



## INDIVIDUAL MEMBERSHIP APPLICATION FORM

### 1. TYPE OF APPLICATION

APPLICATION FOR MEMBERSHIP <input type="checkbox"/>	APPLICATION FOR MEMBERSHIP REGRADE <input type="checkbox"/>
HAVE YOU EVER APPLIED FOR BITS MEMBERSHIP BEFORE: Yes <input type="checkbox"/> No <input type="checkbox"/>	MEMBERSHIP NUMBER <input style="width: 150px;" type="text"/>

### 2. PERSONAL INFORMATION (PLEASE USE BLOCK LETTERS)

Title: Mr/ Ms/ Miss/ Dr/ Prof/ Other(specify):		
Surname:	First Name(s):	
Date of birth:	ID/Passport:	
Sex:	Nationality:	
Physical address:	Postal Address:	
City:	City:	
Country:	Country:	
Phone (Office):	Mobile:	Email:

### 3. EDUCATION/QUALIFICATIONS (POST HIGH SCHOOL ONLY. ADDITIONAL QUALIFICATION TO BE INCLUDED IN CV)

QUALIFICATION	AWARDING BODY	YEAR AWARDED	DURATION (MONTHS)

Please supply certified copies of certificates and a transcript of any degrees.

### 4. EMPLOYMENT HISTORY (PLEASE LIST PRESENT EMPLOYMENT FIRST)

EMPLOYER	JOB TITLE	FROM	TO	REFEREE

**NUMBER OF YEARS OF PROVEN ICT EXPERIENCE:**

Please attach detailed CV and written references stating any information that may help the Membership Committee in determining your grade.



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### 5. OTHER PROFESSIONAL MEMBERSHIP

PROFESSIONAL BODY	GRADE	DATE AWARDED	MEMBER NUMBER

### 6. CRIMINAL RECORD

HAVE YOU EVER BEEN CONVICTED OF ANY CRIME OR OFFENSE (OTHER THAN TRAFFIC VIOLATIONS, YOU MAY EXCLUDE ANY ITEMS THAT OCCURRED BEFORE YOUR 16TH BIRTHDAY) IN THIS COUNTRY OR ELSEWHERE?

YES  NO

If "yes", give full particulars of each case in an attached statement.

### 7. BITS COMMITTEES AND INTEREST GROUPS

<p>Please indicate the committees in which you have an interest (mark with an X where appropriate):</p> <p>Education Committee <input type="checkbox"/></p> <p>Finance Committee <input type="checkbox"/></p> <p>Membership Committee <input type="checkbox"/></p> <p>Publicity and Information Committee <input type="checkbox"/></p> <p>Standards, Policy and Advocacy Committee <input type="checkbox"/></p> <p>Women Chapter <input type="checkbox"/></p>	<p>Other areas of interest:</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p>
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### 8. APPLICANT SIGNATURE

I do certify that the information provided above is true and correct. I confirm that, if accepted I will observe the provisions of the Society, its rules and regulations and will conduct myself honorably in the practice of my profession. I will maintain the dignity and welfare of the Society and will observe and abide by its Constitution and Codes of Ethics and Practice.

I confirm that by signing this application form, I have read and understood [BITS data protection policy](#) and agree to the processing of my personal information as outlined therein. I further agree to hold BITS harmless from any claims or liabilities arising from the use or disclosure of my data provided in this application, unless caused by gross negligence on their part.

Signature of applicant:	Date:
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### OFFICIAL USE ONLY

APPROVER	NAME	DATE	RECOMMENDED GRADE	SIGNATURE
<b>BITS President</b>				
<b>Finance Committee</b>				
<b>Membership Committee</b>				

This applicant is admitted for \_\_\_\_\_ grade as per the recommendation of the Membership Committee and as approved above.

Membership Number: \_\_\_\_\_ Date of Enrolment: \_\_\_\_\_ Certificate Issued On: \_\_\_\_\_

Signature of Secretary General: \_\_\_\_\_ Date: \_\_\_\_\_

### AVAILABLE MEMBERSHIP GRADES

STUDENT <input type="checkbox"/>	AFFILIATE <input type="checkbox"/>	ASSOCIATE <input type="checkbox"/>	ORDINARY <input type="checkbox"/>	FELLOW <input type="checkbox"/>	HONORARY <input type="checkbox"/>
GRADE	DESCRIPTION				ANNUAL SUBSCRIPTION
<b>Student Member</b>	Active students in the relevant field without any experience in the field.				BWP50.00
<b>Affiliate Member</b>	Individuals with an interest in supporting BITS' mission but not working directly in the technology or business sectors				BWP100.00
<b>Associate Member</b>	3+ years ICT experience in the ICT technology, business or IT roles				BWP200.00
<b>Ordinary Member</b>	8+ years ICT experience in the ICT industry involvement				BWP300.00
<b>Fellow Member</b>	18+ years ICT experience with significant contributions to the industry				BWP500.00
<b>Honorary Member</b>	20+ year with industry recognition				BWP1000.00
<b>* Administration Fee (New applications only)</b>					
Student – BWP50.00                      Affiliate – BWP100.00					
Payments for the subscription can be made by cash, cheque, deposit or bank transfer into the following account: Account Name: <b>Botswana Information Technology Society</b> Bank: <b>First National Bank</b> Account Number: <b>57360029014</b> Account Type: <b>Current</b> Branch: <b>Mall Branch</b>					