



TRINIDAD AND TOBAGO SOCIETY OF PLANNERS

c/o The Professional Centre
Wrightson Road Extension
Port-of-Spain; Trinidad
E-mail: ttsp25@gmail.com

MEMBERSHIP APPLICATION FORM

Membership Status: (See below for description of Membership Status)

Professional Member

Participating Member

Corresponding Member

Student Member

NB:

Applicants should attach a current CV, including References and a Statement of relevant Work Experience

Name: _____

Mailing Address: _____

Telephone Contact: Home: _____ Work: _____ Cell: _____

E-Mail Address: _____

Current Job Title: _____

Degrees and/or Diplomas (Completed or underway)

Degree/Diploma	Institute	Graduation Date

Membership in other Professional Associations:

- _____
- _____
- _____

I have read the Constitution of the TTSP and agreed to abide by it.

Signed: _____ Date: _____

For Official Use	
Approved <input type="checkbox"/>	Not Approved <input type="checkbox"/>
President: _____	
Secretary: _____	
Date: _____	

Membership Status	
Professional Member:	Persons resident in Trinidad and Tobago, qualified by academic training and experience to practice as Professional Planners in Trinidad and Tobago
Participating Member:	Associated Professionals and persons with academic qualifications and work involvement considered qualified to make a contribution to planning
Corresponding Member:	Persons qualified in all respects for professional membership and residing and practicing planning abroad
Student Member:	Persons attending full or part-time courses at a recognized institution leading to an academic qualification in planning