



Membership Application form

Before completing this form, please ensure that you have read the *Code of Conduct*.

For your application to be processed, you are required to include a detailed and current curriculum vitae, proof of qualification/s attained (including the units/modules passed within the programme/s, where possible) and appropriate payment. Failure to do so will result in a delay in processing your application. If you are re-applying as an Architectural Technician, TCIAT or a Chartered Member, MCIAT, you are required to complete the CPD activities section. Once processed, you will receive a welcome pack within four weeks of receipt of your application and you can immediately begin to enjoy the benefits of membership.

If you are in practice as a sole practitioner, partner, director or LLP member, you must complete a Practice Profile Form or Practice Profile Form for profile candidates (both available from ciat.org.uk). For information on this, please see *Requirements for CIAT Registered Practices* (available from ciat.org.uk). Your membership will not be confirmed until these items have been received and your registration successful. To apply for free student membership please visit: <https://ciat.org.uk/membership/join/student-application-form.html>.

PLEASE COMPLETE THIS FORM IN CAPITAL LETTERS AND BLACK INK (IF COMPLETING BY HAND)

I wish to apply for the following grade of membership:

Please tick appropriate box

Associate (ACIAT) (Sections A, B, E and F) Profile candidate (Sections A, C, E and F)

I wish to re-apply for the following grade of membership:

Please tick appropriate box

Architectural Technician, TCIAT (Sections A, D, E and F) Associate (Sections A, B, E and F)
 Profile candidate (Sections A, C, E and F)
 Chartered Member, MCIAT — if lapsed for less than three years (Sections A, D, E and F)
 Profile candidate type C — if lapsed for more than three years as a Chartered Member (Sections A, C, D, E and F)

If you have been a member of the Institute in the past, please state your previous membership grade, number and year lapsed:

Grade: Membership Number: Year lapsed:

I wish to progress to the following grade of membership:

Please tick appropriate box

TCIAT (professionally qualified Architectural Technician) MCIAT (Chartered Architectural Technologist)

Why did you decide to join CIAT?

Please tick appropriate box

Royal Charter Recognition Professional advancement Training/CPD Networking
 Recommendation Client request Company/practice request Other (please state) :

<input type="checkbox"/> Foundation degree	Subject:
<input type="checkbox"/> HNC/D	Subject:
<input type="checkbox"/> N/SVQ	Subject: Level:
<input type="checkbox"/> Other	Subject: Level:

University/college studied at:

Date of Qualification: / / I enclose proof of attainment, including the units/modules passed

SECTION C - Profile candidate

Please tick the appropriate box

profile type A profile type B* profile type C*

*mandatory if self-employed — see Guidance to members offering/providing architectural advice or services

I agree to register my practice, by returning the *Practice Profile Form* for profile candidates and to attain approval of my business stationery, together with evidence of holding current professional indemnity insurance.

Membership number (if relevant):

Number of years' relevant practical experience:

Professional qualification(s) (if any):

ACADEMIC QUALIFICATIONS

Please tick the appropriate box

<input type="checkbox"/> Doctorate	Subject:
<input type="checkbox"/> Masters	Subject:
<input type="checkbox"/> Postgraduate cert/dip	Subject:
<input type="checkbox"/> Honours degree	Subject:
<input type="checkbox"/> Degree	Subject:
<input type="checkbox"/> Foundation degree	Subject:
<input type="checkbox"/> HNC/D	Subject:
<input type="checkbox"/> N/SVQ	Subject: Level:
<input type="checkbox"/> Other	Subject: Level:

University/college studied at:

Date of Qualification: / / I enclose proof of attainment, including the units/modules passed

SECTION D - CPD compliance (all applicants seeking TCAT and MCAT re-entry)

In order to confirm that during the time you were not a member you maintained both your technical and professional competence, you are required to complete this section outlining details of the type of CPD activities undertaken whilst inactive. Please use additional pages if required.

Type of activity	Subject area	Frequency of activity	Approximate dates (if course/seminar)
Seminars			
Training courses			
In house training			

Type of activity	Subject area	Frequency of activity	Approximate dates (if course/seminar)
Magazines/journals			
Books			
Website/email updates			
Networking events			
Professional body regional activities			
Site visits			
Other			

SECTION E - Declaration (*all applicants*)

I submit this form and additional documentation as an accurate record in support of my application for election or re-election to membership of the Chartered Institute of Architectural Technologists. I fully understand the requirements for membership as set out in the *AT: How to qualify* booklet and the *Code of Conduct*. I agree to accept the decision of the Institute regarding my eligibility for election. If elected to membership, I will abide by the rules and regulations specified in the Institute's Charter, Byelaws and Regulations* and agree to abide by the Institute's *Code of Conduct*, and any other directive issued by CIAT. I will keep CIAT informed of any change in my circumstances in writing, which may affect my membership. Prior to confirmation of registration, a Member or profile candidate in private practice as sole practitioner, partner, director or LLP member must obtain formal registration with the Institute by completing the *Practice Profile Form*, obtaining approval of their business stationery and providing evidence of current professional indemnity insurance showing expiry date.

*Can be found at: ciat.org.uk/en/the_institute/about-ciat/ciats-charter/Charter_Regulations.cfm

Disclosure – General Data Protection Regulations (GDPR) 2018

All personal data will be held in accordance with GDPR principles. If you have any queries or requests, please contact membership@ciat.org.uk or refer to the Institute's Privacy Statement (<https://ciat.org.uk/privacy-policy.htm>). N.B. You cannot elect to be excluded from CIAT related mailings (via mail or email).

I do **not** wish to receive details about products and services which CIAT believes to be of interest to me.

Signature of applicant: Date: / /

SECTION F - Referee (*all applicants*)

I am willing to act as referee in support of this applicant as I consider him/her to be suitable for election or re-election to membership. The information on this form is, to the best of my knowledge and belief, correct. I am not related to the applicant.

Signature of referee: Date: / /

Name of referee:

Job title of referee:

Professional qualification(s) of referee:

Email of referee:

Checklist of items to be included with this form

I have completed the following:

- All appropriate sections of the application form
- Signed the declaration in Section E
- Nominated a referee in Section F
- Enclosed the appropriate fee(s)
- Enclosed copies of my proof of qualification(s)
- Enclosed a copy of my current curriculum vitae
- CIOB/RIBA proof of membership *(if applicable)*

If applying for Profile Type B or C:

- Practice Profile Form for profile candidates
- Proof of current professional indemnity insurance
- Business stationery

If applying for re-entry as a Chartered Member:

- Practice Profile Form
- Proof of current professional indemnity insurance
- Business stationery

FEES ENCLOSED:

£/€ Application fee

£/€ Membership subscription

£/€ Total amount due *(please make cheques payable to CIAT)*

PLEASE RETURN THIS FORM TO:

Membership Department
Chartered Institute of Architectural Technologists
397 City Road,
London,
EC1V 1NH, UK

**FOR ANY QUERIES PLEASE CONTACT THE
MEMBERSHIP DEPARTMENT:**

T. +44 (0)20 7278 2206
E. membership@ciat.org.uk
ciat.org.uk