

Our Ref : BOA 120.2

Date :

The Registrar  
Board of Architects  
5 Maxwell Road  
#03-01 Tower Block  
MND Complex  
Singapore 069110

Dear Sir

**AGREEMENT TO BE THE SUPERVISOR AND ADVISOR FOR PPE CANDIDATE**

**Name of Candidate:** \_\_\_\_\_

We hereby confirm that we are agreeable to commit ourselves as the Supervisor and Advisor for the abovenamed PPE Candidate. We shall carry out our role and responsibilities in accordance with BOA's guidelines.

Signature & Name of Supervisor : \_\_\_\_\_

Designation : \_\_\_\_\_

Place of Employment : \_\_\_\_\_

Hp : \_\_\_\_\_ Email : \_\_\_\_\_

Signature & Name of Advisor : \_\_\_\_\_

Designation : \_\_\_\_\_

Place of Employment : \_\_\_\_\_

Date Registered & No of Years in Practice: \_\_\_\_\_

Hp : \_\_\_\_\_ Email : \_\_\_\_\_