

**AM1: Application for Affiliate Membership** for those who:

- Have passed the Joint Insolvency Examination (JIE) set by the Joint Insolvency Examination Board (JIEB); or
- Have passed the JIEB Personal Insolvency Paper and been engaged in the three years immediately before applying in insolvency administration involving not less than 400 hours higher experience in insolvency administration [see Definitions at Appendix I]; or
- Have passed the JIEB Company Insolvency Papers and been engaged in the three years immediately before applying in insolvency administration involving not less than 500 hours higher experience in insolvency administration [see Definitions at Appendix I]; or
- Have passed the IPA Certificate of Proficiency in Insolvency Examination (CPI); or
- Have been engaged in the five years immediately before applying in insolvency related work [see Definitions at Appendix I] involving not less than 2000 hours experience; or
- Have made a significant contribution to the knowledge and practice of insolvency [see Definitions at Appendix I]

Generally, an applicant will be expected to have been engaged in insolvency administration or insolvency related work for not less than 100 hours in each of the three years or five years before applying.

**Notes:**

You may be eligible to become a full Ordinary Member for which you should use Form OM1 if you

- Have passed JIE and have 600 hours higher level insolvency administration experience in the three years before applying; or
  - Have passed the CPI and have 1,800 hours insolvency administration experience, including 1,200 hours higher insolvency experience, in the three years before applying; or
  - Have 3,000 hours insolvency administration experience, including 1,200 hours higher insolvency experience, in the five years before applying
- **Insolvency related work** is defined in the Articles as work requiring knowledge and understanding of current UK insolvency legislation and practice and would include working in a general accountancy, legal or equivalent practice or in a banking or financial institution or other business or organisation or in a government department or agency or public authority where insolvency knowledge and understanding is relevant, as well as advisory and representative work for an insolvency practitioner or anyone who is a party to or whose interests are affected by insolvency or reorganisation or reconstruction of an insolvent's affairs (whether or not subject to a formal insolvency procedure).
- **Significant part** is defined in the Membership Guidance Criteria as an average of 400 hours a year in each of the five years preceding the application.
- **Significant contribution to the knowledge and practice of insolvency** is for Council to judge, but would include authorship of recognised published insolvency books, articles and research: applicants on this basis should submit a summary of the matters which they would invite Council to consider in support of their application.

### ○ **Part 3 – Your Experience and Qualifications**

If you have passed the CPI or the JIE there are no experience or other qualification requirements to become an Affiliate Member; but the information requested will nevertheless be helpful to us to know something about your background. If you are applying on the basis of insolvency related work experience, that should be confirmed by your employer(s). If your application is on a significant contribution basis, then your experience and qualifications will be helpful to us in considering it.

### ○ **Part 4 – Your Sponsors**

Your application should be supported by two sponsors:

- an insolvency practitioner (IP) (whether or not a member of or authorised by the IPA); and
- another IP or a member of a professional body or some other person of standing who are each able to vouch for your good character and suitability to become an Affiliate Member of the IPA.

Your sponsors should provide a letter addressed to the President of the IPA (not “to whom it may concern”) setting out:

- (1) his/her full name, address, telephone and fax numbers and e-mail;
- (2) his/her job title/position and any qualifications, honours, decorations
- (3) the capacity in which he/she has known you, and for how long
- (4) his/her view of your character and suitability to be an Affiliate Member of the IPA.

### ○ **Part 5 – Your Suitability**

The IPA may make such further and other enquiries of third parties as it considers appropriate to satisfy itself as to your suitability to be an Affiliate Member

### **Membership Fee 2018**

Would you please ensure that payment is included when sending in your application. Should your Membership not be accepted by the Association then we will refund the fee in full.

New Members: Entrance Fee	£150
Affiliate Membership (Member Firm)	£225
Affiliate Membership (Non Member Firm)	£280
<b>TOTAL (Member Firm)</b>	<b>£375</b>
<b>TOTAL (Non Member Firm)</b>	<b>£430</b>

**AM1: Application for Affiliate Membership**

*Please complete in typescript or black/blue ink using block capitals for easier reading*

**Part 1 – Your Personal Details**

Title and First Name(s)	
Surname/Family Name	
Nationality and place of birth	
Date of Birth (dd/mm/yyyy)	
Home Name/Number and Street	
City/Town, County and Postcode	
Country (if outside UK)	
Telephone Area Code and Number	
If you are a member of another professional body (or bodies), please provide:	
Name of the body	
Your designatory letters	
Date of your admission	
Your membership number	

**Part 2 – Your Employment Details**

Name of Firm/Partnership/Company for which you work	
How long you have worked here	
Your current job title/position	
Nature of Firm/Partnership/Company business	
Building Name/Number and Street	
City/Town, County and Postcode	
Country (if outside UK)	
Telephone Number (Main Switchboard)	
Firm/Partnership/Company Website	www.
Your E-Mail Address	

We like to use e-mail for the majority of our communications: mail will be sent to your employment address and your employment address will be published in our list of members.

