

APPLICATION FOR REGISTRATION AS A CHARTERED SCIENTIST ACCELERATED WORKSHOP ROUTE

This form acts as a registration for both workshop and subsequently as registration for Chartered Scientist (providing you meet the criteria). Carefully read the CPD, Data Protection Agreement and Confidentiality Agreement on the next page and sign and date.

Please return this form with the workshop fee. Places will be allocated on a first come, first-served basis. The fee covers the workshop, assessment and interview fees, and your CSci subscription to the end of the calendar year. Payment must be received at least 4 weeks before the workshop to confirm your space. If you book a workshop within those 4 weeks, you are required to pay upon booking to confirm your space.

WORKSHOP DATE YOU WANT TO ATTEND:

Personal Information			
First Names:		Surname:	
Title:	<input type="checkbox"/> Dr <input type="checkbox"/> Miss <input type="checkbox"/> Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Ms <input type="checkbox"/> Mx <input type="checkbox"/> Prof <input type="checkbox"/> Other		

Professional Membership	
Membership Category:	<input type="checkbox"/> Fellow <input type="checkbox"/> Member
Existing Chartered Designations:	

PAYMENT (Select one)

- I have called +44 (0)20 3862 7484 and paid by credit/debit card
- I would like to pay by bank transfer to: **INST OF ENVRNMNTL SCIENCES, 65225655, 08-92-99**
- I would like an invoice sent to this email address:
Please provide a Purchase Order number if required to expedite the process:
- I am enclosing a cheque made payable to: 'Institution of Environmental Sciences'

DIETARY REQUIREMENTS

- No special requirements
 Vegetarian
 Vegan
 Other (please specify)

DISABILITY REQUIREMENTS

If you consider yourself to have a disability that may affect your ability to access the IES office, complete your report or interview in the timescales available, or have any additional impact on your application please contact info@the-ies.org

HOW DID YOU HEAR ABOUT CSCI ACCELERATED?

- IES Website
 ESMonthly
 LinkedIn
 Twitter
 Word of Mouth
 Other (please specify)

FOR OFFICE USE ONLY			
<input type="checkbox"/> Form completed correctly <input type="checkbox"/> Completed Competencies report <input type="checkbox"/> Enclosed a long-form cross-referenced CV <input type="checkbox"/> Supporter statements signed	<input type="checkbox"/> Enclosed authenticated certificates <input type="checkbox"/> Enclosed CPD Summary & uploaded online <input type="checkbox"/> Paid workshop fee		
<input type="checkbox"/> Report Assessment forms approved	<input type="checkbox"/> PRI assessment forms approved (if required)		
Confirmed by:		Date:	



CPD, CODE OF ETHICS, DATA PROTECTION AGREEMENT AND CONFIDENTIALITY STATEMENT

CANCELLATION, REFUND AND TRANSFER POLICY: Due to the high demand for these workshops, no refunds will be permitted if cancellation occurs within 3 weeks of the workshop date. This includes transferring your space to an alternative workshop; in this event, you will be charged for an additional workshop space. Cancellations prior to this date will be entitled to a full refund, or an alternative workshop date.

DATA PROTECTION: To administer your CSci and deliver you associated services, it is essential for us to process your personal data and store it in an electronic format. We have outlined how this information may be used and why in our [Privacy Statement](#). It is our policy to retain your details for 3 years after your membership has expired, but you are welcome to request its removal at any time. Please note, it is also necessary for your personal data, including your name, date of birth, gender, address and employer, to be passed on to the registration body, the Science Council, to establish and maintain your CSci. For more information about how the Science Council use your personal data, please read their [Privacy Policy](#).

I confirm I have read both Privacy Statements and am happy for the Institution of Environmental Sciences (IES) and the Science Council to process my personal data in order to maintain my CSci registration (required)

PUBLIC REGISTER: The Science Council maintains a [public register](#) of CScis. If you would like to appear on this register, tick below.

I confirm that I would like to appear on the CSci public register (optional)

CONFIDENTIALITY STATEMENT: All information you hear about participants in the workshop will be considered Confidential Information, unless the subject of that information clearly states otherwise. This information may be personal or business and includes their presence at the workshop. By signing this form, you confirm that you have read the terms of this Confidentiality Statement and agree to abide by its terms.

Applicant's Undertakings

I agree to **annually revalidate** my award against the IES and Science Council CPD standards in order to retain the designation. This will involve submitting CPD on an annual basis through the IES online CPD recording tool. Failure to do this will result in losing my CSci status.

I wish to **apply for registration** as a Chartered Scientist and declare that the information I have given in this application is, to the best of my knowledge, accurate and true.

I agreed to **abide by the Code of Professional Conduct** issued by IES and accept that any breaches of the Rules or the Code of Professional Conduct will be dealt with under disciplinary procedures. The Code states that members shall:

1. exercise professional skills and judgement to the best of their ability and discharge professional responsibilities safely and with integrity;
2. strive to ensure the enhancement of environmental quality and sustainable development and the mitigation of environmental harm;
3. have full regard for the public interest at all times;
4. commit to maintaining professional competence by undertaking appropriate continuing professional development and give all reasonable assistance to further the education, training and professional development of others; and promote the Institution's object, aims, values and standing.

_____x

Signature of Applicant

Date: DD/MM/YYYY

Please email an electronically completed or scanned copy to info@the-ies.org.