

## THE NEW ZEALAND ELECTRONICS

## INSTITUTE

(Incorporated)

**Charities Commission Registration Number 39965** 

## **APPLICATION FOR ADMISSION OR TRANSFER**

(Private and confidential - All information supplied will only be used by the Institute under the terms of the Privacy Act)

Full Name (Dr/Mr/M	Irs/Ms/Miss):	
Home Address:		
Telephone:	E-Mail:	
Postal Address:		
Date of Birth:	Occupation:	
I apply for:	Admission to the grade of	
	Transfer from the grade of	to
admission to memb		lication form are correct and that on D ELECTRONICS INSTITUTE INC I will be
Signed:		Date:
PROPOSER and S	ECONDER (Persons of standing,	
Proposer:		Title and/or Grade:
In (Company):		
Of (Address):		
Signed:		Date:
Seconder:		Title and/or Grade:
In (Company):		
Of (Address):		
Signed:		Date:
FOR OFFICIAL US 1. 2.	SE ONLY: Recommendations of the	ne Admissions Committee

3.

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## **EDUCATION AND QUALIFICATIONS**

Institution	Subjects	Qualification	Date

Courses & Seminars attended: (Brief details only and duration)

Membership of other Societies:

**EXPERIENCE & RESPONSIBILITIES** 

Give details of positions held, experience & responsibilities involved

То	Details
-	

When complete, send form to:

The National Secretary New Zealand Electronics Institute Inc. 3A Willis St Torbay AUCKLAND 0630