



THE ASSOCIATION OF ASSESSING OFFICERS OF MANITOBA

P.O. Box 2178, STN MAIN, Winnipeg, MB R3C 3R5

Application for Equivalent Credits - Building Construction - Residential

Please complete the application and send it to the address above. You must provide all relevant transcripts (or copy of) and a description of the course and the contents covered, with your application. It will be reviewed by the Education Committee and you will be advised of their decision

Applicant's Name: _____

Business Phone No.: _____ E Mail Address: _____

Residential Building Construction

Name of Course(s)	Date Completed	Organization Obtained From

Please check areas covered by course:

Site Planning

Building Methods

House Design

Building Materials

Course Description:

Signature of Applicant

Date

For Internal Use only

Application Reviewed: Date Reviewed: _____ Initials: _____

Application Accepted: Yes No

Notes: _____



Promoting fairness and equity in property assessment through professional development, integrity and public understanding

Phone/Fax: (204) 389-3500 E mail: admin@aaom.mb.ca Web Site: aaom.mb.ca





THE ASSOCIATION OF ASSESSING OFFICERS OF MANITOBA

P.O. Box 2178, STN MAIN, Winnipeg, MB R3C 3R5

Application for Equivalent Credits - Building Construction - Commercial

Please complete the application and send it to the address above. You must provide all relevant transcripts (or copy of) and a description of the course and the contents covered, with your application. It will be reviewed by the Education Committee and you will be advised of their decision

Applicant's Name: _____

Business Phone No.: _____ **E Mail Address:** _____

Commercial Building Construction

Name of Course(s)	Date Completed	Organization Obtained From

Please check areas covered by course:

- Site Planning Building Methods
 Building Design Building Materials

Course Description:

Please provide a copy of your transcripts and course description with your application:

Signature of Applicant

Date

For Internal Use only

Application Reviewed Date Reviewed: _____ Initials: _____

Application Accepted Yes No

Notes: _____



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