



# Institution of Fire Engineers Application for Membership – Student Grade

Please ensure that this form and any attachments are completed in typescript or block letters.

**NOTE: Please return completed applications to:  
Institution of Fire Engineers, 148 Upper New Walk, Leicester LE1 7QB, UK**

1. Surname/Last Name ..... Title.....  
Personal Names/First Name.....  
Date of Birth..... Occupation.....

2. a) Correspondence Address.....  
.....  
..... PostCode:.....  
Tel: ..... Fax: .....  
E-mail .....

### 3. PRESENT EMPLOYMENT

Name of Employer: .....  
Job Title: .....

### 4. ROUTES TO MEMBERSHIP

Is this application based on an accredited course or an equivalent qualification  Yes  No

If yes, please state qualification/course: .....

### 5. DETAILS OF ANY PREVIOUS OR EXISTING MEMBERSHIP OF IFE

Grade..... Membership No. ....

6. I certify that all statements and answers given on this form and any attachments thereto are to the best of my knowledge true in substance and are made in good faith.

Signature of Applicant ..... Date.....

### DATA PROTECTION

The Institution of Fire Engineers is fully registered under the UK Data Protection Act, and in accordance with this Act, the IFE (and companies processing data on its behalf). will hold and use data contained in this form for administrative purposes.