

CA01



## INSTITUTION OF ENGINEERS PAPUA NEW GUINEA INC.

Post Office Box 881 WAIGANI NCD 131, Papua New Guinea

Phone: (675) 3258763 or 3258765 Email: memberservices1@iepng-org.com or memberservices2@iepng-org.com

### APPLICATION FOR MEMBERSHIP & REGISTRATION

1. Non-refundable processing fee must accompany this application
2. Attach recent passport size photo of applicant

#### 1. APPLICANT DETAILS

|                                                                                            |  |                                                            |
|--------------------------------------------------------------------------------------------|--|------------------------------------------------------------|
| Surname <input type="text"/>                                                               |  | IEPNG Membership Number<br>(If Known) <input type="text"/> |
| Other Names <input type="text"/>                                                           |  | Title <input type="text" value="Mr/Mrs/Ms/Miss/Dr/Prof"/>  |
| Preferred Names <input type="text"/>                                                       |  | Date of Birth <input type="text"/><br>(dd/mm/yyyy)         |
| Gender <input type="checkbox"/> Male <input type="checkbox"/> Female                       |  |                                                            |
| Tick the correct box <input type="checkbox"/> Expatriate <input type="checkbox"/> National |  | Country of Origin <input type="text"/>                     |

#### 2. PLEASE SELECT WHAT MEMBERSHIP CATEGORY AND REGISTRATION YOU APPLYING FOR

Tick the applicable box.

| Registration – Application to be registered by the Professional Engineers Registration Board of PNG |                                                                                                                                                                         |                                                                                                                                                             |
|-----------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Professional Engineer (PE)</b><br><br><b>(RegEng)</b> <input type="checkbox"/>                   | Date when registration<br>commences<br>(dd/mm/yyyy)<br><br><input type="text"/><br><br><i>For Expatriates – this date is<br/>your work permit<br/>commencement date</i> | Date when registration<br>expires<br>(dd/mm/yyyy)<br><br><input type="text"/><br><br><i>For Expatriates – this date is<br/>your work permit expiry date</i> |

| IEPNG Membership – Application for membership to the institution of Engineers PNG Incorporated                                                                                                                                                                                                                                                                                                           |                                                                                                                                                     |                                                                                                                                             |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Category of Membership</b><br>Student Member (StudIEPNG) <input type="checkbox"/><br>Graduate Member (GIEPNG) <input type="checkbox"/><br>Technician Member (TechIEPNG) <input type="checkbox"/><br>Companion Member (CompIEPNG) <input type="checkbox"/><br>Member (MIEPNG) <input type="checkbox"/><br>Fellow (FIEPNG) <input type="checkbox"/><br>Hon. Fellow (HonFIEPNG) <input type="checkbox"/> | Date when Membership commences (dd/mm/yyyy)<br><input type="text"/><br><br><i>For Expatriates – this date is your work permit commencement date</i> | Date when Membership expires (dd/mm/yyyy)<br><input type="text"/><br><br><i>For Expatriates – this date is your work permit expiry date</i> |

### 3. CONTACT DETAILS

| Home Address                                         |  |                      | Business Address                                                |  |                      |
|------------------------------------------------------|--|----------------------|-----------------------------------------------------------------|--|----------------------|
| Address:                                             |  |                      | Company:                                                        |  |                      |
|                                                      |  |                      | Position:                                                       |  |                      |
|                                                      |  |                      | Address:                                                        |  |                      |
|                                                      |  |                      |                                                                 |  |                      |
| Town you are living in                               |  | Post code            | Town you are working in                                         |  | Post code            |
| <input type="text"/>                                 |  | <input type="text"/> | <input type="text"/>                                            |  | <input type="text"/> |
| Telephone                                            |  | <input type="text"/> | Telephone                                                       |  | <input type="text"/> |
| Private Email Address (must have one)                |  |                      | Company Email Address                                           |  |                      |
| <input type="text"/>                                 |  |                      | <input type="text"/>                                            |  |                      |
| Fax <input type="text"/>                             |  |                      | Fax <input type="text"/>                                        |  |                      |
| Address you would prefer your mail to go to          |  |                      | Home <input type="checkbox"/> Business <input type="checkbox"/> |  |                      |
| Address to be shown on any register(s) if authorized |  |                      | Home <input type="checkbox"/> Business <input type="checkbox"/> |  |                      |

#### 4. QUALIFICATIONS

Certified copies of your academic qualification (degree etc) and the academic transcript must be provided with your application if not previously supplied to IEPNG.

