



Architects Accreditation Council of Australia

Registration Authority:  
**Northern Territory  
Architects Board**  
GPO Box 1680  
DARWIN NT 0801  
Ground Floor - Cavenagh House  
38 Cavenagh Street  
DARWIN NT 0800

**Architectural Practice Examination (APE)**  
AACA Log Book identification information

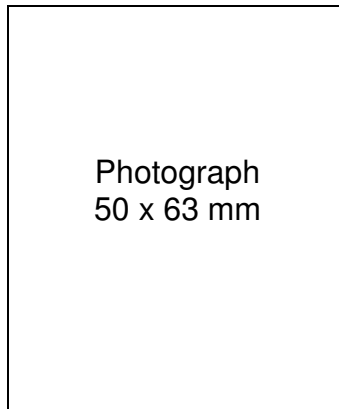
**Candidate Identification**

Full name \_\_\_\_\_

Residential address \_\_\_\_\_

Telephone number (w) \_\_\_\_\_ (h) \_\_\_\_\_

Signature of Candidate \_\_\_\_\_



**Registration Authority** \_\_\_\_\_

Registrar \_\_\_\_\_

Issuing Authority \_\_\_\_\_

Date of Issue \_\_\_\_\_