



ACAE
ARACASIA COMMITTEE ON
ARCHITECTURAL EDUCATION



ACA 20
BORACAY, PHILIPPINES
SEPTEMBER 17-23, 2023

20TH ASIAN CONGRESS OF ARCHITECTS (ACA 20)

ACA20 Website: <https://aca20.unitedarchitects.ph/>

ARCASIA THESIS OF THE YEAR 2023

*Theme: Designing a Future-Ready Community
Responding to the Most Challenging Social Condition*

ENTRY FORM

Thank you for applying for **ARCASIA Thesis of the Year 2023**.

Please submit your entry form in pdf format together with a design statement of 500 words maximum in English in .doc format (font size: 12), as well as one pdf (10Mb or less) file containing one A1-sized (594mm x 841mm) in landscape graphic layout.

The **closing date** of submission is **10 July 2023 (to Institutes)**. Please submit to your respective National Architectural Institutions (NIAs). Late submission will not be considered.

Please fill in names and other particulars of the team members should the submissions be in team basis.

For details and eligibility of competition, please refer to <https://aca20.unitedarchitects.ph/thesis-of-the-year/>

Name of Entry:
Contact Person and Applicant's Details:
Surname:
First name(s):
Academic Year:
Course:
Institution:
Student ID Number:
Postal Address:
Email Address:
Mobile Number:
Other Telephone Number:

DECLARATION

- ✓ I hereby declare that the information provided in this submission is true and accurate. I/We shall be responsible as the primary author of the design submitted herewith. To the Organizer, I/we hereby assign all the rights of using the design for promotion and exhibition purpose.

Signature of the applicant Date..... (*Please check the box for full completion.)

(Applicable to team submission only)

Team Member 2 Details:
Surname:
First name(s):
Academic Year:
Course:
Institution:
Student ID Number:
Postal Address:
Email Address:
Mobile Number:
Other Telephone Number:

DECLARATION

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Signature of the applicant _____ **Date** _____

(*Please check the box for full completion.)

(Applicable to team submission only)

Team Member 3 Details:
Surname:
First name(s):
Academic Year:
Course:
Institution:
Student ID Number:
Postal Address:
Email Address:
Mobile Number:
Other Telephone Number:

DECLARATION

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Signature of the applicant _____ **Date** _____

(*Please check the box for full completion.)

(Applicable to team submission only)

Team Member 4 Details:
Surname:
First name(s):
Academic Year:
Course:
Institution:
Student ID Number:
Postal Address:
Email Address:
Mobile Number:
Other Telephone Number:

DECLARATION

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Signature of the applicant _____ **Date** _____

(*Please check the box for full completion.)

(Please extend the entry form should it be needed).