This form is only to be used by those not already in IOM3 membership and for the purposes of applying for Fellowship only.

Please tick if already registered as🞎CEng 🞎CSci 🞎CEnv 🞎IEng 🞎RSci 🞎REnvP 🞎EngTech

🞎RSciTech 🞎REnvTech

Please state through which professional body:

Section A: Personal Details

Title: Surname**\***:

Forenames (in full)**\***:

Date of Birth**\***:

**\*Required**

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| Section A (Cont’d)  **HOME ADDRESS:**  House number/name and post code:  Country:  Home telephone number:  Mobile telephone number:  Home email:  **EMPLOYMENT DETAILS**  Job Title:  Department:  Employer/Company name:  Employer/Company address:  Post code:  Country:  Work telephone number:  Work email:  **PREFERENCES**  Which address do you wish the Institute to use for postal mailings?  🞎 **HOME** 🞎 **BUSINESS**  **Which email address do you wish to use as your primary email address for IOM3 correspondence and for your website account?** 🞎 **HOME** 🞎 **BUSINESS**  **Preferred Technical Community** (see [www.iom3.org/membership/our-communities/technical-communities.html](http://www.iom3.org/membership/our-communities/technical-communities.html) for full listing):  **Secondary Technical Communities** (optional; you may select more than one):  **Preferred Local Society** (see [www.iom3.org/membership/our-communities/local-societies.html](http://www.iom3.org/membership/our-communities/local-societies.html) for full listing): |

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| Section B: References  Applicants must be supported by two referees who can validate their contribution by each completing and submitting a referee support form.  Referees should ideally be current Fellows of the Institute of Materials, Minerals and Mining. However, IOM3 will accept references from Fellows of other professional engineering and science institutions and professional bodies of equivalent standing. Applicants who are unable to identify suitable referees should contact the Membership Department for advice. |
| Referee 1 (Sponsor)  Name:  Professional Registration(s) & membership grade:  Membership No.: |
| Referee 2 (Seconder)  Name:  Professional Registration(s) & membership grade:  Membership No.: |
| Section C: Declaration  I, the undersigned, certify that the information recorded in this application is true and accurate, and agree that, as a Fellow of the Institute, I will conduct myself honourably in the practice of my profession and to the utmost of my power will maintain the dignity and welfare of the Institute and will observe the Code of Professional Conduct of the Institute.  **I request a Reasonable Adjustment be made to the assessment process on account of a condition or disability; please tick the box if required.** 🞎  **If you request a Reasonable Adjustment, a member of the IOM3 Team will contact you to see how best we can support you through the application process.**  **To celebrate the achievement of those who are awarded Fellowship (FIMMM), IOM3 publishes their names in our member magazine Materials World. If you do not wish to have your achievement published, please tick the box.** 🞎  Signed: Date: The General Data Protection Regulation (GDPR) and Data Protection Act 2018 We are committed to protecting your personal data and will process it in compliance with Data Protection law. For more information on how we process and protect your data and your rights under the new General Data Protection Regulation (from 25 May 2018), please see our Privacy Notice at [www.iom3.org/privacy-notice](http://www.iom3.org/privacy-notice) |

**Please scan and return the completed form to** [membership@iom3.org](mailto:membership@iom3.org)