

Application Form for Membership to the International Society of Animal Professionals

Pleas	se tick this box if we are allowe	ed to publish your name, town and country on our i	members list:
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Pleas	se return your application by e	mail to b.barton@btinternet.com	
1.	PERSONAL DETAILS		
	Mr/Mrs/Miss/Other		
	Full Name/Title:	,	
	Date of Birth:		
	Address:		
			- -
	City/Town:		
	County/Country:		
	Postcode:		
	Telephone No: (Day)	(Evening)	
	Email:		-
	Animal Related C.V. attached	(circle) [Yes]/[No]	
	Occupation:		
	Membership Category applied	for:	

2. REFEREES

Please give the names of two referees (not related to you or to each other) who have detailed insight into your animal experience.

Name:		
Address:		
Telephone	e /or email:	
Occupatio	n of referee:	
Qualificati	on of referee:	
In what capacity does the referee know you?		
Name:		
Address:		
Telephone	e /or email:	
Occupatio	n of referee:	
Qualificati	on of referee:	
Quannoati		
	pacity does the referee know you?	

3. DETAILS OF MEMBERSHIP OF PROFESSIONAL BODIES

Please give full details of other professional bodies or institutes to which you are a member, and the dates that you joined or enrolled.

a)	Body/Institute: _	
Dat	e Joined/Enrolled:	
b)	Body/Institute: _	
Dat	e Joined/Enrolled:	
c)	Body/Institute:	
d)	Body/Institute:	
f)		
Dat	e Joined/Enrolled:	
g)		
—	e loined/Enrolled:	

4.	DETAILS OF YOUR WORK WITH ANIMALS			
	Please give full details of your work with animals, the dates and held:	the position you		
5.	PLEASE GIVE DETAILS OF COURSES ATTENDED AND YOU CONTINUING EDUCATION:	R		
	Give details, including dates of current enrolment, completed courses, seminars, and lectures attended.			
6.	Please list your Education levels attained at school and universit or college, and in what subjects?	у		

7.	WHAT BOOK(S), ARTICLES OR SEMINARS HAVE YOU READ IN THE LAST YEAR THAT HAVE INFLUENCED THE WAY THAT WITH ANIMALS?	