| <b>Qualification</b><br>(State Degree/Diploma or Certificate) | <b>Length of qualification</b><br>(Years of study) | <b>Discipline</b><br>(Engineering Branch)<br>(e.g. Civil, Mechanical etc) | <b>Education Provider</b><br>(e.g. PNG University of Technology) | <b>Country</b><br>(Country where qualification acquired) | <b>Year</b><br>(Year of Graduation) |
|---------------------------------------------------------------|----------------------------------------------------|---------------------------------------------------------------------------|------------------------------------------------------------------|----------------------------------------------------------|-------------------------------------|
|                                                               |                                                    |                                                                           |                                                                  |                                                          |                                     |
|                                                               |                                                    |                                                                           |                                                                  |                                                          |                                     |
|                                                               |                                                    |                                                                           |                                                                  |                                                          |                                     |
|                                                               |                                                    |                                                                           |                                                                  |                                                          |                                     |

#### 5. PROFESSIONAL MEMBERSHIPS/ REGISTRATION

Please list any professional memberships, competence-graded registrations or licenses that you currently hold or have previously held.

Certified copies of your membership/registration/license certificates must be provided with your application if not previously supplied to IEPNG

| <b>Institution/ Organization</b><br>(e.g. Engineers Australia) | <b>Class or Membership category</b> | <b>Still current?</b><br>Yes/No | <b>Membership and/ or Registration Number</b> | <b>Year joined</b><br>(Date of admission) |
|----------------------------------------------------------------|-------------------------------------|---------------------------------|-----------------------------------------------|-------------------------------------------|
|                                                                |                                     |                                 |                                               |                                           |
|                                                                |                                     |                                 |                                               |                                           |
|                                                                |                                     |                                 |                                               |                                           |
|                                                                |                                     |                                 |                                               |                                           |

#### 6. INFORMATION FOR ASSESSMENT PURPOSES

##### 6.1 PRACTICE AREA

All applicants are assessed for competence in their personal practice area. Refer to document *Instructions to fill in Ca01 application Part6* for more information.

Use 15 to 25 words to describe your practice area - describing both the nature of your engineering activities (using words like 'design', 'production', 'construction monitoring' or 'certification') and the area in which you have current knowledge and skills (using terms like 'electricity generation and reticulation', 'biomass fuels', 'roading networks', 'heavy road transport vehicles' or 'reinforced concrete structures'). Use 'bullet point' type statements rather than full sentences. Include supporting evidence for everything specified in your practice area description and exclude things from the practice area description that are not supported by evidence. [NB – those seeking registration as a Registered Structural Engineer under the Building Act 1977 should include 'Designer of Seismic Capable Structures in accordance with the detail requirements of the PNG Codes of Practice (or internationally equivalent) in their practice area description.]

Please copy this information into your Referee Declaration and Evaluation (Form CA06).

## 6.2 PRACTICE FIELD(S)

**Please select one but no more than two engineering practice field(s)** within which you believe your practice area best fits. This information is only used for selecting suitable assessors and has no relevance to your assessment outcome.

- |                                              |                                         |                                          |                                             |
|----------------------------------------------|-----------------------------------------|------------------------------------------|---------------------------------------------|
| <input type="checkbox"/> Aviation & Avionics | <input type="checkbox"/> Chemical       | <input type="checkbox"/> Geotechnical    | <input type="checkbox"/> Mineral Processing |
| <input type="checkbox"/> Aeronautical        | <input type="checkbox"/> Communications | <input type="checkbox"/> Industrial      | <input type="checkbox"/> Oil & Gas          |
| <input type="checkbox"/> Aerospace           | <input type="checkbox"/> Electrical     | <input type="checkbox"/> Instrumentation | <input type="checkbox"/> Petroleum          |
| <input type="checkbox"/> Agricultural        | <input type="checkbox"/> Electronics    | <input type="checkbox"/> Management      | <input type="checkbox"/> Power              |
| <input type="checkbox"/> Building Services   | <input type="checkbox"/> Environmental  | <input type="checkbox"/> Marine          | <input type="checkbox"/> Surveying          |
| <input type="checkbox"/> Biomedical          | <input type="checkbox"/> Fire           | <input type="checkbox"/> Mechanical      | <input type="checkbox"/> Transportation     |
| <input type="checkbox"/> Civil               | <input type="checkbox"/> Geology        | <input type="checkbox"/> Mining          | <input type="checkbox"/> Other              |



d) You are still able to practice competently as an engineer (250 words)

