

Admission Application Form

Application for Membership or Transfer of Membership Grade



Personal Information

Family Name: _____

Given Names: _____

Date of Birth: _____ (day) / _____ (month) / _____ (year)

Postal Address _____

_____ Postcode _____

Work Telephone Number (0 ____) _____

Mobile Number (0 ____) _____

Home Telephone Number (0 ____) _____

Email Address _____

Website (if applicable) _____

Advice to Applicants

1. A non-refundable Admission Application processing fee of NZ\$100 must accompany all applications for Admission or Re-admission. Changes to membership are not presently charged for.
2. Please allow 14 working days for processing and notice to you of the result of your application.
3. New Admissions are bound by the Rules and Code of Ethics of the Association from the date of Admission.

Declaration

I hereby apply for:

Admission (or Re-admission)

Change of membership from _____ to _____

Date and Place of Application: _____

In the event that I am awarded admission, I unconditionally agree to accept and be bound by the Registered Rules and Code of Ethics of the Association and to uphold its objects. I further declare that all the information supplied by me is a true and fair statement.

Signature of the Applicant: _____

A - Design Discipline

Architectural
Aviation
Cartographic
Civil
Consumer Durable (Product)
Chemical Processing
Clothing

Data Processing
Educational
Electrical
Electronic
Engineering
Environmental (Landscape)
Graphics (Printing)
Interior (Spacial)
Land Transport

Marine (Naval)
Mechanical (Manufacturing)
Production
Railways
Structural

Survey
Telecommunications
Other (please specify)

B - Formal or Academic Qualifications

Qualification

Institution

- 1. _____
- 2. _____
- 3. _____
- 4. _____

- _____
- _____
- _____
- _____

C - Continued Education Record

Course or Qualification

Year/ Duration

- 1. _____
- 2. _____
- 3. _____
- 4. _____

- _____
- _____
- _____
- _____

D - Professional Development History

Membership of Trade / Professional Bodies

Status and Year Admitted / Rescinded

- 1. _____
- 2. _____
- 3. _____
- 4. _____

- _____
- _____
- _____
- _____

E - Work History

Activity / Position Held	Employer / Organisation	Period Engaged
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____
4. _____	_____	_____
5. _____	_____	_____

F - Additional Information

Please feel free to provide any additional information that you wish DANZ to know about.

1. _____
2. _____
3. _____
4. _____

G – Attachments

- C.V.
- Copies of Certificates, etc.
- Photocopy of Licenses etc
- Signed Form
- \$100 application fee
 - Bank Transfer
 - Cheque Enclosed

Send to:	Design Association of New Zealand Inc. PO Box 40813 Upper Hutt 5140 New Zealand
	Or Email to: danz@danz.co.nz