



Please write clearly using BLOCK CAPITAL LETTERS and BLACK INK.

Surname	Forename(s)
Mr/Mrs/Ms/Other	Date of birth
Home address	Company name
	Company address
Country	Country
Postcode	Postal code
Telephone	Telephone
Mobile	Facsimile
Email	Email

Current job title	Date joined organisation
Number of years' experience in logistics and/or transport	Date appointed to current position

Current grade:

Affiliate Member (MILT)

Chartered Member (CMILT) Chartered Fellow (FCILT)

Requested grade:

Affiliate Member (MILT)

Chartered Member (CMILT) Chartered Fellow (FCILT)

If you are unsure which grade to apply for, seek advice from your local CILT section.

Very Important: With this application for membership, please send full Curriculum Vitae giving full details as requested in the Guidance Notes on the reverse side of this sheet, together with copies of your certificates and qualifications.

DETAILS OF REFEREES:

Five members should recommend Application for Fellowship, three members if applying for Chartered Member and two members if applying for Member or Affiliate.

I have read the particulars on this form which to the best of my knowledge and belief are true and from personal knowledge recommend the candidate to the Council for election as an Affiliate/Member/Fellow of The Chartered Institute of Logistics and Transport.

Name of Referee	Tel No	Member No	Membership Grade	Signature
-----------------	--------	-----------	------------------	-----------

If you do not know any members of the Institute, do not worry about this Section – the CILTSA Membership Committee will act as your Referees.

Name of Referee	Tel No	Member No	Membership Grade	Signature

E. DECLARATION

I certify that the statements on this form are correct. I promise that in the event of my election to Chartered status, I will observe the Code of Professional Conduct, will be governed by the Charter and the Bye-laws of the Institute and will promote the objects of the Institute as far as shall be in my power. If at any time I desire to withdraw from the Institute, I will in accordance with bye-law No 21, after payments of all subscriptions or other sums due from me including any subscriptions for the current year; send my resignation to the CILTSA Council and return therewith any certificates of membership held by me.

Signature:	Date:
------------	-------

Correspondence to be sent to: Private Address Company Address (Place tick ✓ in appropriate box)

Membership/Member Upgrade Application

YOUR CURRICULUM VITAE - GUIDANCE NOTES

What needs to be included?

Your Current Position

- Your current role and responsibilities in your organisation.
- Your current budget responsibilities, if applicable.
- The number of employees who report to you.
- The key objectives of the position that you currently hold.
- Your responsibilities, decision making and planning of resource allocation, staff, financial decisions, budget etc.
- Your reporting lines (where possible an organisational chart showing your position in your organisation, to whom you report and who reports to you).

Your Career History

- Give brief details of previous companies, job titles, dates of employment, responsibilities, and any other relevant information, including any notable achievements, to support your application.

Your Education and Training

- Describe University degree and subject(s) taken.
- Full details of qualifications (including name of the institution or awarding body), dates, and results.
- Other courses and CPD (Continuing Professional Development) you may have taken.

Supporting the Institute

- A summary of how you intend to support the Institute and commit to continuing personal and professional development.

CODE OF PROFESSIONAL CONDUCT

The following represents the Institutes Bye-Laws, (22) which as part of the disciplinary process also serves as a code of conduct: -
At all times a Member shall uphold the good standing and reputation of the Institute, and in exercising authority as a professional person shall: -

- (a) comply with the law, custom and practice of any country in which he/she works; and
- (b) not misuse his/her authority or office for personal or other gain;
- (c) not engage in any conduct which would bring the Institute into disrepute

In addition, all members of the Institute must abide by the Code of Conduct of The Chartered Institute of Logistics and Transport.

Members of The Chartered Institute of Logistics and Transport shall support the general objects of the Institute's Charter at all times: -

- Act responsibly towards the welfare, health and safety of all members of their organisation and the impact of Logistics and Transport on the environment and the community in general;
- Uphold the integrity and professionalism of the Logistics and Transport industry;
- Continue their professional development throughout their careers and actively assist and encourage fellow members as well as non-members to advance their Logistics and Transport knowledge and expertise;
- Strive to serve the interests of their employers loyally without compromising their professional integrity or ethics;
- Carry out their duties in such a way as to promote a professional image of The Chartered Institute of Logistics and Transport and the Logistics and Transport industry overall;
- Build their professional reputation on merit and compete fairly where competition is appropriate; and,
- Actively promote international understanding, goodwill and co-operation among those in the Logistics and Transport sectors.

The Entrance Fee/proof of payment must accompany the submission of this Application Form.

Entrance and Regrading Fees for October 2024 to September 2025			Subscription Fees for October 2024 to September 2025		
Grade	Applicants in SA	Applicants outside of SA	Grade	Members in SA	Members outside of SA
Fellow (FCILT)	R1 505	R2 230	Fellow (FCILT)	R1 230	R 1 855
Chartered Member (CMILT)	R1 505	R2 230	Chartered Member (CMILT)	R 860	R1 250
Member (MILT)	R1 505	R2 230	Member (MILT)	R 755	R1 100
Affiliate	R670	R 990	Affiliate	R 470	R 750
Student	---	R 460	Student	R 460	R 670
Regrading Fee	R1 505	R2 230			
			Retired Members	R400	R 550

CILTSA's Banking Details are as follows:

Bank: ABSA Branch: Pretoria Branch Code: 32 334 500 Account No: 00 393 400 62 Account Type: Savings Account