#### 6.4 COMPETENCE ASSESSMENT – EVIDENCE CHECKLIST

You may send your portfolio of evidence in electronic or printed form. If your portfolio of evidence is over 2 MB in size, do NOT email it but send it by USB Memory Stick or CD. If you send your portfolio of evidence in printed form, you **must** send 1 copy. Refer to the Competence Assessment Registration Guide (CARG) for details of the documentation requirements:

| Check that you have completed all the required documentation and tasks below                       | Number copies required if printed | Please Tick (✓)          |
|----------------------------------------------------------------------------------------------------|-----------------------------------|--------------------------|
| Application for Membership to IEPNG & Registration to PERB (Form CA01)                             | 1 Copy required                   | <input type="checkbox"/> |
| Competence Self Review Form (Form CA03)                                                            | 1 Copy required                   | <input type="checkbox"/> |
| Work History Summary (Form CA04) <b>and</b> updated CV covering engineering activities             | 1 Copy required                   | <input type="checkbox"/> |
| Continuing Professional Development activities (Form CA05) <b>and</b> CPD certificates if attained | 1 Copy required                   | <input type="checkbox"/> |
| Referee Declaration and Evaluation Form (Form CA06)                                                | 1 copy required                   | <input type="checkbox"/> |
| Certified copy of any academic qualifications and/or professional memberships certificates         | 1 Copy required                   | <input type="checkbox"/> |
| Supporting work samples (minimum 2)                                                                | 1 Copy required                   | <input type="checkbox"/> |
| A recent Passport size photo                                                                       | 1 Copy required                   | <input type="checkbox"/> |

#### 6.5 ASSESSMENT CENTRE

If you are required to attend an interactive assessment please indicate your preferred location. Individual arrangements will be made by Assessment panel on date and time to talk to you.

|                          |              |                          |     |                          |          |                          |        |
|--------------------------|--------------|--------------------------|-----|--------------------------|----------|--------------------------|--------|
| <input type="checkbox"/> | Port Moresby | <input type="checkbox"/> | Lae | <input type="checkbox"/> | Mt Hagen | <input type="checkbox"/> | Kokopo |
|--------------------------|--------------|--------------------------|-----|--------------------------|----------|--------------------------|--------|

## 7. REFEREES

Name two referees who are familiar with your engineering activities and can provide comments as to whether you demonstrate competence in each element of the relevant CBA standards. Referees must meet certain eligibility requirements – such as being independent. Referees must have been previously assessed at the level of competence assessment for which you are applying for.

|                                                                                                                                                                                                                                                    |                                                                                         |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------|
| <b>Tick the box to confirm:</b>                                                                                                                                                                                                                    |                                                                                         |
| <ul style="list-style-type: none"> <li>I confirm both referees meet the eligibility requirements</li> </ul>                                                                                                                                        | <input type="checkbox"/>                                                                |
| <ul style="list-style-type: none"> <li>I have supplied both referees with a Referee Declaration and Evaluation (Form CA06) and my completed Competence Self Review (Form CA03) and asked them to submit Form CA06 to IEPNG Head Office.</li> </ul> | <input type="checkbox"/>                                                                |
| <ul style="list-style-type: none"> <li>I have filled in my application deadline date and my practice area on Form CA06</li> </ul>                                                                                                                  | <input type="checkbox"/>                                                                |
| <b>Referee 1</b><br><b>Name</b>                                                                                                                                                                                                                    | <b>Referee 2</b><br><b>Name</b>                                                         |
| <b>Address</b><br><hr/> <hr/> <hr/>                                                                                                                                                                                                                | <b>Address</b><br><hr/> <hr/> <hr/>                                                     |
| <b>Contact</b><br><b>Telephone</b> <input type="text"/> <b>Fax</b> <input type="text"/>                                                                                                                                                            | <b>Contact</b><br><b>Telephone</b> <input type="text"/> <b>Fax</b> <input type="text"/> |
| <b>Email Address</b>                                                                                                                                                                                                                               | <b>Email Address</b>                                                                    |

## 8. IEPNG COMMUNICATIONS AND PRIVACY REQUIREMENTS

### 8.1 IEPNG COMMUNICATIONS

Please select the level of communication you wish to receive. (Tick one from the option below)

|                                                                                                                                                                                                                                                                                                                                                      |                          |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|
| <b>Financial information Only-</b> I only wish to receive my annual invoice for payment and associated reminders such as Statements (i.e. I do not wish to receive any other IEPNG publications).                                                                                                                                                    | <input type="checkbox"/> |
| <b>IEPNG information</b> - I wish to receive financial information, regular IEPNG publications and occasional publications of interest such as Informatory Notes and Branch Newsletters.                                                                                                                                                             | <input type="checkbox"/> |
| <b>Marketing Information</b> - I wish to receive all items listed above, as well as information promoting IEPNG events such as Short Courses and Seminars, Luncheons, Technical Meetings, Conferences, AGM, etc . From time to time there may also be promotional material from selected suppliers of goods and services.                            | <input type="checkbox"/> |
| <b>Board Elections information</b> - I wish to receive Board Nomination form and also to receive the Ballot paper to cast my vote<br><br><b>Please Note:</b> In the case of mail outs promoting goods and services provided by other organizations, <b>confidentiality</b> is maintained at all times through the use of third party mailing houses. | <input type="checkbox"/> |

## 8.2 Return of work samples

IEPNG will retain one copy of application documents on file.

Work samples will be destroyed unless you request that they are returned to you.

