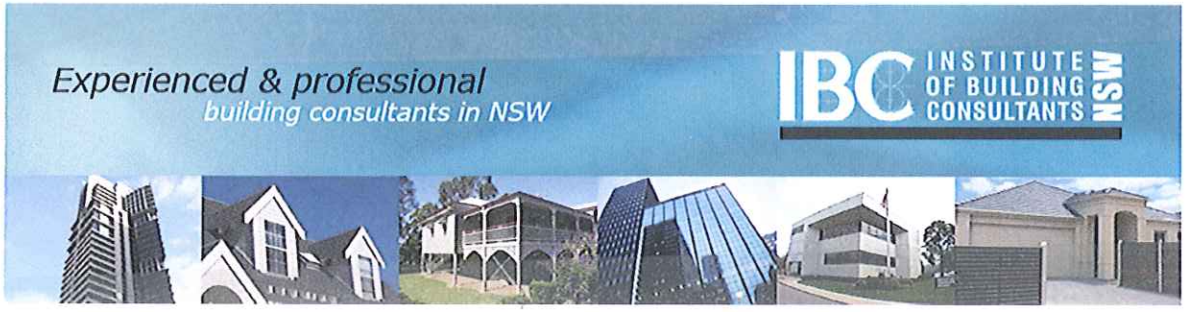

Application for Membership

Return completed form to The Hon Secretary: Fax 02 9651 2171

PERSONAL DETAILS

Surname		
Given Name (s)		
Home Address		
		Post Code
Home Telephone	Home Fax	Mobile
Company/Trading Name		
Address		
		Post Code
Telephone	Fax	Mobile
Email address		
Birth Date		Male / Female
ACADEMIC QUALIFICATIONS **NOTE** Copies of any certificates or testamurs or statements of attainment or academic record must be provided and certified by a JP or a solicitor having sighted the original.		
Course		
Institution		
Course		
Institution		

ACADEMIC QUALIFICATIONS		
Course		
Institution		
EMPLOYMENT HISTORY OR ALTERNATIVELY DETAILED RESUME **Note** A Statutory Declaration attesting accuracy must be provided.		
Employer's Name		
Business address		
		Post Code
Business Telephone time/Part time	Fax	Full
Description of Duties		
Years of Service		
Employer's Name		
Business address		
		Post Code
Business Telephone time/Part time	Fax	Full
Description of Duties		
Years of Service		

EMPLOYMENT HISTORY *(cont)*		
Employer's Name		
Business address		
		Post Code
Business Telephone time/Part time	Fax	Full
Description of Duties		
Years of Service		
Employer's Name		
Business address		
		Post Code
Business Telephone time/Part time	Fax	Full
Description of Duties		
Years of Service		

Course completed
Institution
Approx. Date of Completion / /
Course completed
Institution
Approx. Date of Completion / /
Course completed
Institution
Approx. Date of Completion / /
Course completed
Institution
Approx. Date of Completion / /

SPECIALIST AREAS OF EXPERTISE

Note Copies of reports and references must reflect specialist areas of expertise.

MEMBERSHIPS OF PROFESSIONAL BODIES

Note Copies of any membership certificates must be provided and certified by a JP or a solicitor having sighted the original.

Body
Level of Membership

Expiry Date	/ /
Body	
Level of Membership	
Expiry Date	/ /

ADDITIONAL INFORMATION

Note Each of the following must be addressed.

CLAIMS HISTORY.

WHY DO YOU WANT TO JOINT THE INSTITUTE OF BUILDING CONSULTANTS ?

HOW DID YOU FIND OUT ABOUT THE INSTITUTE OF BUILDING CONSULTANTS?

INFORMATION REQUIRED IN APPLICATION

Note, if any of these items are missing your application may be passed over .

1. Completed and signed membership application form.

2. Evidence of qualification: a **certified copy** of any certificates or testamurs or statements or attainment or academic record.

3. A detailed resume of professional or trade work **accompanied by a Statutory**

Declaration attesting its accuracy.
4. Evidence of qualifications: a **certified copy** of any certificates or testamurs or statements or attainment or academic record.
5. Copies of **three** reports that include pre-purchase or specialist consultancy work where applicable.
6. Copy of **current** Professional Indemnity Insurance.
7. Copy of **current** Public Liability Insurance.
8. Three references: • One legal • One Building • One Consumer **Note** One reference must be related to a report being submitted as a sample of your work.
9. Name and contact number of **two** Associates or Colleagues in the building consultancy industry who can attest to your qualifications and experience.
NAME:
CONTACT NO.
NAME:
CONTACT NO.
10. Last twelve months CPD record if holder of Contractor Licence.
Signed Date / /

MEMBERSHIP REQUIREMENTS

FULL MEMBERSHIP – *minimum entrance requirements:*

ACADEMIC QUALIFICATIONS A certificate of accreditation from a technical college and/or TAFE organisation that has a building supervision course or equivalent that has been passed, such as a Building Technician Certificate or Clerk of Works course;

or, a degree, diploma, associated diploma or certificate in Building or Applied Science (Building) from a recognised institution,

or, a degree in Quantity Surveying or Applied Science from a recognised institution,

or, a degree in Engineering (Structural or Civil) from a recognised institution,

or, registration as and Architect, or degree in Architecture or Architectural Science from a recognised institution,

or, qualification which in the opinion of the Committee is equivalent to the above qualifications.

TRADE OF PROFESSIONAL EXPERIENCE

At least 10 years post formal training in the building industry on a full time basis.

CONSTRUCTION EXPERIENCE

Minimum 2 years in supervision, project managing or as a licensed builder (this can make up part of the previous 10 years).

CONSULTANCY EXPERIENCE

A minimum of 40 supervised pre-purchase inspections.

ASSOCIATE MEMBERSHIP – *minimum entrance requirements:*

ACADEMIC QUALIFICATIONS

As specified for Full Membership.

TRADE OF PROFESSIONAL EXPERIENCE

At least 5 years post formal training in the building industry on a full time basis.

CONSTRUCTION EXPERIENCE

Currently working within the building industry on a full time basis.

CONSULTANCY EXPERIENCE

None required. Suitable for those undergoing training with a member for future Full Membership or those who wish to be kept informed and need CPD points for Contractor Licence.