

QUALIFICATION ASSESSMENT FORM



Please complete all sections of this application form and ensure that copies of qualification certificates, transcript listing subjects you undertook and examination marks, and synopsis of MSc/PhD thesis (if applicable) are attached and the required payment is included.

For certificates that are in languages other than English, an official English translation must also be provided.

QUALIFICATION ASSESSMENT FORM

Please provide your IOR membership details:

Membership Number Grade

Please indicate which level of Engineering Council Registration you are interested in and would like CIBSE to assess your qualifications against:

Engineering Technician (EngTech)

Incorporated Engineer (IEng)

Chartered Engineer (CEng)

PERSONAL DETAILS

Title First Name(s)

Surname

Date of Birth DD / MM / YY

Home address

Post code

Country

Telephone No

Email

Mobile No

Company name

Work address

Post code

Country

Telephone No

Email

Preferred mailing address Home Work

Preferred email address Home Work

EDUCATIONAL QUALIFICATIONS

Please list all your post school qualifications below and indicate any exemptions granted and details of any interruptions to your course. Awards shown must be accompanied by a photocopy of the original certificate countersigned by your Sponsor as having seen the original.

University or College	Full title of qualifications gained including subject area	Date course commenced	Course duration	Date qualification obtained	Mode of Study (F/T, P/T, sandwich, etc.)	Year of entry to course (i.e entered in year 1 or 2, 3 due to exemptions)

If your qualifications are not accredited for EngTech you will be required to participate in an interview assessment.

APPLICANT'S DECLARATION

I certify that the information in this application and supporting documents are correct. I agree that, I will be governed by the provision of the IOR Code of Conduct, Constitution and Rules, as they are now formed or as they may be hereafter altered. The IOR Code of Conduct, Constitution and Rules can be found at www.ior.org.uk

Signature

Date

DD / MM / YY

NB. In the event of it coming to light that information supplied on this form is inaccurate, CIBSE reserve the right to withdraw the application or registration.

SUBMITTING YOUR ASSESSMENT FORM:

Please submit this form along with the relevant attachments by email to: membership@ior.org.uk

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IOR Registered Charity No. 250081

CIBSE HQ USE ONLY:

