

# Membership Application Form



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**PART THREE: COURSE DETAILS**

Please provide details of the course of interpreter training you are currently undertaking:

Educational establishment:	
Name of course:	
Length of course:	
Anticipated date of completion:	
Interpreting qualification:	<input type="checkbox"/> Diploma in Public Service Interpreting (DPSI) <input type="checkbox"/> Diploma in Police Interpreting (DPI) <input type="checkbox"/> Diploma in Community Interpreting (Level 6) <input type="checkbox"/> MA in Conference Interpreting <input type="checkbox"/> Other (specify): .....

**PART FOUR: PROFESSIONAL MEMBERSHIPS**

Are you a Member of any of the following:

- Institute of Translation and Interpreting (ITI)  Year of joining: .....
- Chartered Institute of Linguists (CioL)  Year of joining: .....
- Association of Sign Language Interpreters (ASLI)  Year of joining: .....
- Other (*specify*) .....  Year of joining: .....

Are any APCI Members known to you? If so, please name two:

Name \_\_\_\_\_ Telephone number \_\_\_\_\_

Name \_\_\_\_\_ Telephone number \_\_\_\_\_

**PART FIVE: WORK EXPERIENCE**

Please provide details of your current and recent employment:

Employer	Role	From	To

**PART SIX: SECURITY CLEARANCE**

Do you have leave to work in the United Kingdom? Yes / No / Don't know

Have you been vetted or security cleared? Yes / No / Don't know  
*Please enclose a copy of your confirmation letter (not the original).*

If so, to which level? *eg NPPV, CTC, SC, DV* \_\_\_\_\_

Who cleared you? *eg MPS, Home Office, Warwickshire Police* \_\_\_\_\_

Do you have DBS (Enhanced) clearance? Yes / No / Don't know  
*Please enclose a copy of your certificate (not the original).*

Are you registered for DBS Update? Yes / No / Don't know

**PART SEVEN: FURTHER INFORMATION**

How did you hear of APCI? \_\_\_\_\_

Why do you wish to join APCI? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Please let us know if you have any of the following experience/skills:

- Committee work     Teaching     Accounts/bookkeeping     Desk top publishing
- Event management     Lecturing     Sage Accounting     Microsoft Publisher
- Charitable work     DPSI Training     Secretarial skills     Adobe InDesign
- Fundraising     Microsoft Excel     Website design     Adobe Photoshop
- Public speaking     MS Power Point     Database management     \_\_\_\_\_

**PART EIGHT: DECLARATION**

1. I declare that the information on this form is true and accurate to the best of my knowledge and belief and I tender it in support of my application. I enclose the supporting documents required as detailed above.
2. I apply for Student Membership of APCI. I undertake to inform APCI if at any time I withdraw from or complete the course of study referred to in Part Three above.
3. I undertake for as long as I remain an APCI member to abide by the standards of conduct, standards of work and confidentiality contained in the APCI Code of Practice.
4. I consent to the data controller, APCI, holding and processing my personal data or allowing such data to be processed on its behalf by a partner organisation for the purpose of the administration of my membership and the provision to me of member services.
5. I consent to the data controller, APCI, using my personal data to send me electronic communications for the purpose of the administration of my membership and the provision to me of member services.

Signed \_\_\_\_\_ Date \_\_\_\_\_

**Please return this form to the Membership Secretary at:  
 APCI, Davenport House, 16 Pepper Street, London E14 9RP**