

# Statutory Declaration

State of South Australia – *Oaths Act 1936*

I, \_\_\_\_\_ of \_\_\_\_\_  
[Name of declarant] [Residential Address]

Do solemnly and sincerely declare that

- a. I acknowledge that I have read and understood the information supplied in the Information Sheet for Locally Experienced Practitioners;
- b. All information and documentation provided are complete, correct and up-to-date;
- c. I acknowledge that the failure to provide all information as indicated in the Information Sheet for Locally Experienced Practitioners will mean that the Architectural Practice Board of South Australia (APBSA) is unable to complete its assessment and will not be able to express an opinion as to the status of my application;
- d. I authorise the APBSA to make any enquiries necessary to assist in the assessment of my qualifications and to use any information supplied in my application for that purpose;
- e. I consent to the release of any information provided to a State or Territory architects registration authority;
- f. I acknowledge that the provision of false or misleading information may result in:
  - i. Information being provided to a State or Territory architects registration authority; and/or
  - ii. A decision by the APBSA to review any opinion provided relating to your application; and
- g. I agree to inform the APBSA of any changes to my circumstances (eg address) while my application is being considered.

And I make this solemn declaration conscientiously believing the same to be true, and by virtue of the provisions of the *Oaths Act 1936*.

Declared at \_\_\_\_\_

In the State of South Australia this \_\_\_\_\_ day

of \_\_\_\_\_ 20 \_\_\_\_\_

\_\_\_\_\_  
Signature of person making this declaration  
[to be signed in front of an authorised witness]\*

Before me:

\_\_\_\_\_  
Signature of Authorised Witness\*

\_\_\_\_\_  
Name of Authorised Witness

\* Justice of the Peace, Legal Practitioner or Police Officer