



The South African Council for the Project and Construction Management Professions

PROJECT AND CONSTRUCTION MANAGEMENT PROFESSIONS ACT NO.48 OF 2000

<b>APPLICATION FOR REGISTRATION</b>
P. O. Box 6286 Halfway House 1685 1st Floor Gateway Creek, International Business Gateway, Corner of New Road and Sixth Road, MIDRAND
Tel: (011) 318 3402/3/4 Fax: (011) 318 3405 E-mail: <a href="mailto:admin@sacpcmp.co.za">admin@sacpcmp.co.za</a> Website: <a href="http://www.sacpcmp.org.za">www.sacpcmp.org.za</a> <b>No Faxed or E-mailed Applications will be accepted.</b>

**APPLICANTS ARE TO COMPLETE ALL SECTIONS OF THIS APPLICATION FORM**

SECTION A	Personal Particulars of Applicant
SECTION B	Category of Registration Being Applied For
SECTION C	Educational Qualifications
SECTION D	Other Professional Qualifications / Registration with Professional Institutions
SECTION E	Practical Experience in Construction Project Management / Construction Management
SECTION F	Details of Current Employment
SECTION G	Declaration
SECTION H	Documents to be submitted with this Application Form

**SECTION A: PERSONAL PARTICULARS OF APPLICANT**

Type of Identification (Mark with X)	RSA ID-Document <input type="checkbox"/> Foreign ID-Document <input type="checkbox"/>
Identification No.:	<input style="width: 100%;" type="text"/>
Country of Issue	<input style="width: 100%;" type="text"/>
Title (Mark with X)	Prof <input type="checkbox"/> Dr <input type="checkbox"/> Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Ms <input type="checkbox"/> Rev <input type="checkbox"/>
Gender (Mark with X)	Male <input type="checkbox"/> Female <input type="checkbox"/>
Ethnic Group (Strictly for statistical purposes only)	Black <input type="checkbox"/> White <input type="checkbox"/> Indian <input type="checkbox"/> Coloured <input type="checkbox"/> Other <input type="checkbox"/>
Surname	<input style="width: 100%;" type="text"/>
Initials and First Name	<input style="width: 100%;" type="text"/>
Date of Birth	<input style="width: 100%;" type="text"/> Day      Month      Year
E-mail Address	<input style="width: 100%;" type="text"/>
Telephone No.	<input style="width: 100%;" type="text"/>
Cell No.	<input style="width: 100%;" type="text"/>
Fax No.	<input style="width: 100%;" type="text"/>
Postal Address	<input style="width: 100%;" type="text"/> <div style="text-align: right;">Postal Code <input type="text"/></div>
Physical Address	<input style="width: 100%;" type="text"/> <div style="text-align: right;">Postal Code <input type="text"/></div>
Province	<input style="width: 100%;" type="text"/>
Address where communications must be sent (Mark with X)      Postal Address <input type="checkbox"/> Physical Address <input type="checkbox"/>	

**SECTION B: CATEGORY OF REGISTRATION BEING APPLIED FOR**

Category of Registration being applied for (Mark with X, only one Category)

Category	Professional Construction Project Manager	<input type="checkbox"/>
	Professional Construction Manager	<input type="checkbox"/>
	Candidate Construction Project Manager	<input type="checkbox"/>
	Candidate Construction Manager	<input type="checkbox"/>

State whether any previous application(s) had been refused, and if so, when and reasons for refusal

**SECTION C: EDUCATIONAL QUALIFICATIONS**

Names and address of Tertiary / University	Qualifications Obtained	Year of Graduation
<p><b>Note</b> Attach certified copies of above qualification certificates</p>		

**SECTION D: PROFESSIONAL QUALIFICATIONS / REGISTRATION WITH PROFESSIONAL INSTITUTIONS**

D1 - Names and address of Association / Institution	Registration / Membership	Year of Membership
<p>D2 - Evidence of Continuous Professional Development (CPD)</p>		
<p><b>Note</b> Attach certified copies of above qualification, registration or membership certificates</p>		

