



**Application for Consideration of Upgrade to Fellow Grade**  
Applications open from the 1<sup>st</sup> of March to 1<sup>st</sup> of July.

<b>IFSM Fellow Grade Application</b>	
<b>First Name:</b>	Click or tap here to enter text.
<b>Last Name:</b>	Click or tap here to enter text.
<b>Membership Number:</b>	Click or tap here to enter text.
<b>Start Date at Member Grade:</b> (minimum of 8 years)	Click or tap here to enter text.
<b>Email Address:</b>	Click or tap here to enter text.
<b>Mobile/Telephone:</b>	Click or tap here to enter text.
<b>Address:</b>	Click or tap here to enter text.
<b>County/City:</b>	Click or tap here to enter text.
<b>Postcode:</b>	Click or tap here to enter text.

<b>Applicant</b>	
<p><b>Please write 500 words on “Why you should be a Fellow”:</b></p> <p>(This should include contributions you have made to both the Institute and the fire safety industry)</p>	<p>Click or tap here to enter text.</p>

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***Please attach your CV with this form as part of the application.***

<b>Nominated By</b>	
<b>First Name:</b>	Click or tap here to enter text.
<b>Last Name:</b>	Click or tap here to enter text.
<b>Membership Number:</b> (if applicable)	Click or tap here to enter text.
<b>Start Date of Membership:</b> (if applicable)	Click or tap here to enter text.
<b>Outline your Credentials within the Fire Safety Industry:</b> (only applicable if you have not been a member of the Institute at Member grade for 5 years or more)	Click or tap here to enter text.
<b>Email Address:</b>	Click or tap here to enter text.
<b>Mobile/Telephone:</b>	Click or tap here to enter text.
<b>Reason For Nomination (250 words):</b>	Click or tap here to enter text.

<b>Nominated By</b>	
<b>First Name:</b>	Click or tap here to enter text.
<b>Last Name:</b>	Click or tap here to enter text.
<b>Membership Number:</b> (if applicable)	Click or tap here to enter text.
<b>Start Date of Membership:</b> (if applicable)	Click or tap here to enter text.
<b>Outline your Credentials within the Fire Safety Industry:</b> (only applicable if you have not been a member of the Institute at Member grade for 5 years or more)	Click or tap here to enter text.
<b>Email Address:</b>	Click or tap here to enter text.
<b>Mobile/Telephone:</b>	Click or tap here to enter text.
<b>Reason For Nomination (250 words):</b>	Click or tap here to enter text.

<b>Disclaimer:</b>	
<input type="checkbox"/>	I confirm that by submitting this application to the Institute and by ticking this declaration box, the information I have provided within this application and its supporting documentation is true and correct at the time of submission and I agree to abide by the Rules and Regulations of Membership of the Institute.
<b>Signed</b>	Click or tap here to enter text.
<b>Date</b>	Click or tap to enter a date.

***Please send the £175.00 application fee alongside your application to [membership@ifsm.org.uk](mailto:membership@ifsm.org.uk) by 1<sup>st</sup> July.***