



UPGRADE APPLICATION

Office Use Only

1 Member Details

NAME OF MEMBER _____

MEMBERSHIP NUMBER _____

POSTAL ADDRESS _____

_____ POST CODE _____

CONTACT DETAILS HOME (_____) _____ WORK (_____) _____

MOBILE _____

EMAIL _____

2 Member Status

In order to apply for a Membership Upgrade your IAME Membership MUST be financially current and have NO Outstanding Fees.

Is your IAME Membership Current? **Yes.** I have no outstanding membership fees.

No. I include my outstanding membership fee of: \$_____ with this upgrade.

3 Upgrade Details

Please ensure you tick ALL appropriate boxes.

*A Membership Upgrade can be achieved by undertaking an IAME grading examination **OR** by submitting details and copies of all qualifications and certificates you may hold for consideration.*

I declare I have _____ years work experience in the Automotive Industry as a Technician in the Division of:

<input type="checkbox"/> Light Vehicle Mechanical Technology	<input type="checkbox"/> Heavy Commercial Vehicle & Trailer Mechanical Technology
<input type="checkbox"/> Mobile Plant Mechanical Technology	<input type="checkbox"/> Automotive Air Conditioning, HVAC & Cooling System Technology
<input type="checkbox"/> Automotive Underbody Technology	<input type="checkbox"/> Automotive Electrical Technology
<input type="checkbox"/> Automotive Glazing Technology	<input type="checkbox"/> Automotive Transmission & Driveline Technology
<input type="checkbox"/> Automotive Body Repair Technology	<input type="checkbox"/> Automotive Refinishing Technology
<input type="checkbox"/> Automotive Engine Reconditioning	<input type="checkbox"/> Outdoor Power Equipment Technology
<input type="checkbox"/> Motor Cycle Mechanical Technology	<input type="checkbox"/> Marine Mechanical Technology
<input type="checkbox"/> Automotive Sales & Administration	<input type="checkbox"/> Automotive Training, Assessment & Education
<input type="checkbox"/> Automotive Alternative Fuels Technology	<input type="checkbox"/> Motorsport and Performance Enhancement Technology

Section 3A	<input type="checkbox"/> Upgrade by Qualification - Complete Section A only. <i>(Additional \$50.00)</i>	
	I request the IAME Council assess my request for upgrade based upon the Qualifications which I have listed below and attached copies. <i>i.e. Nationally Recognised Certificate II, III, IV or Office of Fair Trading Motor Vehicle Tradesperson Certificate (OFT MVTC).</i>	
	Certificate Title	Issuing Body
		Date and/or Number (if known)
<input type="checkbox"/> <i>I have attached the necessary copies of Certificates and Qualifications as stated above.</i>		

Section 3B	<input type="checkbox"/> Upgrade by Consideration - Complete Section B only. <i>(Additional \$200.00)</i>	
	I request the IAME Council to assess my request for upgrade based upon the Certificates, documents and information supplied with THIS upgrade form.	
<input type="checkbox"/> <i>I have attached the necessary copies of Certificates, documents and information.</i>		

Section 3C	<input type="checkbox"/> Upgrade by Examination - Complete Section C only. <i>(Additional \$350.00 per attempt)</i>	
	I request the IAME Council to assess my request for upgrade and allocate a grading based upon results of an IAME Examination of the Division ticked on the reverse page.	

I declare that the information provided and attached to this upgrade form is correct and understand that should it be found to be false, inaccurate, or misleading in any way, the IAME Council may withdraw my membership.

Signature _____ Date _____

Mail Completed Application with Payment to:		INSTITUTE OF AUTOMOTIVE MECHANICAL ENGINEERS 11-13 BYRNE STREET, AUBURN NSW 2144	
Amount: \$ _____	<input type="checkbox"/> Cheque / Money Order	<input type="checkbox"/> Capricorn No. _____	
<input type="checkbox"/> Mastercard	<input type="checkbox"/> Visa	<input type="checkbox"/> American Express	<input type="checkbox"/> Direct Debit (Form required)
Card No. <input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/> BPay (Reference Number required)
Card Expiry <input type="text"/>	<input type="text"/>	Signature: _____	<i>Please ensure your email address is noted on the reserve side of this form as IAME will send further details regarding the above payment</i>
Office Use Only	Amount Paid: \$ _____	Invoice No: _____	Invoice Date: _____

TERMS AND CONDITIONS: > Membership is ongoing unless written notification of cancellation is received.
> If Membership goes into arrears, The Automotive Engineer Journal, will cease being sent to you until membership is Current.

Victoria Suite 24, Level 2, 541 Blackburn Road Mount Waverley VIC 3149 Phone: (03) 9548 2555 Fax: (03) 9548 2666	Queensland Unit 1/115 Bluestone Circuit Seventeen Mile Rocks QLD 4073 Phone: (07) 3715 7595 Fax: (07) 3715 6632	New South Wales 11 - 13 Byrne Street Auburn NSW 2144 Phone: (02) 96481 412 Fax: (02) 9648 4241	South Australia 58 Alpha Road Prospect SA 5082 Phone: (08) 8342 1444 Fax: (08) 8342 1555	Western Australia 234B Epsom Avenue Belmont WA 6104 Phone: (08) 9478 1642 Fax: (08) 9478 2397
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