


Application / Registration Fee: Application / Registration Fee: New member applications, other than those for student membership, must be accompanied by full payment of both the initial (non-refundable) application / registration fee, as well as the first year's membership fees (i.e. **R290.00** Application / Registration fee + **R770.00** Annual Membership fee for first year = **R1060.00**).

Our Bank account Details are: IITPSA, Standard Bank, Branch: Midrand, Code: 001155, Account Number: 201146304.

Please use your surname and initials as the reference if making a direct deposit.

Application for Membership  The information given in this form will be kept strictly confidential

 * Mandatory for registration

1 **PERSONAL:** * Mr/ Ms/ Miss/ Dr/ Prof/

Surname: * _____ Full First Names: * _____

Postal Address: * _____ Home Language: * _____

Postal Code: * _____ Email: * _____

SA I.D. Number: * _____ Date of Birth: * _____ Passport No: * _____

Cell No: * _____ Tel. No. (h) * _____

How did you hear about the IITPSA (one word): _____

Business Name: _____	Nature of Business: _____
Address: _____	
Postal Code: _____ Website: _____	Activity of Business: _____
Fax. No. _____	
Tel. No. _____	

I agree to receive future marketing information from IITPSA:* Yes: _____ No: _____

2(A) **School Education:**
Name of School: _____ Highest Grade Passed: _____ Year: _____

2(B) *# **Formal Qualifications:**

Qualification:	Granted by:	Date:	Computer related course:
1			
2			
3			
4			

CERTIFICATES/DIPLOMAS:

Please attach certified copies of degrees / diplomas / certificates and in cases where not indicated on these, a copy of an official document (transcript) to verify the computer content of course(s) where applicable.

A certified copy of a SAQA assessment must be submitted for all non- South African degrees / diplomas.

2(C) **Currently Studying:**

Qualification:	Institution:	Completion Date:
1		
2		

3 **Membership of other Professional Bodies:**


Professional Body:	Grade:	Date:	Member No:
1			
2			

4 * **EXPERIENCE HISTORY:** (A description of what you achieved in each position should be shown on the resumé below)

Name and Address of present and former employers:	Dates:		Job Title:	Function:	Total Months Employed
	From:	To:			

5 **Resumé:** (State any information which may be helpful to the membership committee in determining your grade.)







Please attach a copy of your curriculum vitae (CV)

6 * **Declaration by two referees:** (IITPSA members are preferred, but other persons of good standing are acceptable):

We recommend the applicant as being suitable for admission to the Institute. We agree to supply further information under confidential cover in support of this application, if requested to do so.

Name:	Company:	Job Title:	Telephone:	Signature:	Member No:
1.					
2.					

Note: As part of the application procedure, the applicant and the referees may be interviewed by a Member or Fellow of the IITPSA

7 Please indicate which Special Interest Groups (SIG) are of interest to you: (mark with an x where appropriate)

- Project Governance SIG
- Data Storage, Digital Forensics and Data Recovery SIG
- Enterprise Architecture SIG
- Project Management in IT SIG (PMITSIG)
- Business Analysis & Systems Analysis SIG (BASA)
- Software Testing SIG (SIGIST)

8 I hereby apply for admission to IITPSA. If admitted I hereby undertake to abide by the Constitution, Code of Professional Conduct, Rules and Regulations of the Institute

Applicant's Signature: _____

Date: _____

Chapter Recommendation

	Name:	Date:	Recommended Grade:	Signature:
1. Chapter Chairman				
2. Membership Committee				