Tick 'yes' to have a copy of any work samples returned to you else tick 'No' for the samples to be destroyed.

**Yes**

**No**

☐
☐

## 8.3 Publication of Personal Details

IEPNG publishes the names of all Registered Members on the appropriate web-based register. The names and other information are also published on the PNG Government National Gazette for Professional Engineers and on the newspapers when required.

# 9. DECLARATIONS

## 9.1 Convictions

Do you have any convictions for offences punishable by imprisonment for a term of 6 months or more? Please provide details of any such convictions below:

**Yes**

**No**

☐
☐

Click here to enter text.

## 9.2 Declarations and Authorizations for Membership/Registration

Please complete the appropriate declarations by ticking the relevant boxes below.

I am applying for IEPNG membership. I agree to be bound by the Rules and Regulations of IEPNG including the Code of Ethics, which may be amended from time to time.

☐

I am applying for registration as a Professional Engineer. I agree to be bound by the Professional Engineers Registration Act (PERA) as amended from time to time and the current Professional Engineers Rules, including the code of ethical conduct, which may be amended from time to time. I also agree that I will inform the Professional Engineers Registration Board (PERB) of any matters that may affect my fitness for registration.

☐

For the purposes of assessment I authorize IEPNG Head Office staff and IEPNG-appointed assessors to contact my referees. I also agree that IEPNG can use reports from any of my previous competence assessments in evaluating this application.

☐

### 9.3 For Expatriate Applicants ONLY.

| Details of your Overseas Registration |  |                     |  |
|---------------------------------------|--|---------------------|--|
| Date and Jurisdiction of Registration |  | Registration Number |  |

Conditions on registration (if any) [Click here to enter text.](#)

I certify that:

1. I seek registration in Papua New Guinea as a Professional Engineer in accordance with the Professional Engineers Registration Act (Amended 2007) in relation to the occupations of the IEPNG membership and registration class/category.
2. I am currently registered / not registered with another professional body and my registration is neither cancelled nor suspended. *(cross out one)*
3. I am not the subject of:
  - a. Any preliminary investigations or action that might lead to disciplinary proceedings, or
  - b. Any disciplinary proceedings, or
  - c. Any special conditions in practicing as a Professional Engineer as a result of criminal, civil or disciplinary proceedings.
4. I have declared all convictions that could be punished by imprisonment for a term of 6 months or more.
5. I understand the codes of ethics, legislation and regulations applicable to Papua New Guinea within my practice area.

I agree to be bound by the current Professional Engineers Registration Act (Amended 2007), including the Code of Ethics and any amendments as made from time to time. I also agree that I will inform the Professional Engineers Registration Board (PERB) of any matter that may affect my fitness for registration. I am aware that I will need to undertake a current competence assessment at intervals not exceeding three (3) years to remain on the register.

### 9.4 Certification and Consent

I certify that all information on this form and in my portfolio of evidence is true and accurate. I also consent to my name being published on the IEPNG website for a period not exceeding 21 days along with an invitation to the public to provide evidence about whether I meet the competence standard for membership and registration.

**Signature:**

**Date:**

FOR OFFICE USE ONLY

## PAYMENT DETAILS

(Cut this slip only & send with your application forms)

### 10. METHOD OF PAYMENT

#### 10.1 PROCESSING FEE FOR ASSESSMENT

The Application Form must be accompanied by the prescribed processing fee applicable to the applicant as per the fee schedule. The total amount of payment enclosed or sent shall include the method of payment and the cheque or direct transfer details and sent to the IEPNG Office for processing of your application for membership and registration.

| AMOUNT ENCLOSED/SENT                                                                                                                                             | K                                                                                                                     |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------|
| <b>IEPNG ACCOUNT DETAILS:</b><br>BANK SOUTH PACIFIC, WAIGANI DRIVE – 968<br>CHEQUE ACCOUNT NO. 36191785<br><u>INTERNATIONAL TRANSFER</u><br>SWIFT CODE: BOSPPGPM | CASH/CHEQUE/DIRECT DEPOSIT<br><br>Make <b>cheque payable</b> to IEPNG or in full<br>Institution of Engineers PNG Inc. |

Send your completed application to the **Institution of Engineers PNG Inc.** at one of the addresses below:

**Courier Address:** IEPNG Head Office,  
IEPNG HAUS, Ground Floor  
Section 37, Allotment 5,  
Poinciana Street, Waigani 131,  
National Capital District  
Papua New Guinea

**Postal Address:** IEPNG Head Office  
PO Box 881  
Vision City, NCD 131  
Papua New Guinea

**Email:** [memberservices1@iepng-org.com](mailto:memberservices1@iepng-org.com)

**Website:** [www.iepng.org](http://www.iepng.org)

**Phone:** +675 325 8763 / 325 8765

**Fax:** +675 325 8718