ASSOCIATION OF CONSULTING ENGINEERS OF ZAMBIA

The Chief Executive Officer Association of Consulting Engineers P.O. Box 32562 Lusaka, Zambia

MEMBERSHIP APPLICATION FOR NATURAL PERSON (Associate Member/ Member)

I wish to apply for membership of the Association of Consulting Engineers of Zambia. I have read the Constitution of the Association and I am submitting the following information:

1.	Full Names (block letters)					
2.	Firm Represented					
	a) Business Address in Zambia					
	i. With an established office in Zambia					
	ii. Outside Zambia					
3.	3. Position within Firm (delete categories not applicable): Sole Practitioner/Partner/Director/Shareholder/Resident representative/Employee					
4.	Membership applied for (Tick as appropriate):					
	a) Associate Member * Mentor Provided					
	b) Member					
5.	Professional Memberships (If necessary continue on separate sheet)					
	Institutions	Grade of Membership				
5.	Length of time Applicant has been practising as a Consulting Engineer:					
Lo	ocation of Office					
	ldress for Correspondence					
Te	elephone No FaxE-Mail					
Da	nteSigned					

Requirements for Individual/Sole Practitioner:

- Identity (NRC/Passport)
- Professional Certificates
- Educational Certificates
- Engineering Registration (Eng. RB)
- Engineering Institute of Zambia Registration (EIZ)
- Curriculum Vitae (CV)
- Two ACEZ References
- If applying for Associate Member please provide a letter from mentor
- Possess less than 10 years of Experience

Requirements for Associate Member:

- Professional Certificates
- Educational Certificates
- Engineering Registration (Eng. RB)
- Engineering Institute of Zambia Registration (EIZ)
- Curriculum Vitae (CV)
- Two ACEZ References
- If applying for Associate Member please provide a letter from mentor
- Poses less than 10 years of experience

ACEZ CURRICULUM VITAE

Family name: First names: Date of birth: Nationality: Civil status: Education:						
Institution		Degree(s) o	r Diploma(s) obtain	ned:		
(Date from - Date to)						
Language skills: Indicate competence on a scale of 1 to 5 (1 - excellent; 5 - basic)						
Language		Reading	Speaking	Writing		
Membership of professional bodies:						

Other skills: (e.g. Computer literacy, etc.)

Professional experience

Date from - Date to	Location	Company & reference person (name & contact details)	Position	Description 1*

Other relevant information (e.g., Publications)

1* In your description of your experience highlight your previous consulting engineering competencies along with your overall professional

*NB. Having read the ACEZ Constitution, we the undersigned present this applicant from personal knowledge as a person worthy of consideration for election to the ACEZ.

TWO REFERENCES FROM THE ASSOCIATION OF CONSULTING ENGINEERS OF ZAMBIA (ACEZ)				
Name of ACEZ Member:	Date:			
Consultancy Firm:	Signature:			
Physical Address:				
Email Address:				
Contact Number:				
Name of ACEZ Member:	Date:			
Consultancy Firm:	Signature:			
Physical Address:				
Email Address:				
Contact Number:				