

2016 AIA CES Waiver Form



Since the year of 2012, Architect members are required to fulfill a continuing education (CE) requirement of eighteen (18) learning units, which must include eight (12) hours of health, safety, and welfare education.

An Architect member will be in default if he or she does not have on record at least 18 valid learning units as of the last day of the membership year. Every Architect member in default of the AIA's CE requirement is allowed a grace period until September 30th of the following year in which to complete the CE requirement. After September 30 each year, members who remain in non-compliance will no longer be in good standing and will not be entitled to the rights and privileges of Architect members, including, but not limited to use of the "FAIA" or "AIA" designation.

Waiver of CE Requirements: Architect members may petition for a waiver of all or part of the CE requirement for any one year only on the following grounds:

- a) Medical disability or other serious health conditions affecting the Architect member for a period of more than six months and/or throughout the last three months of the year;
- b) For any of the following reasons: (i) the birth of a child and to care for the newborn child within one year of birth; (ii) the placement with the Architect member of a child for adoption or foster care and to care for the newly placed child within one year of placement; or (iii) to care for the Architect member's spouse, child, or parent who has a serious health condition;
- c) For any of the following reasons: (i) absence due to military leave and obligation; (ii) any qualifying exigency arising out of the fact that the Architect member's spouse, son, daughter, or parent is a "covered service member" on "covered active duty" (as those terms are used with reference to the Family Medical and Leave Act); or (iii) for military caregiver leave, i.e., to care for a covered service member with a serious injury or illness if the Architect member is the service member's spouse, son, daughter, parent, or next of kin;
- d) Severe financial hardship; or
- e) For such other good cause as may be demonstrated to the satisfaction of the Secretary.

The Secretary of the Institute, at his or her discretion, may also grant a waiver for other such good cause as the member may demonstrate.

If you wish to submit a waiver petition, please complete the information below and submit this form to your assigned State or Local Chapter Component. Your Component will then forward your petition to the National office with comments, if any, to the Secretary for his or her consideration. Completion of this form does not guarantee waiver. If you have any questions, please contact CES at cessupport@aia.org or 800-242-3837 option 3.

- ☐ Medical disability or other serious health conditions affecting the Architect member for a period of more than six months and/or throughout the last three months of the year;
- ☐ For any of the following reasons: (i) the birth of a child and to care for the newborn child within one year of birth; (ii) the placement with the Architect member of a child for adoption or foster care and to

care for the newly placed child within one year of placement; or (iii) to care for the Architect member's spouse, child, or parent who has a serious health condition;

☐ For any of the following reasons: (i) absence due to military leave and obligation; (ii) any qualifying exigency arising out of the fact that the Architect member's spouse, son, daughter, or parent is a "covered service member" on "covered active duty" (as those terms are used with reference to the Family Medical and Leave Act); or (iii) for military caregiver leave, i.e., to care for a covered service member with a serious injury or illness if the Architect member is the service member's spouse, son, daughter, parent, or next of kin;

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☐ For such other good cause as may be demonstrated to the satisfaction of the Secretary.

Member Number | Waiver Year: _____

Chapter Affiliation (State/Local): _____

Submission Date: _____

Last name **First name** **Middle Initial or name**

Email address **Phone number**

City **State** **Zip**

Please give details (attach support documentation)

Please print legibly or type

Chapters, please forward this form to:

Mail: AIA CES Audit Review | 1735 New York Avenue, NW, Washington, DC 20006

Email: ramirosolorzano@aia.org

For additional information or assistance call (800) 242-3837 option 3 or email cessupport@aia.org