

The Chartered Institute of Patent Attorneys – Student Application Form

Please complete this form, including the reference and send to membership@cipa.org.uk - It will then be processed through the following Council meeting.
 You will be invoiced after your application has been fully approved.

Title: First Name(s): Surname:

Nationality: Gender: Date of Birth:

Primary Address:

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- @ (work)
- @ (personal)

Qualifications (list course name/location/pass year):

Qualification Title	Pass Date	Awarding Body
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I hereby apply to become a Student of the Chartered Institute and undertake that if elected I will abide by the Charter, Bye-laws and Rules of the Institute.

Signed: Date:

This form must be signed by a CIPA Fellow as referee for your application.

I, the undersigned, having personal knowledge of the above named candidate, and being convinced of the candidate's qualifications and suitability, and good repute, make this proposal for election of Student member.

Signed: Date:

Print Name:



At CIPA we are committed to taking your personal information seriously. The information provided to us will not be sold to any third party by CIPA. It will not be disclosed to any third party for any purpose unless agreed by you, for example inclusion in a members list available to members or the public.

We will only collect personal information from those who choose to communicate with or purchase services from us. We will only use this information to inform you about the benefits and services CIPA provides that you may be interested in. Our Privacy Policy covers how we collect, use, disclose, transfer and store your information.

Please take a moment to familiarise yourself with our policy at: <http://cipa.org.uk/about-us/cipa-privacy-policy/>