

STUDENT MEMBERSHIP APPLICATION PACK

If you are seeking to become a certificated enforcement agent, student membership is available for a period up to twelve months. Membership may be granted if the applicant can provide evidence that training has or will be undertaken and if details are provided of the business in which the applicant will be working. Upon completion of their training and certification, student members can then apply for private membership.

The subscription cost for student membership is £60 per annum which will be billed upon approval of your application. The subscription fees are reviewed annually.



APPLICATION FOR STUDENT MEMBERSHIP OF CIVEA

Section 1 Applicant Information – Personal Information Full name: Any previous names used: Home Address: Email Address: Home Telephone: Mobile: Years at this address: (If less than 10 years, please complete section 2) Age: Date of Birth: Which details should the association use to contact you (please tick) Home **Business** Are you: NO YES Self-Employed NO **Employed**



Preser	nt business/e	employers name and address:	
Teleph	one Number	<u></u>	
Email	Address:		
How Ic	ong have you	been with this employer	(if less than 10 years please complete section 3)
Please	e complete a	as appropriate:	
1.	Have you	applied for CIVEA membership before?	
	YES	NO □	
	If yes, plea	ase give date	
2.	Have you	ever had a court judgment made against you?	
	YES	NO	
	If yes, plea	ase provide further details:	
	-		



	3.	Have you ever been convicted of a criminal offence?				
		YES NO				
	If yes, please give details, including the dates:					
	4.	Give details of other professional bodies to which you belong or have applications pending:				
		Section 2				
		Previous Home Address				
Previf ne	viou ces	is home addresses within the last ten years. Please indicate the dates to and from (continue on a separate sheet sary)				
Add	res	s:				



Date to and from:	
Date to una nom.	
Address:	
Date to and from:	
	Section 3
	Previous Employment/Self Employment or Full Time Education
Previous give details	s of previous employment, self-employment and/or full-time education in the past 10 years (continue
on a separate sheet in	r necessary)
Name and Address:	
Position on leaving:	
•	
Date from:	Date to:



Name and Address:	
Position on leaving:	
Date from:	Date to:
les trace	Section 4
Give the names, ac your current emplo	References ddresses, email and telephone numbers of two professional references. One of these should be yer.
REFERENCE 1 Full Name:	
Occupation:	
Mobile telephone:	Email:
Address:	
REFERENCE 2	
Full Name:	
Occupation:	
Mobile telephone:	Email:
Address:	



Section 5

Training Information

Please provide brief details of the	e training you are currently unde	ertaking:	



Section 6

Statement by person making the application

PLEASE READ THIS INFORMATION CAREFULLY. A COPY OF THE CIVEA RULES AND THE CODE OF PRACTICE CAN BE OBTAINED FROM CIVEA UPON REQUEST.

DECLARATION:

- I hereby apply to become a student member of the Civil Enforcement Association. I have read this application form and the answers given are, to the best of my knowledge, information and belief, true and accurate.
- If accepted as a student member of the association I undertake to abide by CIVEA's Rules and Code of Practice
 and any additional professional standards introduced by CIVEA, which apply at the time.
- I understand that failure to conform to those Rules, Code and standards, if I act illegally, or if it is believed that I have brought the civil enforcement profession into disrepute I may be subject to disciplinary proceedings under the Rules of the association.
- I understand that as a student member I am not entitled to use the CIVEA logo on any website or business correspondence nor imply that any business with which I am associated is a member of CIVEA.

Signed	Date	
	Dutc	

Completed applications should be sent to:

CIVEA
P O Box 745
Wakefield
WF1 9RJ

Enquiries can be made by email to admin@civea.co.uk