tr> <tr><td>Engineering Surveying</td><td></td><td></td><td></td></tr> <tr><td>Topographical Surveying</td><td></td><td></td><td></td></tr> <tr><td>Geodetic Surveying</td><td></td><td></td><td></td></tr> <tr><td>Hydrographic Surveying</td><td></td><td></td><td></td></tr> <tr><td>Photogrammetry and Remote Sensing</td><td></td><td></td><td></td></tr> <tr><td>Mapping and Cartography</td><td></td><td></td><td></td></tr> <tr><td>Geographic Information System</td><td></td><td></td><td></td></tr> <tr><td>Utility Surveying</td><td></td><td></td><td></td></tr> <tr> <td colspan="3" style="text-align: right;"><i>Total professional / technical* training experience earned:</i></td> <td></td> </tr> </tbody> </table>			Training Areas	Last Balance (months)	This Submission (months)	Total	Cadastral Surveying				Engineering Surveying				Topographical Surveying				Geodetic Surveying				Hydrographic Surveying				Photogrammetry and Remote Sensing				Mapping and Cartography				Geographic Information System				Utility Surveying				<i>Total professional / technical* training experience earned:</i>			
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<p>I declare that the following training records submitted herewith for assessment are true records of my training (please ✓):</p> <table style="width: 100%;"> <tr> <td style="width: 50%; vertical-align: top;"> <u>Professional Training</u> <input type="checkbox"/> Work Diary (soft copy only) <input type="checkbox"/> Progress Summary (hard and soft copy) <input type="checkbox"/> Log Book <input type="checkbox"/> PQSL Record of _____ hours </td> <td style="width: 50%; vertical-align: top;"> <u>Technical Training</u> <input type="checkbox"/> Log Book <input type="checkbox"/> PQSL Record of _____ hours </td> </tr> </table>			<u>Professional Training</u> <input type="checkbox"/> Work Diary (soft copy only) <input type="checkbox"/> Progress Summary (hard and soft copy) <input type="checkbox"/> Log Book <input type="checkbox"/> PQSL Record of _____ hours	<u>Technical Training</u> <input type="checkbox"/> Log Book <input type="checkbox"/> PQSL Record of _____ hours																																										
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Signature: _____ Date: _____																																														

Part B: To be completed by the Counsellor

Name of Counsellor in Full:	HKIS Membership No.:
<p>I hereby endorse this submission and certify that the Candidate has completed earning the training experience for APC as reported in Part A.</p>	
Signature: _____ Date: _____	