  
**INSTITUTE OF CIVIL PROTECTION & EMERGENCY MANAGEMENT**

Application for advancement to Membership or Fellowship

**Please read the notes before completion**. This form should be completed in BLOCK CAPITALS and black ink. Continuation sheets may be used as necessary and any documents supporting the application should be submitted with this form, referring to the relevant section within the Application Form. A Curriculum Vitae may be included as evidence but will not be accepted as a substitute for any section of this application.

| **Section 1 - PERSONAL INFORMATION (changes since your last application)** | |  | |
| --- | --- | --- | --- |
| Family name: |  |  | |
| Given names: |  |  | |
| Title (Dr, Mr, Ms, etc.): |  |  | |
| Nationality: |  |  | |
| Awards/Designatory letters: |  |  | |
| Date of birth: |  | Gender (M/F): |  |

| **Section 2 - CONTACT INFORMATION**  **(Changes since your last application - Type or use block letters please)** | | | |
| --- | --- | --- | --- |
| Home Address: | | Business Address: | |
| Name/No: |  | Job Title: |  |
| Street: |  | Organisation: |  |
| Locality/Town: |  | Locality/Town: |  |
| State/County: |  | State/County: |  |
| Zip/Postcode: |  | Zip/Postcode: |  |
| Email: |  | Email: |  |
| Tel: |  | Tel: |  |
| Fax: |  | Fax: |  |
| Cell/Mobile: |  | Cell/Mobile: |  |

| **Section 3 - ACADEMIC QUALIFICATIONS**  **(Changes since your last application - Please see note 1 & list most recent first.)** | | | | |
| --- | --- | --- | --- | --- |
| Awarded by (Institution) | From | To | Full/Part Time | Qualifications awarded |
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| **Section 4 - PROFESSIONAL QUALIFICATIONS**  **(Changes since your last application - Please see note 1 & list most recent first.)** | | | | |
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| Awarded by  (Professional body) | From | To | Full/Part Time | Qualifications awarded |
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| **Section 5 - FORMAL/ACCREDITED TRAINING**  **(Changes since your last application - Please see note 2 & list most recent first.)** | | | | |
| --- | --- | --- | --- | --- |
| Course title | From | To | Full/Part Time | Training provider |
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| **Section 6 - PRACTICAL EXPERIENCE**  **(Changes since your last application - Please list most recent first.)** | | | | |
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| Appointment | Organisation | From | To | Experience |
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| **Section 7 - PROFESSIONAL MEMBERSHIP PROFILE**  **(Changes since your last application - Membership of Professional bodies/institutions)** | | | |
| --- | --- | --- | --- |
| Institution (please provide membership or other registration number) | Class of Membership (include permitted post-nominals) |  | Date granted |
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| **Section 8 – Personal statement**  **(Pertinent information not recorded elsewhere. Please see note 3 and use separate sheet if required)** |
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| **Section 8 – Personal statement - continued** |
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| **Section 9 - Undertaking** | |
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| **I hereby apply for advancement to Membership/Fellowship\* of the Institute of Civil Protection and Emergency Management and I will abide by its rules, regulations, bylaws and constitution.**  (\* Delete as appropriate)  To the best of my knowledge all information provided by me and contained in this application is true and accurate  I understand that any attempt to mislead will result in non-acceptance by, or removal from, the ICPEM.  Some personal details are listed in the ICPEM membership directory, (a contact telephone number, your current post and email address). Please tick the box if you **DO NOT** wish these details to be released and made available to other members. ☐  I enclose:   * Evidence of academic and/or professional qualifications * Evidence of practical experience * Evidence of formal training * Continuation sheet(s) as required * Annual Subscription direct debit   Signature of applicant: Date:  Print name: | |
| I hereby apply for: (please mark the relevant grade) | |
| Membership | ☐ £50 per annum |
| Fellowship | ☐ £60 per annum |
| Gift Aid makes a huge difference to us. If you are eligible please consider selecting this when you make your payment.  Please make your payment by selecting the red **donate button** in the footer of our website.  **Please send your completed application to:** [**membership@theicpem.org**](mailto:membership@theicpem.org) The Membership Secretary, c/o 25 Galleon Place, Royal Clarence Marina, Weevil Lane, Gosport, Hants PO12 1FL | |

**Notes**

1. Any academic or professional qualifications you wish to be noted whether or not they are relevant to emergency management.
2. Formal training relating to the disciplines of emergency management. Short workshops, conferences and seminars do not count for this purpose but may be attached as evidence of continuous professional development
3. Please provide a personal statement to support your application for advancement to Membership or Fellowship (as applicable). This statement may cover any aspect of your life, work or activities that you consider relevant to your application
4. Applications will be dealt with at the next Executive Council meeting after submission. Candidates will be informed of any delays
5. Completed application forms should be forwarded to the Institute from where additional forms may be obtained

**Data Protection Act**The Institute of Civil Protection and Emergency Management (ICPEM) (herein referred to as 'The Institute') is committed to following the eight principles laid out in the Data Protection Act 1998 and that contained within the GDPR. Any data supplied by an individual to the Institute will not be used in a manner, which is contrary to these principles. Data will be used for the purposes of candidate registration and the dissemination of information related to the Institute’s purpose. Data will be held in a secure manner, protected from unauthorised access and use, and not be passed to a third party unless consent is first obtained from any individual directly affected.

#### Right of access You have the right of access to all your personal records held on the Institute’s files by written request to The Membership Secretary, c/o 25 Galleon Place, Royal Clarence Marina, Weevil Lane, Gosport, Hants PO12 1FL

#### Change of details The Institute has a legal responsibility to ensure that all personal details held in its records are accurate and kept up to date. In order to assist in this process you are requested to notify the Institute immediately of any changes to the details provided in this form. Changes of details or requests for additional forms should be directed to The Membership Secretary, c/o 25 Galleon Place, Royal Clarence Marina, Weevil Lane, Gosport, Hants PO12 1FL