

## APPLICATION FOR STUDENT MEMBERSHIP

Please fill in both pages. The six month's membership fee is available free of charge to all students registered at a UK Institute of Higher or Further education. A membership fee of £25 (student rate) will become due in March next year if you decided to continue your membership. Further information about the Institute is available from [www.ior.org.uk](http://www.ior.org.uk)

<p>Surname <input style="width: 90%;" type="text"/></p>	<p>Forenames <input style="width: 90%;" type="text"/></p>
<p>Home Address <input style="width: 95%; height: 80px;" type="text"/></p> <p style="text-align: center;">Post code <input style="width: 200px;" type="text"/></p>	<p>Title <input style="width: 90%;" type="text" value="Mr / Mrs / Miss / Ms"/></p> <p>Date of Birth <input style="width: 90%;" type="text"/></p> <p>Email <input style="width: 90%;" type="text"/></p> <p>Tel no <input style="width: 90%;" type="text"/></p> <p>Fax no <input style="width: 90%;" type="text"/></p>
<p>Work Address <input style="width: 95%; height: 80px;" type="text"/></p> <p style="text-align: center;">Post code <input style="width: 200px;" type="text"/></p>	

Would you like correspondence sent to  home or  work address? (please tick)

Students following courses leading to a nationally recognised qualification or first degree (ie SVQ, NVQ, HNC, HND, ONC, HNC, Foundation Degree, BSc, PhD) are eligible to apply for Student Membership of the Institute. A member of staff from the training provider must sign this form to confirm your status as a Student.

### Qualifications currently being studied

Qualification to be obtained	Main subjects being studied	Training Provider	Start/finish of course

### Course Tutor

<p>Name <input style="width: 95%;" type="text"/></p> <p>Address <input style="width: 95%; height: 40px;" type="text"/></p>	<p>Job Title <input style="width: 95%;" type="text"/></p> <p>Signature <input style="width: 95%; height: 40px;" type="text"/></p>
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**I hereby apply to join the Institute of Refrigeration for Student membership and understand that my grade of membership will be reviewed after three years.** I certify that the statements made by me on this form are true.

Signature \_\_\_\_\_

Date \_\_\_\_\_

**Areas of interest or research being undertaken:**

**Experience (if appropriate)**

Name of employer and principal activity of business	No. of staff	Job title or details of position held	Precise levels of responsibility in areas <i>related to refrigeration</i>	Dates employed	Length of employment

**Other Relevant Information to be taken into account eg Other qualifications held, Membership of other organisations (and grade), Membership of Committees, Contributions to local Branches or Societies, Papers published, Prizes awarded etc.**

**Where did you hear about the Institute?**

- Recommendation by a tutor  
  Internet  
  Publications  
  Attended IOR event

**What has prompted you to join now?**

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