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P O Box 527, Crown Mines
2025

FORM OF APPLICATION FOR PERSONAL MEMBERSHIP

Surname: _____

First Names: _____

Nationality _____ Age (at date of signing) _____

Date of Birth: _____ Place of birth: _____

Identity No: _____

*Private Address _____

Province: _____ Code: _____

Telephone No _____ Fax No _____

Mobile No: _____

Official Designation of Present Post _____

*Name and Address of Firm _____

Principal Activity of Firm _____

Telephone No _____ Fax No: _____

E-Mail : _____

I, the undersigned, certify that the statements contained herein are true. I agree that in the event of our election to any grade of membership, I will be governed by the Constitution of the Southern African Institute of Welding and their By-Laws as now formed or as they may hereafter be altered. I will advance the objectives of the Institute so far as they lie in my power and will attend the meetings thereof, as advised from time to time, as often as possible. I undertake, if elected, to pay the fees in connection with my membership. If, however, I signify in writing to the Secretary that we are desirous of withdrawing from the Institute, I shall (after paying all arrears which may be due by me at that time) be free from obligation.

Signature of Candidate _____ Dated _____

PLEASE CLEARLY INDICATE WHICH ADDRESS CORRESPONDENCE SHOULD BE ADDRESSED TO

Instruction to Applicants

All information on the form MUST be typed or written in block letters. Illegible forms will not be accepted.

Completed application form to be sent via email to the Membership Services Secretary, membership@saiw.co.za.
NB: Certified copies of all certificates must accompany this application.

Applications from abroad, where no section of the Institute exists, may be proposed by persons of equivalent status to corporate members of this Institute.

The applicant may obtain verifying statements from other than the Proposer and Seconder and these may be attached to this application. In such cases their full signature and status must be shown. (See also "NB" over-page).

- NOTE
- (a) A copy of the Constitution and Bye-laws will be posted to the candidate upon his/her election.
 - (b) The qualification for membership will be found on the back of this form.

The Institute is a Technical Institute, whose objectives are to promote the interests of its membership; provide world class training, qualification, certification and accreditation programmes; act as a regional leading point of contact for cooperation with overseas and international organizations involved in welding related technology; be the leading regional resource for information transfer and the promotion of the application of welding related technology; provide support services to industry including an independent expert consultancy service; be a key role player in technology development and research and to be influential in legislative issues and national and international codes, specification and standard.

MEMBERSHIP

The following, in terms of the Bye-Laws, are the qualifications for membership in each particular grade:

1 FELLOWS

A Fellow shall be an individual of scientific or technical eminence, elected to this class by the Council in recognition of distinguished contributions to the science or practice of welding. The distinctive abbreviated title for a Fellow is "FSAIW".

2 HONORARY LIFE MEMBERS

An Honorary Life Member shall be any individual who, whether otherwise qualified for Membership or not has made an outstanding contribution to the Industry or to the Institute and who in the Council's opinion is worthy of such Membership. An Honorary Life Member is not required to

submit an application to the Council, nor is he/she subject to membership fees. The distinctive abbreviation title for Honorary Life Members is "Hon LMSAIW".

3 MEMBERS

A Member shall be any individual who possesses a minimum of 5 (five) years of theoretical and/or practical experience in the field of welding at a level which, combined with relevant qualifications, demonstrates, in the opinion of the Council, a professional competence in the field of welding. The distinctive abbreviation title for a member is "MSAIW".

4 ASSOCIATE MEMBERS

An Associate member shall be any individual involved in the field of welding whom in the opinion of the Council qualifies for membership as an Associate Member. The distinctive abbreviated title for an Associate Member is "AMSAIW".

5 STUDENTS

A Student shall be an individual below the age of 25, studying an approved form of training in the industry and who in the opinion of the Council is considered suitable for membership.

6 CORPORATE MEMBERS

A Corporate Member shall be an organization with a legitimate interest in the field of welding whose membership of SAIW, in the sole opinion of the Council, would be advantageous to SAIW and its members.

SUBSCRIPTIONS

Upon election, fees are due and payable within 30 (thirty) days. If payment is not received within this period, the election falls away and a new application is to be submitted.

The annual subscriptions are due and payable thereafter on the first day of January in each year. Please see website for applicable rate.

A SAIW Certificate of Membership shall be issued upon receipt of payment of subscription.

BRANCH CHAIRMAN'S RECOMMENDATION _____ SIGNATURE _____

FOR OFFICE USE ONLY

DATE RECEIVED AT CITY WEST _____ 20____

RECOMMENDED BY MEMBERSHIP COMMITTEE

TO GRADE _____ ON _____ 20____ SIGNATURE _____

PASSED BY THE COUNCIL ON THE _____

SIGNATURE PRESIDENT _____ SIGNATURE SECRETARY _____

MEMBERSHIP CERTIFICATE ISSUED ON THE _____ 20____

EDUCATION AND QUALIFICATIONS

SECONDARY

School _____

From (year) _____ to (year) _____

Certificates and/or Distinctions received _____

TERTIARY

School, college, University attended:

From (year) _____ to (year) _____

Course or subjects taken _____

Qualifications gained _____

**Do you hold any SAIW / IIW qualifications?
If so, please give details:**

**Please give details of any other welder
Qualifications:**

and/or experience:

(Please state name of firm, position held and period of time with each, with dates:

Have you held any form of membership of this Institute previously? If yes, give details:

**Membership of other societies:
(specify grades and names of societies)**

PROPOSER

From *Personal Knowledge /*Information received, I consider the abovementioned candidate to be a person in every respect suitable for membership of The Southern African Institute of Welding and I propose his election:

Name in block letters:

Member / Employer / Other

Signed: _____

Grade

Date

SECONDER

From *Personal Knowledge / *Information received, I consider the abovementioned candidate to be a person in every respect suitable for membership of The Southern African Institute of Welding and I propose his election:

Name in block letters:

Member / Employer / Other

Signed: _____

Grade

Date

* Delete whichever is not applicable

NB: In each case the Proposer and Seconder provide the information requested above. If they are not members, please indicate whether they are employers or other responsible persons.

If you are unable to supply Proposer/Seconder details, your application may still be considered by the Council upon application. Please contact the Membership Services Secretary for further details.

Please also send me a short CV of yourself