

# Institute of People Management Of Zimbabwe

## APPLICATION FOR MEMBERSHIP

The following payment **MUST** accompany this form:

JOINING FEE plus ANNUAL SUBSCRIPTION FEE. (See current Fee Sheet for amount payable)

Please make **cheques payable to : IPM Zimbabwe.**

Please do not send postal orders; rather use **money orders, bank certified cheques, cash payments or cash deposits:** (Stanbic Bank, FCA Acc: 0222059687601 Parklane Branch, Post the deposit slip indicating the purpose of the funds.)

N.B. •If you are **RE-JOINING**, please indicate the year you **LAPSED**.....

**Having completed this form and checked that you have signed and dated it overleaf, please post to :- IPM Zimbabwe P O Box 10336 HARARE** or deliver in person to the IPMZ National Office at 1 Kwame Nkrumah Avenue (3<sup>rd</sup> Block, 2<sup>nd</sup> Floor) Harare.

By agreement with the Commissioner of Taxes, subscriptions may be claimed against Tax. PLEASE RETAIN YOUR SUBSCRIPTION RECEIPT FOR THIS PURPOSE and attach it to Page 2 of your Income Tax Return.

SURNAME <small>Please print</small>	TITLE: Mr/Ms																				
FORENAMES <small>Please print</small>	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th colspan="2" style="text-align: center; padding: 5px;"><b>FOR OFFICE USE ONLY</b></th> </tr> <tr> <td style="padding: 2px;">Mem. No.</td> <td style="width: 50px;"></td> </tr> <tr> <td style="padding: 2px;">STD Y/N</td> <td></td> </tr> <tr> <td style="padding: 2px;">Grade</td> <td></td> </tr> <tr> <td style="padding: 2px;">D of E</td> <td></td> </tr> <tr> <td style="padding: 2px;">Status J/S</td> <td></td> </tr> <tr> <td style="padding: 2px;">Branch</td> <td></td> </tr> <tr> <td style="padding: 2px;">Pvt Co Y/N</td> <td></td> </tr> <tr> <td style="padding: 2px;">Batch No.</td> <td></td> </tr> <tr> <td style="padding: 2px;">Entered by</td> <td></td> </tr> </table>	<b>FOR OFFICE USE ONLY</b>		Mem. No.		STD Y/N		Grade		D of E		Status J/S		Branch		Pvt Co Y/N		Batch No.		Entered by	
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***For Office Use Only***

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SIGNATURE				1 <sup>st</sup> Degree		2 <sup>nd</sup> Degree			

**DETAILS OF UNIVERSITY DEGREE OR PERSONNEL/TRAINING QUALIFICATIONS**

Title of Qualification	University/Institute/College	Country	Date	
			From	To

Certified Copies of Certificates in support of application **MUST** accompany this form.

**MEMBERSHIP OF OTHER PROFESSIONAL INSTITUTES**

Please give details of name of Institute. Date of joining and membership grade.

**WORK EXPERIENCE AND RESPONSIBILITIES.**

Please supply a brief history of work experience. **This section MUST** be completed.

Please give details in date sequence from the present back to your first job and **EXPLAIN ANY GAPS IN THE DATES SUPPLIED.**

Date from & to (Year & Month)	Position Held	Employer	Description of Duties	Immediate Superior's Designation

PLEASE RE-READ THE INFORMATION YOU HAVE SUPPLIED ON THIS FORM, AND ENSURE THAT IT IS CORRECT. *If there is insufficient space provided, please attach an additional page.*

The Membership Committee of IPM Zimbabwe uses this information to grade your application.

Without your signature, this form will **NOT** be processed.

I,..... certify that the information I have supplied is true and correct in all particulars.

**SIGNATURE :** \_\_\_\_\_

**DATE :** \_\_\_\_\_