

FORM 1A 12/09

To be submitted to: CAAV Market Chambers, 35 Market Place, Coleford, Gloucestershire GL16 8AA.

THE CENTRAL ASSOCIATION OF AGRICULTURAL VALUERS

APPLICATION FOR STUDENT MEMBERSHIP

I.....
(FULL NAME IN BLOCK LETTERS)

of.....

..... Post Code
(ADDRESS IN BLOCK LETTERS)

BEING interested in agricultural valuations and being in full time education (including a sandwich year placement)

HEREBY APPLY for admission to the Central Association of Agricultural Valuers as a student member and

ENCLOSE a cheque (made payable to the CAAV) of the annual subscription.

I UNDERTAKE that so long as I am a member of the Central Association of Agricultural Valuers, I will observe and abide by the Articles of Association, Bylaws and Regulations of the Association for the time being in force.

Dated this day of 20

Signature

FOR CENTRAL ASSOCIATION USE

Application approved on behalf of the Central Association of Agricultural Valuers on

Signature

QUESTIONNAIRE

To be Completed by Applicants for Student Membership

1. Full name
2. Title – Mr/Mrs/Miss/Ms/Other
3. Date of Birth
4. Name of college/university
5. Telephone number
6. Mobile number
7. E-mail address
8. Home address
- Postcode
- Home telephone
- Is this your correspondence address? Yes/No
9. State grade of RICS membership
10. Give details of any other qualifications, diplomas, or degrees
11. What course are you on?
- Is it a part time course? Yes/No
12. When do you expect to graduate?
13. If on a sandwich year – name and address of your employer
- Postcode
14. Give details of your other training and employment within the profession, with dates and position(s) held.

Signature

Date

CERTIFICATE

This certificate must be signed by a Fellow of the Central Association of Agricultural Valuers who:

- will usually be your CAAV college representative or your employer if on a sandwich year
- must be a member of the Local Association in the area where either the college or the sandwich year employer is located.

I

being a Fellow of the Central Association of Agricultural Valuers, have satisfied myself as to the applicant's ability and integrity and propose him/her as a suitable person for student membership.

Signed Date.....

Membership of Local Associations

Local association membership is optional for student members.

If you do not want to join a local association then do not complete this section.

If you wish to join a local association please indicate which one:

I wish to join the Association

Two copies of this form will need to be completed and sent to the secretary of the local association you intend to join who will process them for the CAAV.

This application has been approved by the
Association.

Signed Date.....

(Secretary to the Association)

