

Application for Advancement to Fellow

Personal details Please print in BLOCK CAPITALS

TitleDr <input type="checkbox"/>	Mr <input type="checkbox"/>	Mrs <input type="checkbox"/>	Ms <input type="checkbox"/>	Miss <input type="checkbox"/>	Other <i>(please specify)</i> <input type="text"/>
Surname <input type="text"/>			Given names <i>(in full)</i> <input type="text"/>		
Date of birth <input type="text"/>		Sex F <input type="checkbox"/> M <input type="checkbox"/>		Preferred Name <input type="text"/>	

Contact details Please print in BLOCK CAPITALS

Private address		Business address	
Address <input type="text"/>		Position <input type="text"/>	
<input type="text"/>		<input type="text"/>	
City <input type="text"/>		Organisation <input type="text"/>	
<input type="text"/>		<input type="text"/>	
State <input type="text"/>	Postcode <input type="text"/>	Address <input type="text"/>	
<input type="text"/>	<input type="text"/>	<input type="text"/>	
Country <input type="text"/>		City <input type="text"/>	
<input type="text"/>		<input type="text"/>	
Phone <input type="text"/>	Fax <input type="text"/>	State <input type="text"/>	Postcode <input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Email <input type="text"/>		Country <input type="text"/>	
<input type="text"/>		<input type="text"/>	
Mobile <input type="text"/>		Phone <input type="text"/>	Fax <input type="text"/>
<input type="text"/>		<input type="text"/>	<input type="text"/>
		Email <input type="text"/>	
		<input type="text"/>	
		Mobile <input type="text"/>	
		<input type="text"/>	
Preferred contact address Private <input type="checkbox"/> Business <input type="checkbox"/>			

Date of admission as an Associate Member

Date <input type="text"/>	Applicants must have been an Associate for ten years immediately prior to the date of the application for Fellowship.
<input type="text"/>	

Employment history

Applicants must have practised in the property industry in full-time employment for an aggregated total of at least 10 years prior to date of the application for Fellowship.

Principal Area(s) of Work (Tick only 1)

This information is for statistics on API membership only. If you work in more than one area please tick the most appropriate box.

- | | |
|---|--|
| <input type="checkbox"/> Property Management Property | <input type="checkbox"/> Property Research |
| <input type="checkbox"/> Education | <input type="checkbox"/> Property or Land Development |
| <input type="checkbox"/> Property Law | <input type="checkbox"/> Property Consultancy Property |
| <input type="checkbox"/> Corporate Real Estate | <input type="checkbox"/> Finance |
| <input type="checkbox"/> Sales, Leasing & Negotiation | <input type="checkbox"/> Valuation |
| <input type="checkbox"/> Property Business Management | <input type="checkbox"/> Real Property Plant |
| <input type="checkbox"/> Facilities Management | <input type="checkbox"/> & Machinery |
| <input type="checkbox"/> Funds Management | <input type="checkbox"/> Business |
| <input type="checkbox"/> Asset Management | |

Referees

Three Fellows of the API to whom the applicant is personally known must recommend the applicant for Fellow membership. Please nominate your referees with your application.

Referee 1

Name

Postal Address

Company

Phone

City

Email

State

Postcode

Referee 2

Name

Postal Address

Company

Phone

City

Email

State

Postcode

Referee 3

Name

Postal Address

Company

Phone

City

Email

State

Postcode

Fellowship Criteria

Please attach a statement outlining your achievement in each of the following criteria:

- have made a significant personal contribution over a reasonable period to the property profession through serving on National Council or the National Professional Board or a Divisional Council or Standing Committee, the preparation and delivery of significant papers to conventions or the Institute Journal;
- have satisfied the Divisional Council that the applicant is a person of good character and repute. Have served the property professions with distinction;
- have been recognised as having a high level of competence in the property profession;
- have demonstrated leadership in a property discipline or have made a substantial contribution to the advancement of the profession or the development and dissemination of property knowledge.

Privacy

Disclosure Statement and Member Consent Clause

The Australian Property Institute (API) is committed to protecting the privacy of the personal information you provide to us. We need to collect the personal information requested on this form to enable us to process your membership and/or certification application and provide you with a range of membership services. If you do not provide us with the information in this form or any additional information we request, we may not be able to process your application or provide you with membership services.

We may disclose the personal information we collect on this form and any additional information that you provide to us in connection with this application to our relevant staff, contractors and Committee members involved in delivering our services.

When other members of the Institute or the public make enquiries, Institute staff may provide them your name, membership class, employment organisation and business telephone number.

API Divisional Offices will at any time provide access to you to verify the personal information we hold, and where necessary, correct any errors in this information (some restrictions and costs may apply).

By completing and returning this application form and/or providing us with any additional information in connection with your application, you agree to us using and disclosing your information as set out above. By providing your email address you consent to receiving electronic correspondence from the API.

This consent to the use and disclosure of your personal information remains valid unless you alter or revoke it by giving written notice to your Division.

Changes to Your Personal Information

In order for the Institute to provide you with membership services, we need your current contact information. If you change your name, postal address, employer, position, telephone, fax or email address at any time, you should advise your Divisional Office of these changes.

Further Information

The API's Corporate Privacy Policy is published on the API website at: www.api.org.au

Good Character and Repute

	True	False
■ I have never been declared bankrupt or insolvent	<input type="checkbox"/>	<input type="checkbox"/>
■ I have never been convicted of an offence punishable with imprisonment for three months or more	<input type="checkbox"/>	<input type="checkbox"/>
■ I have never been convicted of any offence in connection with the promotion, formation or management of a corporation	<input type="checkbox"/>	<input type="checkbox"/>

Applicant's Declaration

I undertake that on admission as a Fellow Member I will be bound by and agree to abide by the Constitution and By-laws including all Fundamental Rules, Code of Ethics, Rules of Conduct, Practice Standards and Continuing Professional Development (CPD) and any other requirements that may be adopted by the Institute from time to time.

Signature of applicant

Dated