

Application Form for 'Professional Grade' of Membership of The Institute of Agricultural Management

This form is to be used by existing members applying for re grading and new applicants applying for the 'Professional Grade' of membership of IAgM.

The completed application form along with a copy of a current CV, confirmation of training and other supporting documentation should be sent to The Director IAgM at the address at the foot of this form. The application will be assessed by the Institute's Professional Affairs Committee and the result of this review will be confirmed in writing to the applicant and this part of the process will normally take no longer than a month.

1. Personal Details Surname (and title).....

Christian Names.....

Address.....

.....

Postcode Date of Birth

Email Address

2. Membership of IAgM

Are you a current member of the Institute of Agricultural Management? **YES / NO**

3. Membership of Other Organisations

Please list membership of other organisations associated with your employment along with the grade.

.....

.....

4. Occupation

(a) Occupation status, ie owner/partner/manager/employee/job title

.....

.....

(b) If the business is farming, please give details of the farm business – eg size, main enterprises, labour force, approximate turnover

.....

.....

(c) For other business, please provide as much information as you can about the nature of the business

.....

.....

.....

(d) For applicants in other professions, please give as much information as you can about the purpose and activities of the organisation.

.....

.....

.....

5. Responsibilities

Please indicate your role and responsibilities in your current position

.....
.....

6. Previous Employment

Please provide brief details of previous employment, including your position, responsibilities and dates

.....
.....
.....

7. Education

Please give details of all post-school qualifications, name of institutions attended and the dates

.....
.....
.....
.....
.....

8. Training Courses

Please list the details of short courses and other training activity undertaken since full-time education completed (this can be provided on a separate sheet and to include a copy of a CPD record if you have one)

.....
.....
.....
.....

7. Other Relevant Information

Please indicate here any other information which you deem to be relevant to your application.

.....
.....
.....
.....
.....
.....
.....
.....
.....

DECLARATION

- 1. I wish to be considered for the ‘Professional Grade’ of membership of The Institute of Agricultural Management.
- 2. I certify that the particulars given on the form are a fair and true record of my training and career in agricultural management or related profession. I agree to any reasonable checks being made by The Institute of Agricultural Management in confirmation.
- 3. If accepted as a ‘Professional Member’ of the Institute, I agree to maintain a high standard of professional practice, conduct and integrity and provide proof of my continued professional development. I understand that failure to observe an acceptable code of conduct and confirmation of CPD will result in my ‘Professional Member’ grade being down graded to that of a member or possible being removed from Institute membership.

Signed Date

RETURN TO:

THE INSTITUTE OF AGRICULTURAL MANAGEMENT

Portbury House, Sheepway, Bristol BS20 7TE Telephone: 01275 843825 Fax: 01275 374747
cooksleyandco@btconnect.co

For IAgM use _____

Application reviewed by the directorDate

Application Sent to review committeeDate

Recommendation received by from CommitteeDate

.....

Interview Required YES/NO if yes date:

Confirmation sent to applicantDate

Comments: