



RTPI

mediation of space · making of place

ASSESSMENT OF PROFESSIONAL COMPETENCE

Assessment of Professional Competence – Licentiate Route

1. Contact Details

Membership no:

Title: Mr Ms Mrs Miss Dr Other

Surname:

Forenames:

Previous surname:

CURRENT ADDRESS

Post code:

Address Line 1:

Address Line 2:

City/County:

Country:

EMPLOYMENT ADDRESS (if different from above)

Employer:

Post code:

Address Line 1:

Address Line 2:

City/County:

Country:

Please send all mail to: Current address Employment address

Telephone:
(Preferred contact)

Telephone:
(Alternative contact)

Email (required):

Students should provide a personal email address rather than a university email address



2. Education

RTPI ACCREDITED POSTGRADUATE DEGREE

University:

Degree:

Commencement date:
DD/MM/YY

Date of award:
DD/MM/YY

Full time Part time

I have included a copy of my degree

RTPI ACCREDITED UNDERGRADUATE OR OTHER POSTGRADUATE DEGREE:

University:

Degree:

Commencement date:
DD/MM/YY

Date of award:
DD/MM/YY

Full time Part time

I have included a copy of my degree

3. Career

Please provide details of all past positions held in spatial planning

Employer	Position	FT/PT	%PT*	Date From DD/MM/YY	Date To DD/MM/YY
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

* If part-time, what proportion of a full-time role were you undertaking?



4. Sponsor details

Membership no:

Title: Mr Ms Mrs Miss Dr Other

Surname:

Forenames:

Employer:

5. Payment details

All fees are payable to the Royal Town Planning Institute at the point of application.

APC APPLICATION FEES: £ 230

Payment method – Please select

Cheque attached

Cheque to be forwarded by employer

Credit/Debit Card (please pay online at www.rtpi.biz)

Cheques should be payable to RTPI

Signature:

Date:
DD/MM/YY

6. How to Submit your application

By email: membership.applications@rtpi.org.uk

By post: 41 Botolph Lane, London EC3R 8DL

Membership queries: membership@rtpi.org.uk Ph 0207 929 9462