LAND SURVEYORS BOARD SARAWAK
Tel. 082-417920, 417921, 416921 Fax 082-246149

APPLICATION FOR THE LAND SURVEYORS BOARD SARAWAK'S CERTIFICATE OF COMPETENCY EXAMINATIONS

A. PERSONAL DETAILS	
1. Name in Full (Block Letters)	
2. I.C. Number	
3. Date of Birth	
4. Correspondence Address	
5. Telephone Contact Number	
6. Fax Number (if any)	
7. E-Mail Address	
B. DETAILS OF ARTICLESHIP	
1. Firm/Organisation providing Articleship	
2. Date of Commencement of Articleship	
3. Date of Completion of Articleship	
C. EXAMINATIONS APPLIED FOR (please tick √ in appropriate box)	
1. Written Examinations (Graduates)	
• Paper I – Land Tenure • Paper II – Laws and Regulations	( ) ( )
2. Oral & Practical Examination	( )
3. Competency Examination (Technicians) • Part I – Laws & Regulations, Cadastral Surveys and Instrumentation • Part II – Surveying Computations	 ( ) ( )
D. PAYMENT : EXAMINATION FEES	
1. Amount of Fees : • *Written Papers @ RM20.00 per subject* • *Oral & Practical @ RM60.00*	 RM RM
2. Payment Details (proof of payment) (provide copies of bank-in slips/receipts)	
E. SUPPORTING DOCUMENTS	
1. "Certificate of Service Under Articleship" 2. Others (to specify)	YES / NO
F. SIGNATURE OF APPLICANT / DATE OF APPLICATION ……..... ( )	…….. Date
FOR OFFICIAL USE ONLY	
1. Completed 2 years Articleship	YES / NO
2. "Certificate of Service Under Articleship" in order	YES / NO
3. Candidate has passed the following :	• Written Examination ( ) • Practical Project Reports ( ) • Oral Examination ( )
4. Examination Fees paid	• Amount : RM • Bank-in Slip/Receipt No.
5. Others	
DECISION OF EXAMINATION PANEL	
Candidate is **eligible** / **not eligible** to sit for the examination as applied for. *(Ref.: Examination Committee Meeting No. ……. held on …….)* …… ( ) **CHAIRMAN, EXAMINATION COMMITTEE**	Date :