

Proposer and Seconder must be voting members of 24 months standing

Proposer: Name.....Signature.....

Seconder: Name.....Signature.....

Endorsed by Interview Committee.....Date.....

PROFESSIONAL ASSESSMENT

ANY OTHER COMMENTS WITH REGARD TO THIS APPLICATION

For Office Use

Date Deposit Paid..... Amount.....

Date Approved by Members From.....To.....

Approved by Management Committee YES/NO Date Approved.....

Date Paid.....