**IDPE Associate Member Application**

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| --- | --- |
| Name |  |
| Address 1 |  |
| Address 2 |  |
| Town |  | County |  |
| Postcode |  |
| Phone |  |
| Email Address |  |
| Current Employer (if applicable) |  |
| If you are a recent graduate in which subject did you gain your qualification?  |  |

**Are you currently working in the schools’ development sector or have you worked in the sector in the past 12 months?**

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| --- | --- | --- |
| [ ]  Yes | [ ]  No |  |

**If you answered yes to the above, please detail your involvement in the schools’ development sector in the past 12 months?**

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**Briefly tell us why you feel Associate Membership of IDPE would be beneficial to you**

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Please email your application to info@idpe.org.uk. We will then process the application and send an invoice to you at the email address indicated above.