**SECTION E: PRACTICAL EXPERIENCE IN THE FIELD OF CONSTRUCTION PROJECT MANAGEMENT / CONSTRUCTION MANAGEMENT**

Do you consider yourself to have obtained the necessary and relevant 4 years of practical experience in the field of Construction Project Management / Construction Management (Mark with X)	Yes	<input style="width: 80%; height: 20px;" type="checkbox"/>
	Not Necessary	<input style="width: 80%; height: 20px;" type="checkbox"/>
If yes, attach documentary evidence of practical experience as prescribed below (Mark with X if attached)		
1 List of projects worked on in the last 4 years in the format as per Annexure A1 of this Application Form		<input style="width: 80%; height: 20px;" type="checkbox"/>
2 Project Report as prescribed in Annexure A2 of this Application Form		<input style="width: 80%; height: 20px;" type="checkbox"/>
Are you currently engaged in the field of Construction Project Management / Construction Management?		
	Yes	<input style="width: 80%; height: 20px;" type="checkbox"/>
	No	<input style="width: 80%; height: 20px;" type="checkbox"/>

**SECTION F: DETAILS OF CURRENT EMPLOYMENT**

Name of Employer	<input style="width: 95%; height: 25px;" type="text"/>												
Address of Employer	<input style="width: 95%; height: 45px;" type="text"/>												
Tel No.	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 10%; text-align: center;"> <input style="width: 20px; height: 20px;" type="text"/> </td> <td style="width: 10%; text-align: center;"> <input style="width: 20px; height: 20px;" type="text"/> </td> <td style="width: 10%; text-align: center;"> <input style="width: 20px; height: 20px;" type="text"/> </td> <td style="width: 10%; text-align: center;"> <input style="width: 20px; height: 20px;" type="text"/> </td> <td style="width: 10%; text-align: center;"> <input style="width: 20px; height: 20px;" type="text"/> </td> <td style="width: 10%; text-align: center;"> <input style="width: 20px; height: 20px;" type="text"/> </td> <td style="width: 10%; text-align: center;"> <input style="width: 20px; height: 20px;" type="text"/> </td> <td style="width: 10%; text-align: center;"> <input style="width: 20px; height: 20px;" type="text"/> </td> <td style="width: 10%; text-align: center;"> <input style="width: 20px; height: 20px;" type="text"/> </td> <td style="width: 10%; text-align: center;"> <input style="width: 20px; height: 20px;" type="text"/> </td> <td style="width: 10%; text-align: center;"> <input style="width: 20px; height: 20px;" type="text"/> </td> <td style="width: 10%; text-align: center;"> <input style="width: 20px; height: 20px;" type="text"/> </td> </tr> </table>	<input style="width: 20px; height: 20px;" type="text"/>	<input style="width: 20px; height: 20px;" type="text"/>	<input style="width: 20px; height: 20px;" type="text"/>	<input style="width: 20px; height: 20px;" type="text"/>	<input style="width: 20px; height: 20px;" type="text"/>	<input style="width: 20px; height: 20px;" type="text"/>	<input style="width: 20px; height: 20px;" type="text"/>	<input style="width: 20px; height: 20px;" type="text"/>	<input style="width: 20px; height: 20px;" type="text"/>	<input style="width: 20px; height: 20px;" type="text"/>	<input style="width: 20px; height: 20px;" type="text"/>	<input style="width: 20px; height: 20px;" type="text"/>
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Fax No.	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 10%; text-align: center;"> <input style="width: 20px; height: 20px;" type="text"/> </td> <td style="width: 10%; text-align: center;"> <input style="width: 20px; height: 20px;" type="text"/> </td> <td style="width: 10%; text-align: center;"> <input style="width: 20px; height: 20px;" type="text"/> </td> <td style="width: 10%; text-align: center;"> <input style="width: 20px; height: 20px;" type="text"/> </td> <td style="width: 10%; text-align: center;"> <input style="width: 20px; height: 20px;" type="text"/> </td> <td style="width: 10%; text-align: center;"> <input style="width: 20px; height: 20px;" type="text"/> </td> <td style="width: 10%; text-align: center;"> <input style="width: 20px; height: 20px;" type="text"/> </td> <td style="width: 10%; text-align: center;"> <input style="width: 20px; height: 20px;" type="text"/> </td> <td style="width: 10%; text-align: center;"> <input style="width: 20px; height: 20px;" type="text"/> </td> <td style="width: 10%; text-align: center;"> <input style="width: 20px; height: 20px;" type="text"/> </td> <td style="width: 10%; text-align: center;"> <input style="width: 20px; height: 20px;" type="text"/> </td> <td style="width: 10%; text-align: center;"> <input style="width: 20px; height: 20px;" type="text"/> </td> </tr> </table>	<input style="width: 20px; height: 20px;" type="text"/>	<input style="width: 20px; height: 20px;" type="text"/>	<input style="width: 20px; height: 20px;" type="text"/>	<input style="width: 20px; height: 20px;" type="text"/>	<input style="width: 20px; height: 20px;" type="text"/>	<input style="width: 20px; height: 20px;" type="text"/>	<input style="width: 20px; height: 20px;" type="text"/>	<input style="width: 20px; height: 20px;" type="text"/>	<input style="width: 20px; height: 20px;" type="text"/>	<input style="width: 20px; height: 20px;" type="text"/>	<input style="width: 20px; height: 20px;" type="text"/>	<input style="width: 20px; height: 20px;" type="text"/>
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Job Title	<input style="width: 95%; height: 25px;" type="text"/>												
Outline of Job Description	<input style="width: 95%; height: 45px;" type="text"/>												
Name of Supervisor	<input style="width: 95%; height: 25px;" type="text"/>												

