## PAKISTAN COUNCIL OF ARCHITECTS AND TOWN PLANNERS PROFESSIONAL EXPERIENCE LOG

## FOR ARCHITECT'S LICENSING EXAMINATION

## GENERAL INFORMATION

Α	<u>PPLIC</u> A	NT DATA		
Name of Applicant Architect				
PCATP Registration No.				
Period of Experience				
Institute of B. Arch. Studies				
Postal Address:				
Email				
Mobile No.				
Landline				
SUPERVISING ARCHITECT DATA				
Name of Supervising Architect				
PCATP Registration No.				
Registration Year				
Firm Name				
Firm's PCATP Registration No.				
Firm Doctol Address				
Firm Postal Address				
Email				
Mobile No.				
Landline				
Comments of Supervising Architect				
Comments of Supervising Architect				
-		-		
Signature of Applicant Architect		Signature of Supervising Architect		
Name:		Name:		

## PROJECTS INFORMATION

	PROFESSIONAL EXPERIENCE LOG	/
Name of Project		
Nature of Project		
Status of Work Done		
Quantum of Work done		
Name of Supervisor		
	PROFESSIONAL EXPERIENCE LOG	
Name of Project		
Nature of Project		
Status of Work Done		
Quantum of Work done		
Name of Supervisor		
	PROFESSIONAL EXPERIENCE LOG	/
Name of Project		
Nature of Project		
Status of Work Done		
Quantum of Work done		
Name of Supervisor		