

# **ASSOCIATE ASSESSMENT OF PROFESSIONAL COMPETENCE (A-APC)**

A-APC APPLICATION FORM		
Last name		
First name		
Membership number		
Associate election date	DD/MM/YY	

Note: This application form must be completed in accordance with Associate Assessment of Professional Competence (A-APC) Guidance June 2019 available at: www.rtpi.org.uk/a-apc-resources. Failure to follow instructions could delay your application.

### EDUCATION

Please list any education that you may have completed since your election to the Associate class. If you wish to add additional courses please include them at the end of the application form under 'additional information'.

University/College: C		Course:		
Date commenced:	Date completed:	Full time		Undergraduate 🗌
DD/MM/YY	DD/MM/YY	Part time		Post graduate 🔲
University/College:		Course:		
Date commenced:	Date completed:	Full time		Undergraduate 🗌
DD/MM/YY	DD/MM/YY	Part time		Post graduate 🔲

#### EMPLOYMENT HISTORY

Document all your planning related roles in chronological order, starting with the most recent experience. If employed by the same organisation in multiple roles, you should list each role separately. Refer to this information as the basis for your Practical Experience Statement (PES).

If you have more than 3 positions, please include this information at the end of the application form under 'additional information'

Company:	From DD/MM/YY to DD/MM/YY
Job title:	Full time 🗌 Part time 🗌
add responsibilities	
add responsibilities	
add responsibilities	

add responsibilities



**ASSOCIATE ASSESSMENT OF PROFESSIONAL COMPETENCE (A-APC)** 

From DD/MM/YY to DD/MM/YY
Full time 🔲 Part time 🗌
From DD/MM/YY to DD/MM/YY
Full time 🗌 Part time 🗌

#### Part-time experience:

If you are relying on any part-time experience you must detail below how you calculated your experience to equal the required total experience. (See section 2 of A-APC Guidance).

#### **CORROBORATOR DECLARATION FORMS**

You must provide a Corroborator Declaration Form **for each role** you have referenced in the written submission and Reflective Journal. Please list all the Corroborator Declaration Forms that you are submitting and add additional rows as required. (See section 8 of A-APC Guidance).

 

 Dates covered by the corroboration period
 Company providing corroboration for
 Corroborator's name and position during corroboration period
 Relation to the applicant

 DD/MM/YY
 DD/MM/YY



**ASSOCIATE ASSESSMENT OF PROFESSIONAL COMPETENCE (A-APC)** 

D/MM/YY
DD/MM/YY
)D/MM/YY

#### Specialism:

Candidates are required to demonstrate a specialism as part of their A-APC application. (See Section 4 [C13] of the A-APC Guidance).

My specialism is:

### SUBMISSION WORD COUNT

Please note that the total overall word limit for the written submission is 7,000 words (+/- 10%) and will be verified in the RTPI's administration checks before your application is accepted.

The word count for the Professional Development Plan (PDP) only includes the text you have added to the template – any text that forms part of the PDP template will be excluded from your word count.

Practical Experience Statement (PES):	0000
Professional Competence Statement (PCS):	0000
Professional Development Plan (PDP):	0000
TOTAL:	0000

#### **REFLECTIVE JOURNAL**

You are required to maintain a Reflective Journal covering a minimum of 1 year recent experience from the date of your Associate election. Please list the dates covered by your Reflective Journal. (See section 6 of the A-APC Guidance).

From	То
DD/MM/YY	DD/MM/YY

#### **CHECKLIST**

I have included the following with my application:

A-APC Application Form

Personal Details and Payment Form



#### **ASSOCIATE ASSESSMENT OF PROFESSIONAL COMPETENCE (A-APC)**

Complete written submission with all three components (PES, PCS and PDP)

Reflective Journal covering 1 year experience as an Associate

- Sponsor Declaration Form completed by a Chartered Town Planner
- Corroborator Declaration Form(s) completed by each employer referenced in your application
- Proof of administration fee payment

For details on how to submit your application please see: www.rtpi.org.uk/membership-submit.

Please note that failure to provide any of these items will result in your application being rejected.

#### DECLARATION

## **DATA PROTECTION**

The information you provide in this application form will be held securely on the RTPI's database and will be processed in accordance with the General Data Protection Regulation and 2018 Data Protection Act. The RTPI and its assessors will neither disclose, nor permit members of its staff to disclose, any confidential and/or personal information you provide unless required to do so by law. Your information will be used to assess your application and notify you of the outcome.

If your application is successful the information you have provided will form the basis of your membership record. If we already hold a record of your details, the information provided in this form will be used to update your record. As part of your membership benefits the RTPI contacts members by email and post to keep you informed of the RTPI's activities and services, including the services provided by its partners. The names of elected Chartered Members are published in our magazine – *The Planner* – and on the RTPI's website. If your membership lapses for any reason, we will continue to contact you for up to one year, unless you actively contact us to cancel your membership.

If you do not consent to us using your data in this way then your membership application will not be processed and it will be returned to you. You can withdraw your consent at any time by contacting us at <u>dataprotection@rtpi.org.uk</u>. This may mean that we are no longer able to provide you with the membership service you have signed up for.

I certify that I have read the Associate Assessment of Professional Competence (A-APC) Guidance June 2019, available at: <u>www.rtpi.org.uk/a-apc-resources</u>, and have based my submission on this document. I also certify that all the information contained in this document is true and correct and is based on my personal experience.

I wish to be elected as a Chartered Member of the Royal Town Planning Institute and confirm that, if I am elected, I will abide by and observe the provisions of the Royal Charter, Bye-laws, Regulations and the Code of Professional Conduct, that I will pay the appropriate subscriptions for my class and that I will work to promote the objectives of the Institute.

☐ (Please tick) I consent to my application being processed and my data being used as outlined in the attached data protection statement.

Signature of candidate: (typed name is acceptable)



### CHARTERED MEMBERSHIP ASSOCIATE ASSESSMENT OF PROFESSIONAL COMPETENCE (A-APC)

Date: DD/MM/YY

## **ADDITIONAL INFORMATION**

Please add any additional education or career information here.