

Membership Application Form



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Interview date	
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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**