**Application Form**

Stage 1: Preparation

***Current or previous CIEHF members:*** *Please check and if necessary update your contact details in your CIEHF account on* [*ergonomics.org.uk*](http://www.ergonomics.org.uk)*.*

***Non-CIEHF members:*** *Please create an account on our website* [*ergonomics.org.uk*](http://www.ergonomics.org.uk)*. You don’t have to join as a member prior to your application, but please enter your full contact details.*

*Your* ***user name*** *is the email address you use to log in to our website with.*

|  |  |
| --- | --- |
| Your full name |  |
| Your CIEHF user name (preferred email address) |  |
| Are you currently a member of the CIEHF? If so, what grade? |  |

Qualifications

|  |  |  |  |
| --- | --- | --- | --- |
| Qualification | Subject | Year | University/Institute |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

Current work

*Please provide details of your current work. Previous employment should be outlined in your accompanying CV.*

|  |
| --- |
| **Job title and employment status** |
|  |
| **Current employer** |
|  |
| **Work activities**  *Please indicate your main work activities and responsibilities and anything else you do as part of your job.* |
|  |

CPD

*Please provide a CPD record. You should provide 5 entries that cover a 12 month period immediately prior to the date of this application. The entries should demonstrate how you are continuing to develop and learn and should detail activities that are not covered in your log book, including other relevant activities such as Institute posts, volunteering, presentations, sector or working group membership.*

*The description should detail what you did, reflect on what you learnt and comment on how it improved you professionally, either by adding to your set of competencies or increasing your level of proficiency.*

*You must also include a Forward Plan of 3 activities showing how you intend to maintain and develop your competencies over the coming year.*

*Please complete your CPD record online, by logging into your CIEHF account (in MyAccount>MyCPD). Once complete, export the record and include with this application. Alternatively, you may choose to complete this table below.*

Current CPD Activities

|  |  |  |
| --- | --- | --- |
| Date | Activity | Description |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |

Forward Plan

|  |  |  |
| --- | --- | --- |
| Date | Activity | Description |
|  |  |  |
|  |  |  |
|  |  |  |

Stage 2: Assessment

Referees and Mentor

*Please contact your referees and mentor (if applicable) and ask them to email their reports directly to* [***membership@ergonomics.org.uk***](mailto:membership@ergonomics.org.uk)

*Please indicate if you are applying via the mentored, or non-mentored route:*

|  |  |  |  |
| --- | --- | --- | --- |
| Mentored |  | Non-mentored |  |

|  |  |  |  |
| --- | --- | --- | --- |
| **Referee 1** | | | |
| Name |  | | |
| CIEHF Registered Member or Fellow? | Yes / No | If no, equivalent membership of another organisation |  |
| Employer |  | | |
| Email |  | | |
| **Referee 2** | | | |
| Name |  | | |
| CIEHF Registered Member or Fellow? | Yes / No | If no, equivalent membership of another organisation |  |
| Employer |  | | |
| Email |  | | |
| **Referee 3** (for non-mentored route) | | | |
| Name |  | | |
| CIEHF Registered Member or Fellow? | Yes / No | If no, equivalent membership of another organisation |  |
| Employer |  | | |
| Email |  | | |
| **Mentor** (for mentored route) | | | |
| Name |  | | |
| Employer |  | | |
| Email |  | | |

Declaration

By signing this application I declare:

* I will comply with the regulations of the Institute.
* I will uphold and abide by the Institute’sCode of Professional Conduct.
* I will maintain and develop my professional competence, and record my Continuing Professional Development as required by the Institute.
* I will not bring the Institute, or profession of ergonomics and human factors, into disrepute.
* That the whole of the information contained in this application and supporting documentation is true, accurate and complete to the best of my knowledge and belief.

I confirm:

* I am not, and have never been, the subject of a finding of professional misconduct against me by any professional body.
* I have never been convicted of a criminal offence (other than minor motoring offences).

I undertake to pay the application fee and the Institute’s annual subscription fee. I understand that my acceptance as a member is conditional on the above.

*Please sign or add your digital signature with the date below*

**Signature**

**Date**

Final check

*Please complete this table to ensure you have included all the necessary documents.*

|  |  |
| --- | --- |
| *Documents to include in your application* | *Yes = included* |
| Professional Competency Checklist |  |
| Log book |  |
| Supporting evidence such as reports or publications |  |
| Qualification certificates |  |
| CPD |  |
| Current CV |  |

*Please send this application form and these documents via WeTransfer (*[*https://wetransfer.com*](https://wetransfer.com)*) to* ***membership@ergonomics.org.uk***