

## Application

# APM Fellowship (FAPM)



Please complete the digital form and return by email. Alternatively, print and send the completed hard copy by post. Our contact details can be found on the back page.

### Section 1: About you

Title	First name		
Surname		D.O.B. (DD/MM/YY)	/ /

### Your contact details

Home address	
	Postcode
Day Tel (inc STD)	Evening Tel (inc STD)
Mobile	Email

### Are you a member of APM? (check the box that applies)

Associate <input type="checkbox"/>	Full <input type="checkbox"/>
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If yes, membership number:

### Type of application (check the box that applies)

New application <input type="checkbox"/>	Re-join <input type="checkbox"/>	Upgrade <input type="checkbox"/>
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## Section 2: Your employment history

Please provide us with details of your current employer

Is your current employer an APM Corporate Partner or Affiliate?		Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
See here for current list: <a href="https://apm.org.uk/corporate-partnership-programme/corporate-partner-list/">apm.org.uk/corporate-partnership-programme/corporate-partner-list/</a>					
Company name					
Company address					
				Postcode	
Email (work)			Your position		
Which is your preferred address for future correspondence?					
By post? (state <b>Home</b> or <b>Work</b> )			By email? (state <b>Home</b> or <b>Work</b> )		

## Section 3: Project experience

Please check one of the following:

I have held Full membership of APM for at least 5 years and have a minimum of five years' additional project delivery experience	<input type="checkbox"/>
I have a minimum of 10 years' project delivery experience	<input type="checkbox"/>
Job title	Company name
Start date	End date
Job title	Company name
Start date	End date
Job title	Company name
Start date	End date

If necessary, continue on an additional sheet.

You'll need to provide a summary which includes your own specific accountabilities or responsibilities in relation to the project delivery experience as a practitioner against the roles referenced.

There is a word limit for your project experience of 500 words.

You're encouraged to use your word count appropriately, as additional evidence to demonstrate your experience won't be accepted. Write your answers in the first person, "I did...". Avoid jargon and company acronyms – remember the panel members won't know your organisation so explain your answers as clearly as you can.

For further information, please see the **APM Fellowship (FAPM) guidance notes**.

## Section 4: Statements of support – personal and third party

### 1. Personal statement

Please provide a statement evidencing how you meet at least **one** of the following eligibility criteria: recognition, contribution to others in the profession or shaping the profession. You can use up to a maximum of 1500 words for the statement.

Additional evidence to demonstrate your experience won't be accepted, you should use your word count appropriately.

### 2. Third party statement

You must provide two **statements of support** from two different people, confirming that they're happy to support your application by signing a pre-written document. You'll need to contact these people in advance and have them complete the statement.. The **statement of support** can be downloaded from our website: [apm.org.uk/membership/fellow](https://apm.org.uk/membership/fellow)

## Section 5: Payment details – new members/re-joins only

By completing the payment details below, payment of your fee will be taken as soon as we receive your completed application.

Please refer to our website for all current prices – [apm.org.uk/membership](https://apm.org.uk/membership)

Subscription fee £

Promotional code (if applicable):

**Literature request\*** (if required, check the box)

*International Journal of Project Management*

\*Additional cost – please contact the **APM membership team** for the applicable fee.

Total £

**1. Payment by card** (check the box that applies)

If you'd like to pay by card, please supply the best telephone number to contact you on.

American Express

Visa

Mastercard

UK Maestro/Delta

Day Tel (inc STD)

**2. Payment by cheque** (check the box)

Make cheque payable to '**Association for Project Management**'

Please return by post to APM at the contact address on the back page.

**3. Payment by Direct Debit**

To set up a Direct Debit mandate contact [info@apm.org.uk](mailto:info@apm.org.uk) for a form.

Please return by post or email to APM using the contact details on the back page.

## Section 6: Data protection and preferences

**Data protection** We look after your data carefully; please ask for our privacy policy or go to: [apm.org.uk/apm-privacy-statement](https://apm.org.uk/apm-privacy-statement) for more details. We'd like to send you information about APM, project management and our products and services.

You can tell us how you'd like to receive information online or by calling us, and opt out at any time:

**Yes please** – I'd like you to keep me up to date (check the box)

**No thanks** – only send me essential information (check the box)

## Section 7: Declaration

I agree to be bound by the **APM Code of Professional Conduct** (check the box).

I agree to abide by the **terms and conditions** of this subscription, which include the APM Code of Professional Conduct (check the box).

Name

Position

Signature (please add your signature in here)

Date (DD/MM/YYYY)

/ /

## Section 8: Application checklist

Please check the boxes

Completed ALL sections of your application

Attached two statements of support

Enclosed the subscription fee (if applicable)



**We are the only chartered membership  
organisation for the project profession**

### **Completed forms to:**

**By email:** [info@apm.org.uk](mailto:info@apm.org.uk)

**By post:** APM membership team,  
Association for Project Management (at the address below).

For queries regarding individual membership, please contact  
the APM membership team:

Tel: 01844 271681 or Email: [info@apm.org.uk](mailto:info@apm.org.uk)

**Association for Project Management**  
Ibis House, Regent Park, Summerleys Road  
Princes Risborough, Bucks HP27 9LE  
0845 458 1944  
[apm.org.uk](http://apm.org.uk)



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