|  |  |
| --- | --- |
| Membership Number |  |
| Title  Referee One |  | Name |  | | |
| Email Address | |  | | | |



**PLEASE COMPLETE ALL SECTIONS AND PROVIDE ALL REQUIRED DOCUMENTS IN SUPPORT TO AVOID ANY DELAY IN PROCESSING YOUR APPLICATION**

**MEMBERSHIP**

**APPLICATION FORM**

|  |  |  |
| --- | --- | --- |
| Job Title |  | |
| Employing Firm or Company | |  |

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Title | |  | | | | | First Name(s) | | |  | | | | | | | | | | | | | |
| Last Name | | |  | | | | | | | | | Date of Birth | | | | **D** | **D** | **M** | **M** | **Y** | **Y** | **Y** | **Y** |
| Home Address | | | | |  | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | Town | |  | | | | | | | |
| County/State | | | |  | | | | | | | | | Country | | |  | | | | | | | |
| Postcode |  | | | | | | | | Home Telephone Number | | | |  | | | | | | | | | | |
| Work Telephone Number | | | | | |  | | | | | Mobile | | | |  | | | | | | | | |
| Email Address | | | | |  | | | | | | | | | | | | | | | | | | |
| Where did you hear about IExpE | | | | | | | |  | | | | | | | | | | | | | | | |

|  |  |
| --- | --- |
| Membership Number |  |
| Title  Referee Two |  | Name |  | | |
| Email Address | |  | | | |

Please supply details of two referees, who can confirm the details on this application, it is preferred for one of them to be an IExpE member.

I wish to apply for **Technical** with Post-Nominals TIExpE

I wish to apply for **Member** with Post-Nominals MIExpE

I wish to apply for **Retired** Membership

Membership Category Options To find out about requirements for each category of membership visit [www.iexpe.org/membership/make-an-application-for-membership/](http://www.iexpe.org/membership/make-an-application-for-membership/)

**I hereby apply for admission as (please tick as applicable) of the Institute and undertake, if approved, to observe the conditions of membership.**

IExpE will contact your referees to support your application for membership. It is not IExpE policy to disclose comments made by your referees and we recommend applicants discuss their membership application with the referee prior to submission.

If you wish to apply for retired membership, please tick the retired box and the additional box as to which retired membership you would like to apply for.

I wish to apply for **Student**

Your Details

I wish to apply for **Associate** with Post-Nominals AIExpE

Membership Details

Referee Details

Employer Details

|  |  |  |  |
| --- | --- | --- | --- |
| Award/Course | Course Title | Name of University/College/  Awarding Body and Country | Period of Study |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

Qualifications

Please provide details of any qualifications you hold or are in the process of completing in the table below. Please attach any additional information such as CV and copies of certificates to support your application.

Work Experience

|  |  |  |
| --- | --- | --- |
| Employer | Job Title | Date |
|  |  | |  |  |  |  |  | | --- | --- | --- | --- | --- | | Period in which continuous actual use of explosives was carried out (years & months) | **Y** | **Y** | **M** | **M** | |

|  |
| --- |
| Types and makes of explosives used |
|  |

Declaration

If you require assistance please call 01785594136 or visit www.iexpe.org. Your first subscription payment will be due when you receive notification of acceptance. Please send completed application form to **Institute of Explosives Engineers, Ground Floor, Unit 1, Greyfriars Business Park, Frank Foley Way, Stafford, ST16 2ST** or via email to **info@iexpe.org**

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Signature (digital signatures accepted) | | | | | | | | |
|  | | | | | | | | |
| Date | **D** | **D** | **M** | **M** | **Y** | **Y** | **Y** | **Y** |

I declare that the statements made on this form are true to the best of my knowledge, I enclose the non-refundable remittance of £84.00 inc VAT (Overseas £96.00) payable to the “Institute of Explosives Engineers” in payment of the **Application Fee.**

Scanned copy of driving Licence/passport

An up to date photograph

When submitting your application please be aware of the Institute’s policy in relation to criminal convictions and insolvency.  If you have at the time of entering the Institute, or subsequently acquire, any relevant conviction or become subject to any order of Insolvency you need to declare them.  Details should be provided with your application. IExpE takes your privacy seriously and your personal data will only be used in the completion of this application and thereafter only for the proper management and administration of your membership.  This will include names of all new members to be published in the journal to introduce you to membership, circulations of material to which your membership entitles you, your personal data will be held securely and will only be shared with bodies we are either legally obliged to/ or are in collaboration with.  In completing and signing this application we will take this as your consent to our use of your data along with consent to receiving any IExpE company related documents via the IExpE website.

Documents in support of your qualifications and training, and CV

Documents in support of application

Declaration