**Completion Date:** Click here to enter a date.

1. **Personal Information**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Name:** |  | | | **Title:** | | Click here to enter text. |
|  |  | | |  | |  |
| **Postal Address** |  | | | **Telephone:** | |  |
|  |  | | |  | |  |
| **Email Address:** |  | **Gender:** | Male | | **Date of Birth:** |  |

****

**Passport Photograph**

1. **Employment Information**

|  |  |  |  |
| --- | --- | --- | --- |
| **Place of Employment:** |  | **Job Title:** |  |
| **Postal Address:** |  | **Cell Phone:** |  |

1. **Educational Background**

|  |  |  |
| --- | --- | --- |
| **Qualification** |  | **Field of Study** |
|  |  |  |
|  |  |  |
|  |  |  |

1. **Professional Expertise in Impact Assessment (Please tick as appropriate)**

|  |  |  |  |
| --- | --- | --- | --- |
| **Environmental Impact Assessment** | **Occupational Health & Safety Plan** | **Environmental Media Monitoring** | |
| **Social Impact Assessment** | **Health Impact Assessment** | **Public/Community Engagement** | |
| **Strategic Environmental Assessment** | **Resettlement Action Planning** | **Other:** | Click here to enter text. |
| **Environmental Audit** | **Resettlement Policy Framework** | **Other:** | Click here to enter text. |
| **Environmental Management Plan** | **Environmental Social Management Framework** | **Other:** | Click here to enter text. |

1. **Type of Membership**



|  |  |
| --- | --- |
| **Type of Membership:** | **Choose an item.** |

1. **Referee(s)**

|  |  |  |  |
| --- | --- | --- | --- |
| **Name:** |  | **Phone:** | Click here to enter text. |
| **Postal Address:** |  | **Email Address:** | Click here to enter text. |

|  |  |  |  |
| --- | --- | --- | --- |
| 1. **Signature: :** |  | **Date:** | Click here to enter a date. |

1. **For office use**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Registration Fee Paid** | Choose an item. |  | **Membership Number:** | Click here to enter text. |
| **Date of Registration:** | Click here to enter a date. |  | **Executive Council Endorsement:** | Click here to enter text. |