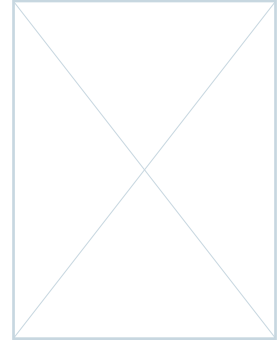


APPLICATION FOR CHARTERED MEMBERSHIP FOR CANDIDATES VIA THE INDUSTRY ROUTE



APPLICATION



Please provide one passport photograph (recent, head and shoulders).
Please confirm/update your personal details here.

PERSONAL DETAILS:

Membership Number:

Surname:

Forename(s):

Title: Date of Birth:

Home Address:

.....

Tel (Home): Mobile:

Email:



**This whole application form and required documents need to
be scanned and sent via email to: pr.application@ciob.org.uk**

APPLICANTS DECLARATION:

1. Royal Charter & Bye-Laws

I understand that I will be considered for the corporate class of membership and if admitted undertake to observe The Royal Charter and Bye Laws, the Rules and Regulations of Professional Competence and Conduct and any other Regulations for the time being in force.

I declare that I have read The Chartered Institute of Building (CIOB) Royal Charter and Bye Laws and The Rules and Regulations of Professional Competence and Conduct. www.ciob.org/about/royalcharter

2. Criminal Convictions

Do you have any unspent convictions that would fall within the relevant criminal convictions defined within Regulation 13 of the CIOB Disciplinary Regulations?

YES NO

If yes, please inform the Institute Secretary at governance@ciob.org.uk

3. Insolvency/Bankrupt

Are you an undischarged bankrupt or within the last three years been subject to any insolvency proceeding or other arrangements with creditors in respect of your debts (such as an Insolvency Voluntary Agreement)?

YES NO

If yes, please provide details:

4. Information on this application

On signing this declaration, I declare:

- That the information provided in this application form is true and accurate;
- That the application form has been completed by myself; and
- That the photograph provided is a true likeness of myself.

If at any time the CIOB discovers that you have failed to disclose any of the above or that you have provided false information, the CIOB reserves the right to investigate the matter under the CIOB Disciplinary Regulations.

Should you have any queries regarding this Applicant Declaration please contact Customer Service on +44 (0)1344 630706

Signature of Applicant: Date:

APPLICANT STATEMENT

What becoming MCIOB means to me and what would I expect to contribute?

If successful, please indicate your preferred title for your certificate by placing a tick in one of the boxes below:

Chartered Builder

Chartered Construction Manager

This does not affect the post-nominal MCIOB.

PART I EMPLOYMENT DETAILS

Please attach:

- A copy of your current job description
- A copy of your most recent personal CV
- Organisation chart that shows where you fit within your company
- CPD record for last 12 months (only required if you have been in membership for a year or more)
- One year forward action plan (this should include personal and company objectives).

EMPLOYMENT DETAILS:

Company Name:

Position in Company:

Employment Type: Date from: To:

Company Address:

Email:

Tel: Mobile:

SELF-EMPLOYMENT DETAILS:

Company Name:

Address:

Email:

Tel: Mobile:

Company Registration Number:

PART 2

UNEMPLOYED

APPLICABLE FOR UNEMPLOYED CANDIDATES

CAREER PLAN

Development need:

How development need will be satisfied:

What will this enable you to do?

PART 3

COMPETENCE REPORT

Please demonstrate your competence in each of the following by reference to examples of your most recent achievements at work (last 3 years) whether employed or self-employed.

SECTION I – Occupational Competence

COMPETENCE 3.1.1 Planning and Organising Work

KNOWLEDGE/EXPERIENCE – Please include at least one example.

COMPETENCE 3.1.2 Managing Health & Safety and Welfare

KNOWLEDGE/EXPERIENCE – Please include at least one example.

COMPETENCE 3.1.3 Managing Quality

KNOWLEDGE/EXPERIENCE – Please include at least one example.

COMPETENCE 3.1.4 Implementing Sustainable Construction Development

KNOWLEDGE/EXPERIENCE – Please include at least one example.

COMPETENCE 3.1.5 Knowledge of Commercial, Contractual and Legal Issues

KNOWLEDGE/EXPERIENCE – Please include at least one example.

SECTION 2 – Management Competence

COMPETENCE 3.2.1 Communication

KNOWLEDGE/EXPERIENCE – Please include at least one example.

COMPETENCE 3.2.2 Decision Making

KNOWLEDGE/EXPERIENCE – Please include at least one example.

COMPETENCE 3.2.3 Managing Information

KNOWLEDGE/EXPERIENCE – Please include at least one example.

COMPETENCE 3.2.4 Leadership and Strategic Management/Financial Management

KNOWLEDGE/EXPERIENCE – Please include at least one example.

COMPETENCE 3.2.5 Developing People or Teams

KNOWLEDGE/EXPERIENCE – Please include at least one example.

COMPETENCE 3.2.6 Innovation

KNOWLEDGE/EXPERIENCE – Please include at least one example.

