CILT(UK) Student Registration Form

Please write clearly using BLOCK CAPITAL LETTERS and BLACK INK and tick boxes where appropriate. On successful completion of your studies you may be eligible to upgrade your membership.

Personal Details					
First Name(s):		Surname:			
Mr/Mrs/Ms/Miss/Other Title:	Date of Birth:	Gender: Male Female			
Home Address:		Company Details:			
Post Code: Country: Telephone: Mobile: Email (required):		Post Code: Country: Telephone: Mobile: Email (required):			
Postal correspondence to be sent to:	Work Home	Email correspondence to be sent to: Work Home			
Your Study Options					
Please tick if you are registering for a f	full qualification	Please tick if you are registering for individual units only			
Qualification Title					
Students registering with CILT on eith	er a full qualification or individual units	must complete their unit choices in the fields below:			
Unit Title:					
Unit Title:					
Unit Title:					
Unit Title:					
Unit Title:					
Unit Title:					



CILT(UK) Student Registration Form continued

About You					
Are you a current CILT member?	? If yes, please state whic		Membership No.:		
What is your professional sector:			Unique Learner No. (ULN) <i>if known</i> :		
Ethnic Background					
White	Indian	Pakistani	Bangladeshi	Chinese	
Black African	Other, please specify:		١d	o not wish to disclose	
Learning difficulties and disabi I consider that I have a learning I do not wish to supply this info	difficulty/disability	I consider that I do not hav	ve a learning difficulty/disabili	ity	

How Did You Find Out About CILT(UK)?									
Marketing press/advertising	Internet	CILT(UK) Member	Colleague/Employer						
Logistics & Transport Focus	Web site	Exhibition	Mailing						
Other, please specify:									

Student Declaration

I certify that the statements made in this application are, to the best of my knowledge, correct and up to date. I agree to be governed by the Articles of Association and Bye-Laws of the Institute as they are and as they may, hereafter, be altered.

Signature: Date:

Data Protection Act (DPA) 1998: The above personal information is required in order to effectively communicate with members, to administer their membership in a proper, timely, cost effective and secure manner and to fulfill the requirements of the Institute's Articles of Association and Bye-Laws. The Institute is required by the DPA to ensure that such information is accurate and up to date and you are requested to inform the Institute's Membership Services Department of any changes. Should your membership end, your details will be retained for a further 6 years, unless otherwise instructed by you.

Members shall, as a condition of membership accept the Institute's Code of Professional Conduct as set out by the Institute's Bye-Laws. To acquire a copy of this information please visit www.ciltuk.org.uk/pages/byelaws1 or call the Membership Services Dept on 01536 740104.

In addition to mailings directly associated to your membership, the Institute accepts, from time to time, vetted third-party mailings or emails which we believe may interest you. On such occasions the Institute acts as the mailing facility thereby ensuring the data remains confidential to the Institute. This activity is an important income generator for the Institute and helps keep membership subscriptions to a minimum.

If you DO NOT want us to contact your employer/referee – please tick this box	
If you DO NOT wish to receive vetted third-party postal mailings – please tick this box	
If you DO wish to receive vetted third-party email messages – please tick this box	

Please return your completed form to your Study Centre.



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