

INSTITUTION OF SURVEYORS OF KENYA
P.O. BOX 40707
NAIROBI

(Registered under the Societies Act of Kenya, 1966)

APPLICATION FOR ELECTION AS A FULL/ASSOCIATE/TECHNICIAN/STUDENT MEMBER

Name in full and address in Block Letters

..... I,.....

.....
name) (Surname) (Other

..... of
..... (Business Address)

If applying as a Principal: at present practicing
at.....

.....
Place or places of business

.....
..... in co-partnership
with.....

.....
(strike out words inapplicable)

..... Under the style of firm of

.....
Or, if not applying as a Principal:

..... At present engaged
as.....

To.....
At

.....

Being desirous of admission as a Full/Associate/Technician/student member into the Chapter of
.....of the Institution of Surveyors of Kenya,
having read the By-laws and being willing to conform there to, submit that I am eligible on the

grounds that I have passed the qualifying examination and have the requisite experience.

My qualifications are set forth in my answers to the following questions viz;

- 1) Are you, or have you ever been
a member of the institution or applied
for membership? If so, give particulars.
 - 2) What is your age?date of
birth.....
 - 3) Give particulars of any Honours or
Decorations which you may have
 - 4) Are you a member of any other
Professional Institution or Society?
 - If so, please give particulars including
grade and any other professional
 - examinations which you may have
 - passed with date
- 5) If applying as Principal for how
many years have you been a Principal?
 - 6) If not applying explain
fully the position you are now occupying
 - and state the number of years you have
 - been engaged in this position.
 - 7) Give detailed particulars of your training
and experience in the profession, with duties
 - and names and addresses of firms and
 - Principals, and state if member of the
 - Institution of Surveyors of Kenya.
 - 8) If employed in a Public Department

state name of Chief Officer and whether
he is a Member of the Institution of
Surveyors of Kenya.

9) Indicate the type of work undertaken
by the firm or Department (please enclose
a sample of printed letter heading)

10) If a Public Officer, state:
a) Your present position
b) Whether temporary or permanent
and designation and grade
c) Date of appointment
d) The nature of work undertaken by
you personally

11) State the examinations you have passed
qualifying you Full Membership of
the Institution. Give date of passing
the examination.

12) Are you, or have you ever been a
bankrupt or have you at any time made
an arrangement with your creditors?

I, the undersigned, being proposed for election as a Full, Associate/ Student/Technician member of the **INSTITUTION OF SURVEYORS OF KENYA**, do hereby promise that, in the event of my election I will abide by the constitution and Bye-Laws of the said Institution, as they now exist, or as they may hereafter be altered, amended or enlarged, and I promise to promote the objects of the said Institution as far as shall be in my power, and to uphold the principles and Code of the profession as often as I conveniently can; provided that whenever I shall signify in writing to the Honorary Secretary that I am desirous of withdrawing my name therefrom, I shall (after the payment of any arrears which may be due by me at that period and subject to the said Bye-Laws) be free from this obligation and will return my diploma of membership forthwith.

I also engage that I will not at any time after ceasing to be a member of the Institution use or permit to be used in conjunction with my name, or the name of any undertaking with which I am at any time associated, any designation or expression whatever denoting or suggesting member of or connection with the Institution, referring in any way to my past membership of the Institution.

Witness my hand this.....day of
.....20.....

Signature of
Candidate.....

EMPLOYER'S DECLARATION

The Declaration on this page must be signed by the Principal or a partner in the candidate's firm. Where the candidate is employed in the public Service or by a large undertaking, the signature of the Head or his authorised deputy, of the technical department in which the candidate is engaged must be obtained.

Candidate's other name(s) and surname and private address in full:
.....
.....
.....

is at present in my office where he is engaged in practising as a surveyor.
The candidate is engaged on the following duties:
.....
.....
.....

signature of Principal or Head of Department with qualifications, degrees, etc
.....
.....

Name of Principal or head of Department in block letters
.....
.....

We, the undersigned, being Full Members of the Chapters of
.....
Of the Institution, hereby recommend:
Ms/Mr/Mrs.....for election as a Full/Associate/Technician/
Student member or the Institution , and we believe him/her from personal knowledge, to be a fit
and prepare person to be elected to Full/Technician /Student Membership to the Institution.

- | | |
|---|-----------------------------|
| 1. Signature.....
Who has known the applicant for | Name in Block.....
..... |
| 2. Signature
Who has known the applicant for | Name in Block.....
..... |
| 3. Signature
Who has know the applicant for | Name in Block.....
..... |
| 4. Signature.....
Who has known the applicant for | Name in Block.....
..... |

Entrance fee and initial subscription at the under mentioned rate are payable with this application:

- a) Entrance fee for election as a Full/Associate/Technician /Student Member
Kshs. 5,000 3,000 3,000 500
- b) Annual Subscription Full/Associate/Technician/Student Member
Kshs. 5,000 3,000 3,000 500

Provided that in cases where the candidate or member is a member of the Architectural Association of Kenya, the amounts shown above shall be reduced by fifty percent.

NB: Please enclose your certified copy (ies) of degree/diploma certificate, a letter from the employer and the payment receipt when returning this form.

To be left blank for office use only

Date issued.....Entrance fee received.....

Date received.....Subscription received.....

The above named was recommended for election as a Full/Associate/Technician/Student Member on
.....By the Chapter ofof the I.S.K.

CHAPTER SECRETARY

Date received.....

Entrance fee received..... Subscription
received.....

The above named was elected a Full/Associate/Technician/Student Member
.....Register Number.....

HONARARY SECRETARY