

Hong Kong Institute of Environmental Impact Assessment
P.O. Box 28756, Gloucester Road Post Office, Hong Kong

**MEMBERSHIP APPLICATION FORM FOR
FELLOW/MEMBER/ASSOCIATE/AFFILIATE/STUDENT***

Complete by typewriter please * Delete as appropriate

Surname _____

Other Name _____

Title (Prof., Dr., Mr., Mrs., Ms., Miss etc.)* _____

Date of Birth _____ (Day) _____ (Month) _____ (Year) _____ (Age)

Hong Kong Identification Card/Passport* Number _____

Corresponding Address _____

Fax _____ Telephone _____ E-mail Address _____

I declare that I have attained the required professional experience or academic qualifications as indicated in the Institute's Memorandum for the election to the Hong Kong Institute of Environmental Impact Assessment grade of Fellow/Member/Associate/Affiliate/Student*. A brief summary of my relevant experience and qualifications is attached.

If elected for membership I agree to be bound by the rules and regulations of the HKIEIA.

Signature

Date

Please return the attestation form with the appropriate membership dues.
(Fellow-HK\$1,000 / Member-HK\$600 / Associate or Affiliate-HK\$500 / Student-HK\$200)

For Official Use Only :	
Date Received :	Membership Number <input type="text"/>
Date Acknowledged :	
Committee Date :	
Election/Rejection Letter	



Academic & Professional Qualifications

(Photocopies of documentary evidence must be produced and certified by supporters as a true copy)

Date	Academic and Professional Qualifications	Supporters' Initials

Professional Experience

(Details of employment with duties, job specification and responsibilities. Append additional sheets or CV if necessary)

Date	Experience in EIA or related works	Supporters' Initials

Attestation by Supporters (for application of Fellow/Member/Associate/Affiliate membership only)

We, the undersigned, supported the Candidate from personal knowledge, as a person worthy of consideration for election to the class of Fellow/Member/Associate/Affiliate* and we certified the correctness of those parts of this application which we have identified by our initials.

Supporter 1/Proposer (for Students only)

Signature _____ FHKIEIA / MHKIEIA* **Initial** ()

Full Name _____ Contact No. _____

Supporter 2

Signature _____ FHKIEIA / MHKIEIA* **Initial** ()

Full Name _____ Contact No. _____

Supporter 3

Signature _____ FHKIEIA / MHKIEIA* **Initial** ()

Full Name _____ Contact No. _____