**Part 3 – Your Experience and Qualifications**

Please set out details of your employment during the last five years (including any different job title/position with your current employer): where you application is based on your insolvency related experience, that should be confirmed by your employer(s).

Your Job Title/ Position	Your Employer	Dates you started and left	Insolvency related hours you worked

Please set out details of your professional examination passes (including the CPI and JIE), degrees or equivalents you may have:

Qualification, etc	Date passed

It would be helpful to us in ensuring that you receive the right examination information if you would kindly indicate which examination(s) you are currently studying for and when you plan to sit it (them)

Qualification	Sitting	Qualification	Sitting
<b>CPI</b>		<b>JIE – Administrations, CVAs and Receiverships</b>	
<b>JIE – Personal Insolvency</b>		<b>JIE - Liquidations</b>	

#### Part 4 – Your Sponsors

Please provide details of your two sponsors who should be (1) an IP (whether or not a member of or authorised by the IPA) and (2) another IP or a member of a professional body or a person of standing who are each able to vouch for your good character and suitability to become an Affiliate Member of the IPA:

Name of Sponsor (1)		Position
Firm/Company		
Address		
Tel	E-mail	
How long has your sponsor known you?		
In what capacity has your sponsor known you? [IP, employer, personal, etc]		

Name of Sponsor (2)		Position
Firm/Company		
Address		
Tel	E-mail	
How long has your sponsor known you?		
In what capacity has your sponsor known you? [IP, employer, personal, etc]		

#### Part 5 – Your Suitability for Affiliate Membership

State, and provide full details where you answer Yes:

(a) Have you previously been a member of the IPA (and your membership number)?	
(b) Have you been refused admission to, or been removed from, any professional body or similar association; or is there any action pending?	
(c) Have you been the subject of any adverse findings by the IPA or another professional body or any government, statutory or regulatory authority (including The Insolvency Service) in relation to any matters, whether by way of financial penalty or other disciplinary action (including reprimands, warnings and undertakings); or are there any matters (including complaints) currently being considered by any of them?	

(d) Have you been or are you the subject of a bankruptcy order, sequestration order, voluntary arrangement, deed, scheme, composition or other form of agreement or debt management plan with your creditors; or are there any proceedings pending?	
(e) Have you been or are you a director of, or involved in the management of, a company which has gone into liquidation, administration or administrative receivership or entered into a company voluntary arrangement, scheme, composition or other form of agreement with its creditors; or which has been or is the subject of a statutory or regulatory investigation?	
(f) Have you been the proprietor or partner in any business or been a director of or involved in the management of, any other company which ceased trading leaving creditors unpaid?	
(g) Have you had any judgments entered against you; and are there any still outstanding?	
(h) Have you been the subject of proceedings alleging negligence, misconduct or other liability in relation to an insolvency or other professional matter; or are there any proceedings pending?	
(i) Have you been convicted of any criminal offence, other than a minor motoring offence not resulting in disqualification; or are there any proceedings pending?	
(j) Have you been or are you subject to a disqualification order or undertaking in relation to a company or office or subject to a bankruptcy restriction order or undertaking; or are there any proceedings pending?	
(k) Have you been removed or dismissed from any form of employment or engagement on grounds of misconduct, incompetence or unfitness, or from any fiduciary office or position of trust (whether or not remunerated) including as an insolvency office holder; or is there any action pending?	
(l) Have you been or are you a patient within the meaning of Part VII of the Mental Health Act 1983 or of section 125(1) of the Mental Health (Scotland) Act 1984?	

In addition to the matters mentioned here, the IPA may require information and explanations in and about any relationship and dealings you might have had or have with any individual, firm, partnership or company which has been or is the subject of complaint to or investigation by it (the IPA), another RPB or any other professional body or any government, statutory or regulatory authority (including The Insolvency Service).

## Part 6 - Declaration

(1) I hereby apply for Affiliate Membership of the IPA, for which I believe I am suitable. I acknowledge that I am bound by the IPA Articles, Rules, Regulations and Guidance in relation to my membership.

(2) The information provided by me in this application is true, and I have disclosed here all and every facts and circumstances which are material to consideration of my application. I understand that any false, inaccurate or misleading information provided by me may lead to a refusal of my application, or disciplinary action in relation to, and suspension or withdrawal of my membership of, the IPA.

(3) I will immediately notify the IPA of any material change in the information provided by me here, whether it arises before or after my admission to membership.

(4) I understand that the IPA may seek information relevant to a proper consideration of my application from my current and past employers and from other third parties; and I hereby consent to the disclosure by my present and past employers and other third parties to the IPA.

(5) I attach the following (delete as appropriate):

- Copy of documentation relating to my Certificate of Proficiency in Insolvency pass; or

Copy of documentation relating to my Joint Insolvency Examination pass; or  
Confirmation of my insolvency related experience.

- Letters from my two sponsors
- Explanatory notes which should be signed and dated
- Subscription fees

<b>Signature:</b>	<b>Date:</b>
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