



Institution of Construction Project Managers of Kenya

SKILL • RESPONSIBILITY • INTEGRITY

P. O Box 1654 – 00502
 Nairobi Kenya
 Tel (254) 02 20-2196 313
info@icpmk.co.ke
www.icpmk.co.ke

APPLICATION FOR REGISTRATION AS A MEMBER

Please complete in block letters and tick appropriate choices

1A) BIODATA

SURNAME			
FIRST NAME			
TITLE (Prof./Dr./Mr./Mrs./Ms./Other)			
DATE OF BIRTH	MALE	FEMALE	
PROFESSIONAL QUALIFICATIONS			
COMPANY NAME AND ADDRESS			
PRESENT POSITION			
POSTAL ADDRESS	CODE:		
TELEPHONE NUMBER	MOBILE:		
E-MAIL	FAX:		

1B) WHAT CATEGORY BEST DESCRIBES YOUR JOB FUNCTION?

<input type="checkbox"/>	Architecture	<input type="checkbox"/>	Civil Engineering
<input type="checkbox"/>	Quantity Surveying	<input type="checkbox"/>	Electrical/Electronic Engineering
<input type="checkbox"/>	Facilities Management	<input type="checkbox"/>	Mechanical Engineering
<input type="checkbox"/>	Construction Management	<input type="checkbox"/>	Other (Specify)

2) ACADEMIC AND PROFESSIONAL QUALIFICATIONS

2A) ACADEMIC QUALIFICATIONS

School, College or University	Location	Date		Diploma/Degree Awarded
		From	To	

2B) PROFESSIONAL QUALIFICATIONS

Institution	Location	Date of admission	Qualification

Note: Please attach certified copies of certificates

3) MEMBERSHIP AND REGISTRATION BY OTHER PROFESSIONAL BODIES AND STATUTORY BOARDS

3A) MEMBERSHIP REGISTRATION BY OTHER PROFESSIONAL BODIES

Indicate whether registered by :	State Class of Membership
<input type="checkbox"/> Architectural Association of Kenya (AAK)	
<input type="checkbox"/> Institution of Engineers of Kenya (IEK)	
<input type="checkbox"/> Institution of Quantity Surveyors of Kenya (IQSK)	
<input type="checkbox"/> Physical Planners Registration Board (PPRB)	
<input type="checkbox"/> Other (specify)	

3B) REGISTRATION BY STATUTORY BOARDS

Indicate whether registered by :	Registration Number
<input type="checkbox"/> Board of Registration of Architects and Quantity Surveyors	
<input type="checkbox"/> Engineers Registration Board (ERB)	
<input type="checkbox"/> Physical Planners Registration Board	
<input type="checkbox"/> Other (specify)	

Note: Please attach certified copies of certificates

4) DETAILS OF PRACTICAL PROFESSIONAL EXPERIENCE

<i>Note: Applicants to submit a chronological history of practical experience, including name and address of each company and description of each position held.</i>

5) REFERENCES

Attach letters of reference from three referees in any of the professional categories shown in Section 2 above		
1	Name: _____	Address: _____ Tel: _____
2	Name: _____	Address: _____ Tel: _____
3	Name: _____	Address: _____ Tel: _____

6) MEMBERSHIP CATEGORY AND ENTRANCE FEE

Enclose a banker's cheque of KShs 1500 non-refundable application fee <u>and</u> appropriate entrance fees as follows: Bank Details: KCB Karen, Account No. 1107013259					
Honorary Member	Fellow Member	Corporate Member	Visiting Member	Graduate Member	Student Member
KSh 10,000/=	KSh 10,000/=	KSh 5,000/=	KSh 5,000/=	KSh 2,000/=	KSh 500/=

The minimum requirements for corporate membership are: 1) University degree in relevant professional discipline in construction industry.
 2) Professional qualification / registration or equivalent in relevant professional discipline.
 3) Minimum 10 years relevant practical experience

7) UNDERTAKING

I, the undersigned, agree that, in the event of my admission as a member of the Institution, I shall be governed by the Institution's Constitution and Bylaws. I certify that the information given by me in this application is true and correct.		
SIGNATURE:	NAME:	DATE:

FOR OFFICIAL USE				
Received: _____		Approved: _____	Not Approved: _____	Registration Class and Number: _____
Signed:				
Chairman: _____		Registrar: _____	Council Member: _____	