**SECTION G: DECLARATION**

<p>I, the applicant, hereby declare that:</p> <ol style="list-style-type: none"> <li>a. I am not disqualified in terms of Section 19 (3) of the Project and Construction Management Professions Act from being registered in the category applied for</li> <li>b. I am not subject to suspension from registration by any other professional body</li> <li>c. I have read and understood the Registration Policy and guidelines and have no objections to it.</li> <li>d. All the particulars and documents submitted are in every respect true and correct and have been lawfully obtained, and I have no objection to the verification of the authenticity of the documents.</li> <li>e. I will abide by the Code of Conduct for registered persons</li> </ol> <p style="margin-top: 20px;">                 Signature of Applicant _____ Date _____             </p> <p style="text-align: center; margin-top: 10px;"><b>No Faxed or E-mailed Applications will be accepted.</b></p>
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**SECTION H: DOCUMENTS TO BE SUBMITTED WITH THIS APPLICATION FORM**

Please submit the following documents with this Application Form (Mark with X)  
**(NOTE: Items 4 and 5 are not applicable to Candidate CPM and Candidate CM)**

		For Office Use
1. Completed Application Form	<input type="checkbox"/>	<input type="checkbox"/>
2. Certified copy of Identification Document	<input type="checkbox"/>	<input type="checkbox"/>
3. Certified copies of relevant certificates	<input type="checkbox"/>	<input type="checkbox"/>
4. List of Projects involved in (in format prescribed below)	<input type="checkbox"/>	<input type="checkbox"/>
5. Project Report	<input type="checkbox"/>	<input type="checkbox"/>
6. Curriculum Vitae	<input type="checkbox"/>	<input type="checkbox"/>
7. Payment of Application Fee		
Cheque	<input type="checkbox"/>	<input type="checkbox"/>
Postal Order	<input type="checkbox"/>	<input type="checkbox"/>
Bank Deposit Slip	<input type="checkbox"/>	<input type="checkbox"/>
Electronic Payment Slip	<input type="checkbox"/>	<input type="checkbox"/>
Bank Payment by EFT (Old Mutual)	<input type="checkbox"/>	<input type="checkbox"/>

