**DEGREE APPRENTICESHIP – LICENTIATE MEMBERSHIP APPLICATION**

***If you wish to apply for Licentiate membership but you are not a Degree Apprentice, please complete the standard Licentiate membership application form:*** [***https://www.rtpi.org.uk/licentiate***](https://www.rtpi.org.uk/licentiate)

**How to submit:** Please pass this completed application form to your Planning School who will submit it to the RTPI on your behalf, to support your Degree Apprenticeship Gateway application.

personal information

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| **Title:**  |  | **Membership number:****(previous members only)** |  |
| **Surname:**  |  |
| **Forename:** |  |
| **Previous surname:** |  |
| **Home Address:** |  |
| **Postcode:** |  | **Telephone number:** |  |
| **Mobile Telephone:** |  |
| **Personal Email Address:** |  |
| **Employer Name:** |  |
| **Employment Address:** |  |
| **Postcode:** |  | **Telephone number:** |  |
| **Email address:** |  |
| **Please send mail to:** | Home address [ ]  | Employment address [ ]  |
| **Please send emails to:** | Personal email [ ]  | Work email [ ]  |

education

*Only candidates who have completed RTPI fully accredited courses are eligible for Licentiate membership - You must provide proof of your degree (certificate or transcript).*

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| Undergraduate ☐ | Postgraduate ☐ |
| **University:** |  |
| **Title of Degree:** |  |
| **Date of commencement:** |  | **Date of successful completion of degree:** |  |

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| Undergraduate ☐ | Postgraduate ☐ |
| **University:** |  |
| **Title of Degree:** |  |
| **Date of commencement:** |  | **Date of successful completion of degree:** |  |

Career

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| --- | --- | --- | --- |
| **Employer** | **Position** | **Date from:** | **Date to:** |
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declaration by applicant

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| Data protection StatementThe information you provide in this application form will be held securely on the RTPI’s database and will be processed in accordance with the General Data Protection Regulation and 2018 Data Protection Bill. The RTPI will neither disclose, nor permit members of its staff to disclose, any confidential and/or personal information you provide unless required to do so by law. Your information will be used to assess your application and notify you of the outcome. If your application is successful the information you have provided will form the basis of your membership record. If we already hold a record of your details, the information provided in this form will be used to update your record. As part of your membership benefits the RTPI contacts members by email and post to keep you informed of the RTPI’s activities and services, including the services provided by its partners. If your membership lapses for any reason, we will continue to contact you for up to one year, unless you actively contact us to cancel your membership.**If you do not consent to us using your data in this way then your membership application will not be processed and it will be returned to you.** If you are a current RTPI Student Member, this may affect your current membership status. You can withdraw your consent at any time by contacting us at dataprotection@rtpi.org.uk. This may mean that we are no longer able to provide you with the membership service you have signed up for. |

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| **[ ]**  **I wish to be elected as a Licentiate of the Royal Town Planning Institute. I consent to my application being processed and my data being used as outlined above.  *(please tick)*** |
| Signature: |
| Date: |

EQUALITY AND DIVERSITy

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| The Institute regularly analyses the profile of its membership in order to monitor the effectiveness of its policy for equality, diversity and inclusion. Although it is not compulsory to provide the following information, it will be an invaluable aid for the Institute to put in place mechanisms to ensure that its membership is representative of the UK population.This information will be held on the Institute’s database in accordance with the General Data Protection Regulation and 2018 Data Protection Bill. It will be treated confidentially and will not be divulged to other parties. |
| Date of Birth | DD/MM/YY |
| Gender  | Male [ ]  Female [ ]   |
| Under the Equality Act 2010 a disability is a physical or mental impairment; that has a substantial and long-term adverse effect on the ability to carry out normal day-to-day activities. Do you consider yourself to have a disability in accordance with the Equality Act?  |  Yes [ ]  No [ ]  |
| If you answered ‘yes’ to the above question, please provide details on the nature of your disability. |  |
| What is your nationality? |   |
| Is English your first language? | Yes [ ]  No [ ]   |
| If you answered ‘no’ to the above question, what was your first language? |  |
| I would describe my ethnic origin as: |
| **Asian / Asian British**[ ]  Bangladeshi[ ]  Chinese[ ]  Indian[ ]  Pakistani[ ]  Any other Asian background, please describe:**Black / African / Caribbean / Black British**[ ]  African[ ]  Caribbean[ ]  Any other Black / African / Caribbean background, please describe: | **Mixed / Multiple ethnic groups**[ ]  Asian & White[ ]  Black African & White[ ]  Black Caribbean & White[ ]  Any other mixed / multiple ethnic background, please describe:**Other Ethnic Group**[ ]  Arab[ ]  Any other ethnic group, please describe: | **Undisclosed**[ ]  I do not wish to disclose my ethnic origin**White**[ ]  Welsh / English / Scottish / Northern Irish / British [ ]  Irish[ ]  Gypsy or Irish Traveller[ ]  Any other White background, please describe: |