



THE INSTITUTE OF THE MOTOR INDUSTRY

Engineering Application Form

Title:	Forename(s):	Surname:
Membership No:	Current Grade:	Date of Birth:
Home Address:		
Postcode:	Telephone Number:	
Email Address:	Mobile Number:	

EMPLOYMENT DETAILS

Job Title:	No. Of Staff Under Your Control:
Responsibility:	
Company Name:	Time in Current Job: Years Months
Company Address:	Time in Motor Industry: Years Months
	Job Type: (See codes overleaf)
	Specialism: (See codes overleaf)
Postcode:	Business Type: (See codes overleaf)
Telephone Number:	Franchise: (If Applicable)

CAREER HISTORY SINCE INITIAL MEMBERSHIP APPLICATION (Continue On Separate Sheet If Necessary)

From	To	Job Title	Company Name	Business Type

QUALIFICATIONS AND TECHNICAL UPDATING OVER THE LAST 2 YEARS (Continue On Separate Sheet If Necessary)

Date	Level	Description	Place

Please enclose £10 application fee (non-returnable) or provide credit card details: -

Card No.																			
Expiry Date	Security No. <small>last 3 digits of number printed on signature strip</small>	Card Type: <small>(please circle applicable card)</small> •VISA •MasterCard •Switch/Maestro	Switch/Maestro Issue No.																

I confirm that the information supplied on this form and submitted in support of my application is correct.

Signature:	Date:
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Please complete and return the form enclosing copy certificates to **Membership Services** at:
The Institute of the Motor Industry, Fanshaws, Brickendon, Hertford SG13 8PQ Tel: 01992 511 521

For Office Use: Grade

Initials

Date