

INDIVIDUAL MEMBERSHIP APPLICATION FORM

1. TYPE OF APPLICATION

APPLICATION FOR MEMBERSHIP <input type="checkbox"/> HAVE YOU EVER APPLIED FOR BITS MEMBERSHIP BEFORE: Yes <input type="checkbox"/> No <input type="checkbox"/>	APPLICATION FOR MEMBERSHIP REGRADE <input type="checkbox"/> MEMBERSHIP NUMBER <input style="width: 100%;" type="text"/>
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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

Please indicate the committees in which you have an interest (mark with an X where appropriate):

- Education Committee
- Finance Committee
- Membership Committee
- Publicity and Information Committee
- Standards, Policy and Advocacy Committee
- Women Chapter

Other areas of interest:

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
BITS President				
Finance Committee				
Membership Committee				

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"/>
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GRADE	DESCRIPTION	ANNUAL SUBSCRIPTION
Student Member	Active students in the relevant field without any experience in the field.	BWP50.00
Affiliate Member	Individuals with an interest in supporting BITS' mission but not working directly in the technology or business sectors	BWP100.00
Associate Member	3+ years ICT experience in the ICT technology, business or IT roles	BWP200.00
Ordinary Member	8+ years ICT experience in the ICT industry involvement	BWP300.00
Fellow Member	18+ years ICT experience with significant contributions to the industry	BWP500.00

*** Administration Fee (New applications only)**

Student – BWP50.00 Others– BWP100.00

Payments for the subscription can be made by cash, cheque, deposit or bank transfer into the following account: Account

Name: **Botswana Information Technology Society** Bank: **First National Bank**

Account Number: **57360029014** Account Type: **Current** Branch: **Mall Branch**