SECTION 3 – Commitment to Professionalism

COMPETENCE 3.3.1 Professional Judgement and Responsibility

KNOWLEDGE/EXPERIENCE – Please include at least one example.

COMPETENCE 3.3.2 Commitment to abide by the Rules and Regulations of Professional Competence and Conduct

KNOWLEDGE/EXPERIENCE – Please include at least one example.

COMPETENCE 3.3.3 Commitment to CPD

KNOWLEDGE/EXPERIENCE – Please include at least one example.

PART 4

APPLICATION CHECKLIST

You are on the brink of submitting your Professional Review Report, please have a quick look at the list below and make sure your report supplies the information we expect to receive.

Ensuring your report meets these areas will enable us to directly send your submission to the Assessor. We want to avoid having to come back to you for further information, which would obviously slow down the process. In our experience, the list below highlights the areas which, if not covered will mean your report is returned.

SPECIFIC RECENT EXAMPLES

Each section needs at least one good example of how you meet the criteria under the particular heading. Your given examples need to be something you have taken responsibility for and will highlight your competence in that area. Ideally your examples should be current, probably not going back further than 3 years. However, in exceptional circumstances, we would accept an example going back further but not more than 5 years.

It's better to have 1 or 2 really good quality examples rather than lots of unexplained examples.

CPD

Please attach a record of the CPD that you have undertaken over the past year with your report. (Only required if you have been in membership for one year or more).

ORGANISATION CHART

Please attach an Organisation Chart that shows where you fit within your company, showing your manager and any direct reports.

ACTION PLAN

Please attach your Action Plan which should include personal and company objectives and targets for the coming year. This should also include any Training and Development plans.

PERSONAL CV

Please attach your most recent Curriculum Vitae (CV). A generic company CV is not acceptable.

PRESENTATION

Your report should be a narrative with examples from your day-to-day practice. Avoid using bullet points, lists and headings. Please use spell & grammar checker and ensure your report says what you intend it to say. Maybe ask a colleague to have a quick read through for you.

Your report needs to be written in the first person, so 'I' rather than 'we'. Remember, it's you who is applying to be assessed for MCIOB.

JOB DESCRIPTION

Please attach your current job description. This should highlight your day to day responsibilities.

This whole application form and required documents need to be scanned and sent via email to: pr.application@ciob.org.uk

PART 5 EMPLOYER/VERIFIER STATEMENT

Employer/Verifier Declaration: (all sections need to be ticked, please use the additional box below if more than one Employer/Verifier is checking your submission)

Please complete in **BLOCK CAPITALS** by hand

I confirm that the photograph on this application is a true likeness of the applicant named

..... and the Action Plan provided is in place.

I confirm that the evidence provided in the sections ticked below are a true and accurate description of the competencies and work carried out by

I agree to being contacted to confirm them (tick where appropriate):

- | | | |
|--------------------------------|--------------------------------|--------------------------------|
| 3.1.1 <input type="checkbox"/> | 3.2.1 <input type="checkbox"/> | 3.3.1 <input type="checkbox"/> |
| 3.1.2 <input type="checkbox"/> | 3.2.2 <input type="checkbox"/> | 3.3.2 <input type="checkbox"/> |
| 3.1.3 <input type="checkbox"/> | 3.2.3 <input type="checkbox"/> | 3.3.3 <input type="checkbox"/> |
| 3.1.4 <input type="checkbox"/> | 3.2.4 <input type="checkbox"/> | |
| 3.1.5 <input type="checkbox"/> | 3.2.5 <input type="checkbox"/> | |
| | 3.2.6 <input type="checkbox"/> | |

F/MCIOB Signatory or Chartered Member of a professional body

Full Name:

Signature of Employer/Verifier: Date:

Professional Body Name (if appropriate):

Professional Body Membership Number (if appropriate):

Tel:

Email:

I confirm that the evidence provided in the sections ticked below are a true and accurate description of the competencies and work carried out by

I confirm that I agree to being contacted to confirm them (tick where appropriate):

- | | | |
|--------------------------------|--------------------------------|--------------------------------|
| 3.1.1 <input type="checkbox"/> | 3.2.1 <input type="checkbox"/> | 3.3.1 <input type="checkbox"/> |
| 3.1.2 <input type="checkbox"/> | 3.2.2 <input type="checkbox"/> | 3.3.2 <input type="checkbox"/> |
| 3.1.3 <input type="checkbox"/> | 3.2.3 <input type="checkbox"/> | 3.3.3 <input type="checkbox"/> |
| 3.1.4 <input type="checkbox"/> | 3.2.4 <input type="checkbox"/> | |
| 3.1.5 <input type="checkbox"/> | 3.2.5 <input type="checkbox"/> | |
| | 3.2.6 <input type="checkbox"/> | |

F/MCIOB Signatory or Chartered Member of a professional body

Full Name:

Signature of Employer/Verifier: Date:

Professional Body Name (if appropriate):

Professional Body Membership Number (if appropriate):

Tel:

Email:

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w: www.ciob.org

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CIOB94/0315

