




FIPSA

Forum for Immigration Practitioners South Africa NPC

Recognised professional body with SAQA, in terms of the NQF Act 67 of 2008
(South African Qualifications Authority) 

APPLICATION FOR MEMBERSHIP

DESIGNATION REQUEST FOR:

Immigration Practitioner (SA)

Associate Immigration Practitioner

Immigration Practice General Auxiliary (SA)

Fellow of FIPSA

PERSONAL DETAILS OF APPLICANT:

SURNAME	FULL NAMES	ID NUMBER
Current:		
Maiden:		
Previous:		

CONTACT DETAILS: COMPANY / PLACE OF BUSINESS:

FULL NAME / COMPLETE BUSINESS ADDRESS	TEL NO	EMAIL ADDRESS	CELL NUMBER
FULL RESIDENTIAL ADDRESS			

ALTERNATIVE CONTACT DETAILS:

TEL NUMBER	PERSONAL EMAIL ADDRESS	CELL NUMBER

FORMAL / INFORMAL QUALIFICATIONS:

YEAR OBTAINED	INSTITUTION	HIGHEST QUALIFICATION

DETAILS OF EMPLOYMENT AND YEARS OF EXPERIENCE IN IMMIGRATION

NAME OF EMPLOYER	BUSINESS ADDRESS	CONTACT DETAILS	FROM MONTH / YEAR	UNTIL MONTH / YEAR

THE FOLLOWING DOCUMENTATION IS ATTACHED TO MY APPLICATION FOR MEMBERSHIP:

Note: We group the basic requirements together and thereafter, as per relevant designation.

TYPE OF DOCUMENT	YES	NO	DESIGNATION	REASONS IF NOT ATTACHING
CERTIFIED COPIES OF IDENTITY DOCUMENT (NOT OLDER THAN 3 MONTHS)			ALL	

CURRICULUM VITAE				ALL	
CERTIFIED COPIES OF QUALIFICATIONS (NOT OLDER THAN 3 MONTHS)				ALL	
REFERENCE LETTERS				ALL	
SA POLICE CLEARANCE • PROOF OF APPLICATION WILL BE ACCEPTED • (THE ORIGINAL SAP CLEARANCE TO BE SUBMITTED WITHIN 8 WEEKS FROM DATE OF SUBMISSION OF THIS APPLICATION)				ALL	
PROOF OF BUSINESS REGISTRATION, IF SELF-EMPLOYED OR EMPLOYED				IP, IPA(SA) IPGA, FELLOW	
REGISTRATION WITH SARS, AS APPLICABLE	BUSINESS			IP, IPA(SA) IPGA FELLOW	
	SELF			IP, IPA(SA) FELLOW	
<i>Previous DHA IP CERTIFICATE if applicable</i>				IP, FELLOW	
A PORTFOLIO OF EVIDENCE OF IMMIGRATION MATTERS –					
<u>IP(SA)</u> - Matric or equivalent, Level 4 - Mandatory Examination				IP: 5 YEARS	
<u>IPA(SA)</u> - Grade 10 or Equivalent to Level 2 - Mandatory Examination or 2 years' experience within the immigration industry				IPA: 2 YEARS	
<u>IPGA(SA)</u> - No Formal Qualification but Employed by A Registered FIPSA Member - Official Letter by The Current Company					
<u>FELLOW OF FIPSA ADMITTED ADVOCATE OR ATTORNEY</u> - Certificate of proof to act as a Legal Practitioner - LPC registration certificate - 2 verifiable references: One from FIPSA and one from an organization other than the applicants own - verifiable portfolio of evidence				IPA FELLOW: 5 YEARS	
<u>HONORARY RETIRED MEMBER</u> - written undertaking that they have retired from the immigration industry					

Please forward your application form and required attachments to: newmembership@fipsa.org.za

NON-REFUNDABLE SCREENING FEE: R 875.00

Once a completed application has been received a non- refundable screening fee will be requested and proof of payment, an invoice issued. Proof of payment to be submitted via email address: treasurer1@fipsa.org.za .

The non-refundable screening fee, forms part of the formal credentials record check on the applicant.

Attached any additional information / documentation, which may prove to be beneficial when considering your membership application request.

By signing this form, I declare the following:

- I understand that FIPSA, after evaluating my portfolio of evidence reserves the right to allocate a more suitable designation in line with my experience and qualifications.
- I hereby grant consent to FIPSA to assess/use/store and transfer my personal information conducting and screening of qualifications and criminal checks if applicable
- The information provided above, is indeed true and correct; and
- The certified copies of documentations presented, duly so reflect a true copy of the originals which are in my possession.

Signed at _____ on this _____ day of _____ 20__

SIGNATURE: _____