SACPCMP Bank Account Details

Name of Bank: NEDBANK    Account Name: SACPCMP

Branch Name: CENTRAL BUSINESS    Branch Code: 128405    Account No. 1284064557

**FOR OFFICE USE ONLY**

Fees Paid and Receipt Number    R \_\_\_\_\_

Date of Receipt of Application     /  /   
Day                  Month                  Year

**AUTHORIZATION OF REGISTRATION (To be completed after Council Approval)**

Category of Registration    Pr. CPM     Pr. CM     Can. CPM     Can. CM

Approved                   Not Approved

Signature \_\_\_\_\_

Date of Authorization     /  /   
Day                  Month                  Year

**ANNEXURE A – GUIDELINES FOR REGISTRATION**

All Professional CPM / CM applicants are required by Council and therefore by law to submit the following as evidence of practical experience in the field of Construction Project Management / Construction Management

**NOTE: Candidate CM / CPM applicants are not required to submit the requirements of Annexure A1 and A2**

**Annexure A1 - Project Profile**

1. Project profile (list of projects) involving Construction Project Management / Construction Management which you have completed during the last 4 years or currently in progress.

The following should be provided for each of the projects:

Name of project

Type and description of project

Geographic location of project

Name of client and position and contact details of client representative

List of participating organisations

Year started and year completed (or planned completed date)

Original completion date

Actual completion date

Percentage of practical completion

Total value of project

Percentage participation of your organisation in the project

Your specific role in the project

Was the project successfully completed

**Annexure A2 - Project report****Project Report - For Registration as a Professional Construction Project Manager (Pr. CPM)**

Provide two reports of 1500 words each. One detailing the successes that you have achieved on your project and how these were achieved. The other must detail the challenges / frustrations or failures that you experienced on your project and how you handled these. Both reports must demonstrate your technical competence as well as your understanding and project management competence both as a *Principal Consultant* and *Principal Agent*.

The reports must be written under the following nine project management knowledge areas; (should be your headings)

1. Project Integration Management
2. Project Scope Management
3. Project Time Management
4. Project Cost Management
5. Project Quality management
6. Project Human Resources Management
7. Project Communication Management
8. Project Risk Management including Health and Safety Issues
9. Project Procurement Management

**Project Report – For Registration as a Professional Construction Manager (Pr. CM)**

Provide two reports of 1500 words each. One detailing the successes that you have achieved on your project and how these were achieved. The other must detail the challenges / frustrations or failures that you experienced on your project and how you handled these. Both reports must demonstrate your technical competence in construction, your construction management competence in *the Co-ordination of Construction Processes (including work of subcontractors)*, and your *knowledge and understanding of Construction Contracts*.

The reports must be written under the following nine project management knowledge areas; (should be your headings)

1. Project Integration Management
2. Project Scope Management

3. Project Time Management
4. Project Cost Management
5. Project Quality management
6. Project Human Resources Management
7. Project Communication Management
8. Project Risk Management including Health and Safety Issues
9. Project Procurement Management.

**ANNEXURE B. APPLICABLE FEES FOR THE YEAR 2015.****Annexure B1. Applicable Fees for the Year 2015**

APPLICATION FEE : R 1 688. 88

REGISTRATION FEE : R 861. 78

ANNUAL FEE :

Pr. CM /Pr. CPM : R 2 843. 34

Can. CM / Can. CPM : R 2 200.52

APPEAL FEE : R 2 921.39

EXAMINATION FEE : R 1 455.81

EXAMINATION WORKSHOP: R 1 050. 00

PROFESSIONAL INTERVIEW FEE : R 2 785.88

**ALL FEES ARE INCLUSIVE OF VAT**

Other Applicable Fees are available on our website: [www.sacpcmp.org.za](http://www.sacpcmp.org.za)