

**CENTRAL ASSOCIATION OF AGRICULTURAL VALUERS**

**APPLICATION TO SIT ENTRANCE EXAMINATION  
AND FOR FELLOWSHIP**

NB TO BE COMPLETED IN DUPLICATE AND SUBMITTED BY 31<sup>ST</sup> AUGUST 2018

To: The Secretary and Adviser of the Central Association of Agricultural Valuers  
Harts Barn Farmhouse, Monmouth Road, Longhope, Gloucestershire GL17 0QD

I .....  
*(full name in block capitals as it would be shown on the Fellowship Certificate)*

a Probationer Member of the ..... Association

INTENDING to become a Fellow of the Central Association of Agricultural Valuers HEREBY APPLY to sit the Association’s examination for Fellowship.

I UNDERTAKE that, if successful, I will throughout my time as a Fellow of the Central Association of Agricultural Valuers observe and abide by the Articles, By-laws and other regulations of the Association.

- ◆ I have/have not sat the exams before *(delete as applicable)*:
- ◆ I am applying to take *(delete irrelevant options)*:
  - (a) all papers
  - (b) the Written Part only
  - (c) the combined Practical/Oral Parts only
- ◆ I enclose a cheque for £..... made payable to the CAAV  
*(£430 for all parts; £250 for Practical/Oral only; £180 for National Written only)*
- ◆ I have paid my examination fee of £..... electronically on this reference .....  
*(including either my name or membership number)*
- ◆ I have attended the following official CAAV tutorials **between 1st September 2015 and 6th September 2018 (date of the National Tutorial); equivalent to 4 full day tutorials** of which at least 2 must be for full days and enclose official slips certifying attendance.\*

Date Full days	Slip Attached	Previously Sent	To Follow	Date Half days	Slip Attached	Previously Sent	To Follow
.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

*NOTE: Original slips previously sent are held by CAAV but all must be listed here. Candidates are advised to retain copies. Do not write “see last year’s application”.*

\*Do not hold this form for late certificates – they can be forwarded on later

- ◆ I have read the Guidelines for Examinations (2018 edition) which includes the syllabus

## ARRANGEMENTS FOR THE EXAMINATIONS

**1. Examination Centres** – see sections 1.5 and 2.3 in the Guidelines.

The initial allocation of candidates to centres is by local association/place of work. If this would not be suitable or should we need to re-allocate candidates, please number the centres in order of preference.

**NB While we will endeavour to allocate you accordingly this cannot be guaranteed.**

Eastern  Midland Counties  Northern   
Scotland  Southern  West Midlands-Wales   
Western Counties-Cornish

**2. Dyslexia, Medical or Other Conditions and Special Requirements** (see section 2.4 of the Guidelines) – Are there any medical or other circumstances relevant to your taking the examination of which the Examiners should be aware (eg dyslexia)?

.....  
*Please supply supporting evidence with this application.*

Please identify any special requirements that need to be met .....

**3. Option to Use a CAAV-Provided Laptop in the Written Papers**

(see sections 1.3 and 3.3 of the Guidelines)

I wish to answer the written papers using a **laptop** rather than by hand – Yes  No

**4. State where the CAAV is to send all examination correspondence and your results**

(please select only **one** option):

**EITHER** Option 1 – Postal Address

.....  
..... Postcode .....

**OR** Option 2 – E-mail Address .....

## PERSONAL DETAILS

*The CAAV is committed to protecting your personal information. For guidance on how the CAAV will collect, use and share your personal information, please refer to our Privacy Notice which is published on the website ([www.caav.org.uk/Terms\\_and\\_Conditions.aspx](http://www.caav.org.uk/Terms_and_Conditions.aspx)). A hard copy is available on request.*

(a) Date of Birth .....

(b) Title Mr/Mrs/Miss/Dr/Other .....

(c) Maiden Name (if applicable) .....

(d) Other qualifications, honours or titles .....

(e) Qualified Membership of RICS ..... Date .....

(f) Qualified Membership of Other Professional Body ..... Date .....

**Present Employment:** .....

Address .....

..... Postcode .....

Telephone Number .....

E-mail ..... Mobile No .....

Your status Partner/Manager/Director/Principal/Assistant/Graduate/Trainee/Other

.....

**SIGNATURE OF APPLICANT**

..... Date .....

**DECLARATION BY PROPOSER**

*(To be completed by a Fellow of the Central Association of Agricultural Valuers)*

I .....

*(name in block capitals)*

Of .....

*(address in block capitals)*

being a Fellow of the Central Association of Agricultural Valuers have interviewed the applicant and **am of the opinion that** the applicant has the ability, integrity and experience as an agricultural practitioner to be a Fellow if successful in the examinations.

Signature ..... Date .....

Local Association .....

**DECLARATION BY SECONDER**

*(To be completed by the Secretary, Chairman/President or the Training Officer of the Local Association for the candidate)*

I .....

Secretary/Chairman/President/Training Officer of ..... Association

being a Fellow of the Central Association of Agricultural Valuers confirm that **I believe** the applicant to be sufficiently experienced to take the examination and, if successful, apply for Fellowship of the Association.

Signature ..... Date .....

Local Association .....

## QUALIFICATION FOR FELLOWSHIP

### To be completed by CAAV Secretariat

The candidate has

(i) achieved ..... % in the Written part in 20.....

(ii) achieved ..... % in the Practical part in 20.....

(iii) achieved ..... % in the Oral part in 20.....

With an overall mark of .....%

these results qualify the candidate for Fellowship under the rules.

### CAAV SECRETARIAT APPROVAL

Fellowship approved on behalf of the Central Association of Agricultural Valuers

### SIGNATURE OF CAAV SECRETARY

..... Date .....