

Section 3A	<input type="checkbox"/> Upgrade by Qualification - Complete Section A only. <i>(Additional \$50.00)</i>	
	I request the IAME Council assess my request for upgrade based upon the Qualifications which I have listed below and attached copies. <i>i.e. Nationally Recognised Certificate II, III, IV or Office of Fair Trading Motor Vehicle Tradesperson Certificate (OFT MVTC).</i>	
	Certificate Title	Issuing Body
		Date and/or Number (if known)
<input type="checkbox"/> <i>I have attached the necessary copies of Certificates and Qualifications as stated above.</i>		

Section 3B	<input type="checkbox"/> Upgrade by Consideration - Complete Section B only. <i>(Additional \$200.00)</i>	
	I request the IAME Council to assess my request for upgrade based upon the Certificates, documents and information supplied with THIS upgrade form.	
<input type="checkbox"/> <i>I have attached the necessary copies of Certificates, documents and information.</i>		

Section 3C	<input type="checkbox"/> Upgrade by Examination - Complete Section C only. <i>(Additional \$350.00 per attempt)</i>	
	I request the IAME Council to assess my request for upgrade and allocate a grading based upon results of an IAME Examination of the Division ticked on the reverse page.	

I declare that the information provided and attached to this upgrade form is correct and understand that should it be found to be false, inaccurate, or misleading in any way, the IAME Council may withdraw my membership.

Signature _____ Date _____

Mail Completed Application with Payment to:		INSTITUTE OF AUTOMOTIVE MECHANICAL ENGINEERS PO BOX 70, BLAXCELL NSW 2142	
Amount: \$ _____	<input type="checkbox"/> Cheque / Money Order	<input type="checkbox"/> Capricorn No. _____	
<input type="checkbox"/> Mastercard	<input type="checkbox"/> Visa	<input type="checkbox"/> American Express	<input type="checkbox"/> Direct Debit <i>(Form required)</i> <input type="checkbox"/> BPay <i>(Reference Number required)</i> <i>Please ensure your email address is noted on the reserve side of this form as IAME will send further details regarding the above payment</i>
Card No. [][][][] [][][][] [][][][] [][][][]	Card Expiry [][] / [][]		
Signature: _____			
Office Use Only	Amount Paid: \$ _____	Invoice No: _____	Invoice Date: _____

TERMS AND CONDITIONS: > Membership is ongoing unless written notification of cancellation is received.
> If Membership goes into arrears, The Automotive Engineer Journal, will cease being sent to you until membership is Current.

Victoria PO Box 10 Greensborough VIC 3088 Phone: (03) 9548 2555	Queensland PO Box 3568 Mount Ommaney QLD 4074 Phone: (07) 3715 7595	New South Wales PO Box 70 Blaxcell NSW 2142 Phone: (02) 9782 1100	South Australia PO Box 104 Enfield Plaza SA 5085 Phone: (08) 8342 1444	Western Australia PO Box 3112 Belmont WA 6104 Phone: (08) 9478 1642
---	---	---	--	---