2nd December 2015

To accreditation exam candidate,

**Mentorship and Logbook requirements**

The candidate has to register his/ her mentor and start recording the logbook minimum 24 months before the examination application.

(Note: 2016 and 17 exam takers’ mentorship period will be shorter and/ or includes post exam application mentorship period. See table -1 below).

|  |  |  |  |
| --- | --- | --- | --- |
| Exam year | Registration deadline | Minimum Mentorship period | Minimum Log book period |
| Retrospective  | Actual | Post exam application |
| 2016 exam taker | 15 Jan 2016 | **1 year** | **1 year** | **0.25 year** | **0.75 year** |
| 1 Jan 2016|31 Dec 2016 | 1 Jan 2015|31 Dec 2015 | 1 Jan 2016|31 Mar 2016 | 1 Apr 2016|31 Dec 2016 |
| 2017exam taker | 15 Jan 2016 | **2 year** | **Nil** | **1.25 year** | **0.75 year** |
| 1 Jan 2016|31 Dec 2017 |  | 1 Jan 2016|31 Mar 2017 | 1 Apr 2017|31 Dec 2017 |
| 2018exam taker | 31 Mar 2016 | **2 year** | **Nil** | **2 year** | **Nil** |
| 1 Apr 2016|31 Mar 2018 |  | 1 Apr 2016|31 Mar 2018 |  |

* Mentorship registration fee: free
* Requirement for Mentor: Accredited Landscape Architect with min. 5-year of working experience.
* Fill up following form and email it to Accreditation office admin@la-accreditation.org.sg by the registration deadline. The Registration from has to be emailed by the exam candidate.
* It is exam candidate’s duty to find a mentor.
* Please read Mentorship and logbook sections of the Accreditation Exam Syllabus.

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| **Singapore Landscape Architects Accreditation Exam Registration Form** |
| **Details of Exam Candidate** |
| Salutation: Ms/ Mr/ Mrs/ Others:\_\_\_\_\_\_\_ | Surname: |
| First Name: |
| Identification No.: | Nationality: |
| Contact No.: | Email: |
| Mailing Address: |
| Earliest Exam taking year: |
| Academic background:(Course/ year of completion) |
| Working experience:(Name of organization/ position/ duration) |
| **Details of Nominated Mentor** |
| Salutation: | Surname: |
| First Name: | NRIC / Identification No.: |
| Contact No.:  | Email: |
| Accreditation Registration No.: |
| I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(nominated mentor’s name) understand the duties and responsibilities of the mentor and will support the Candidate as they progress trough \_\_\_\_\_\_\_\_-year mentor ship period starting from ( dd/mm/yy) to ( dd/mm/yy) , providing advice and guidance and help them to explore their understanding and reflect on what they have learned. Mentor’s Signature:Date: |
| Exam candidate’s signature:Date: |